				l	Sand James	~	1941000				-		a [n Pri	nt form
<u>_</u>	4141	7		NOT F	CATIO	tate of Ne N OF ASB to NJAC	ESTOS	ABATE	MEN 0)	т		臣 (G E	;	W	The second secon
	e of Notification (1) /29/2018					of Building enedict	Owner/0	Operator	r (2)			5	LH'	5	2018	-
Age	ncies Notified EPA DEP	Type Notification Initial Amended	1			Address ate, Zip Co	ode	_				ASBE	STOS LICE	CON	VTRO IG	L&
×	DOL DOH DCA	Amendmen Emergency justification) Cancellation	(including	_	Chath Name o	nam, NJ of Contact enedict					Telepho	one Nu	mber			
	DON	Caricellation				ILITY INF	ODMATI	ON								
	ne of Facility Where wate Residence	Abatement is Takir	ng Place (3)	1 40	ILIT INF	OKWATI	ON	Тур	e of Facility (4)						
	et Address						2		×	School (K-12) Subchapter 8 Other (i.e. privetc.)	(Other th			dings,	home	es,
100	atham								Squ 200	are Feet 00+	# of Flo	ors	114 53	8ldg. <i>A</i> 60+	\ge	
Cou	nty (6) rris				County (STATE	Code (7) USE ONLY)		2000100	rent Use (Prior USE	if being d	lemolis	hed)			
N/A		Hired by Building	Owner (8))	ASC	M No.				struction, LL						
Stre	et Address							Street 63 L		ess er Stocking I	Path					
City,	State, Zip Code									Zip Code Park, NJ 070	35					
Proje	ect Manager for Mon	itoring Firm			Telepho	ne No.		Teleph 862-		No. 9463	100	ense N	10.			
	Date (10) 13/2018		Schedul 09/13/2		mpletion	Date (11)				SHA Monitor struction, LL	С					
Occi	upancy Status During	Abatement (Ched	ck Only Or	ne)				Street	Addre	ess	307-1					
	Facility Closed/Vaca Abatement Perform Other – Describe: _	ated During Entire ed Outside of Norm	Period of a	Abater / Hour	nent s			City, S	tate,	er Stocking I Zip Code Park, NJ 070						
Scop	e of Work (Check A	II That Apply)						LITIC	JIII	ark, NJ 070						
	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	777		Renova Demoli				×	G	ull Containment lini-Enclosure llovebag Proced on-Exempted (*	dure				۵	
	Location	of	200	Locat							<i>y</i> 4114 114		1	Abate	ement pe	
Д	Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Ma	ed Sole intena todial ((12)	nce/		tos Cont thermal surfac		Materia s insu T, or	U.S. 1/2/0-2/3/80	Amou (Spec SF or I	ify	Remova	Repair	Encapsulate	Enclosure
	Baseme	ant	Yes	No	N/A			\			100					ri .
	Daseille	3111	-		X			VAT			1200)	Х		X	
Nam	e of Registered Was	te Hauler		2.0	JDEP W		Cubic			Name of Re	gistered	Landfil				
	Construction, LL	_C			lauler ID 037535		of Was	Y		G.R.O.W.						
Linco	State oln Park, NJ						Dispos TBD	al Date	8	City, State Morrisville	e, PA					
	pleted by Jezdimirovic		Title P.Ma	ınage	r		S	ignature				100000	ate 3/29/2	2018		

CHITOS)	P		CATION	ate of Nev OF ASBE to NJAC	ESTOS	ABATE		17	D	E	0 [0		\mathbb{V}		
Date of Notification (1) 08-30-18					Building (stein Pr			(2)			SE	P.	- 5	201	3	L
	ype Notification) 		Street A	ddress ast Main	St.					ASBES	STOS	3.00	NTR	OL 8	
DEP DOL	Initial Amended Amendment	#			te, Zip Co		1		Aug.	Delivery of the second second	ROUL	LIGI	ENSI	VG_		
DOH DCA	Emergency justification) Cancellation	(including		Name of	Contact Burkart			(7mesi		1	elephone 973) 25					
L DCA L	Cancellation				LITY INFO	ORMAT	ION			1,	313) 23	0-00				_
Name of Facility Where Ab Commercial Property								Ту	pe of Facility (School (K-							
Street Address 20-21 Wagaraw Rd.									Subchapter Other (i.e. petc.)	8 (0				lings,	home	es,
City (5) Fair Lawn				U				Sq	uare Feet	#	of Floors		В	ldg. A	ge	
County (6) Bergen				County (Code (7) JSE ONLY)			Cu	rrent Use (Pri	or if b	eing dem	olishe	ed)			
Name of Monitoring Firm H	lired by Building	Owner (8)		ASCN	l No.				batement Co		or (9)		-11			
Street Address							Street 522	Add	Iress							
City, State, Zip Code							1777-021-031-03		, Zip Code ity NJ 0708	37	Nation of the last					
Project Manager for Monito	oring Firm			Telephor	ne No.		Teleph	none			Licens 0120).			
Start Date (10) 09-08-18		Schedule		npletion [Date (11)				SHA Monitor							
Occupancy Status During A	Abatement (Chec	k Only On	ie)				Street	Add	Iress							
Facility Closed/Vacate Abatement Performed Other – Describe:								state	, Zip Code							
Scope of Work (Check All 1	That Apply)					_	Unio	n C	ity NJ 0708	87						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ттас Арргуу		Renova Demolit						Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedur	е				9	
		100	Locati	27.534									-	Abate	ment pe	
Location o Asbestos-Containing M TO BE ABAT In Facility (13)	aterial (ACM) ED	Use Ma	Normal of Sole intenal todial S (12)	ly by nce/		tos Con therma surfa	scription taining N I systems cing, VA miscellar	/late s ins T, o	r		Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A											te	Ф
Exterior			Х	-		Pipe	Insula	ation	n .		80 LF		X			
		-														
Name of Registered Waste Delfa Contracting LLC			100	JDEP W lauler ID 35240	No.	Cubic of Wa			0.0000000000000000000000000000000000000	100	stered Lar Resource		cove	ery F	acili	ty
City, State Union City, NJ							sal Date 14-18		City, Sta		PA					
Completed by Jaime Delgado		Title Proj.	Mana	ager.		5	Signature	Э				Dat 08	e -30-	18	-	

Print Form

Challe			NOT				BE	STOSABA 60 and 5:			DE	C [7 [
Date of Notification (1)					Nar	ne of Buildir	ng Ov	vner/Operator	(2)			EP		201	0	\parallel
_08/	30 /	18			F	Ramapo	Co	llege of N	IJ	İ	n n	CL	- D	20	Ö	L
Agencies Notified	Type Notific	ation			Stre	et Address						NA COLUMN TO SERVICE STATE OF THE PARTY OF T				
□ EPA	☑ Initial				50	05 Rama	apo	Valley R	ld	Elithopp.	ASBE	STOS	CO	NTR	OL 8	4
☑ DOLWD	Amender Amendm		1			, State, Zip					**************************************	LICE	NSI	M(-i	anar rae	
□ DCA	Emergen		•	a	N	lahwah,	NJ	07430								
(NJAC 5:23-8)	justificati			9		ne of Contac					Telephone N	Vumbe	er		-	
	☐ Cancella	tion			G	ina May	er-	Costa			201-684	4-75	31			
					F.	ACILITY II	VFO	RMATION						-0.75		-1420
Name of Facility Where A	batement is	Taking	Place	(3)		***************************************			T	ype of Facility	(4)	MINIS		Jan 1800	30	
Ramapo College	e - Linder	n Ha	11							School (K-12						
Street Address									7	Subchapter 8 Other (i.e., p	(Other than h	(-12)	al bu	ildina		
505 Ramapo Va	lley Rd								1	homes, etc.)		HIGIG	ai bu	manig	ιο,	
City (5)					Re-shootsta				S	Square Feet	# of Floors			dg. A		
Mahwah										50.000	4		1	8 y	rs	
County (6) Bergen					Co	unty Code (7)(ST	ATE USE ONLY)	С	Current Use (Pri	or if being den R2	nolish	ed)			
Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASCI		Na	me of Abatem	nent	Contractor (9)						
USA Environmen	tal Mana	gem	ent	Inc	00.	112	A	cademy (Co	nstruction	Inc.					
Street Address	04						Str	eet Address								
344 West State	Street						2	05 Rt. 46	W	lest Suite	14					
City, State, Zip Code							1000000	y, State, Zip C			NICOLO CONTRACTO					
Trenton, NJ 0861								otowa, N	J (07512						
Project Manager for Monit William Weisgarb					lephon	e No. 56-8101		lephone No. 73-832-42	244	4 .	License No).				
Start Date (10)		Sched	uled C	omp	letion D	ate (11)	Na	me of OSHA	Mor	nitor			-			
09 / 09 /	18	_09	_ /	_2	0 /	_18_	S	ame as a	bo	ove						
Occupancy Status During							Str	eet Address								
	d During Entir	re Per	iod of	Abat	ement	soribo										
Time of Abatement:	AM	PN	1/	_PA	A	_AM	Cit	y, State, Zip C	ode	9						
Scope of Work (Check all	that apply)			19				□ Eull Con			-: 5			-		
≥3 sf or ≥3 lf			X Re					☐ Mini-End	clos		ative Pressure	•				
≥160 sf or ≥260 lf			☐ De	molit	ion			Gloveba	ag P	rocedure	Fill D					d Cut
			le	Loca	etion	T	1001-11	M NOTI-EXE	emp	oted (*) and Nor	1-Friable Proce	eaure		Proce	-	
Location	of		N	Vorm	ally			Description of	of			1		ateme		
Asbestos-Containing N		1)			lely by ance/			Containing Ma	ater		Amount		Removal	Repair	Enc	Enclosure
TO BE ABATIN Facility					Staff?	(1.6		ermal systems surfacing, VAT			(Specify SF or LF)		3401	air	apsı	nso
(13)	ę.	-		(12	()	_		her miscellane			SF OI LF)		200		Encapsulate	re
			Yes	No	N/A										0	
Linden Hall 62 Ro	oms				X	Sprir	nkle	r Pipes			200 lf		X		X	
		- 1											П	П	П	П
			П													
		-				-			-				_			
Name of Registered Wast	o Hauler	1	Ц	니	NIDEE	Waste	LC	is Vanda of	1,	N(D-)	11 100		Ш	Ш	Ш	Щ
그리아 그 그래 그			F.:	310	Hauler		Wa	oic Yards of ste	1	Name of Regist						
Academy Construction, State	uction inc	٠.			0344	122	-		1	Fairless L	andtill					
								posal Date		City, State						
Totowa, NJ		[I	BD		Morrisville		,				
Completed By (Print or Ty	pe)	Title	PN	Ti.				Signature	1	1 The	1	Date			1071	
John Geleski			L IA	1				1 /	vn	h /MW	7	08	/30	/18		



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



					order control services	V/		14	الما	ILI .	20	10	IL	7
Date of Notification			Name of B	uilding Owr	ner/Operator (2	2)							-	-
10 8 / 2 9	N. A. S.		jennifer	yonkers					ASBI	STOS C	ONTE	ROL &	à	
Agencies Notified EPA	Type Notifica Initial	tion	Street Add	ress						LIDEN	HVG		and their	
☐ DEP	Amended													
	Amendment #	: [City, State,	Zip Code										
□ DOL	☐ Emergency		rutherfo	ord, nj 070	070									
□ DOH	(including justification	\ 	Name of Co	ontact	1000			T	Telephor	ne Numbe				
☐ DCA	Cancellatio	- 11	iennife	r yonkers				- 1		E 09	-			
	Caricellatio	" 11	3		ILITY INFORM	IATIO	N				-			_
Name of facility wh	here abatement	is taking n	lace (3)			-		Type of	Facility	(4)		_		
jennifer yonker			(0)						School	ol (K - 12)				
Street Address	-									apter 8 (C (Private/C			-12)	
										/Homes, e		luai		
								Square	Feet	# of Floor	s	Ble	dg. Ag	ge
City (5)		Cou	inty (6)			33900000	inty Code (7)							
rutherford		RE	RGEN			(Sta	ate use only)	Currer	nt Use (P	rior if bein	g dem	olishe	ed)	
Name of Monitorin	g Firm Hired by	100000			ASCM No.		Name of Abatement	Contracto	r (9)			_	-	
	,			- 1	7100111110.		1		(E. E.)					
Street Address						=	D & S RESTOR Street Address	ATION,	INC.				_	
- 11 -							20 California A	VA						
City, State, Zip Cod	е					-	City, State, Zip Code	a learner of the last of the l					(amilion	-
							Paterson, NJ 07							
Project Manager for	r Monitoring Firn	1	P	hone Numb	er	-	Telephone Number	7505		License	Numb	er		
							973-345-8020			0	1169			
Start Date (10)		Sche	d. Complet	ion Date (11	1)	-	Name of OSHA Mon				-			
09/13/18		00/2	0/10		2.50		D & S Restorat	ion, Inc.		-				
Occupancy Status I	During Ahatama	09/2		and the control of the latter			Street Address							
the state of the s	d/vacated during	The state of the s	10000 - 0000 0000 0000	ement			20 California Av							
Abatement pe	erformed outside						City, State, Zip Code	l.						
Describe: Other-Describ	ne. NORMAL F	IOURS				-1	Paterson, NJ 07	7503						
Scope of Work (ch								Full Conta	inment w	/negative	nrace	ure		
>3 sf or >3 lf	\boxtimes	Renovation	าก		v			Mini-enclo		megative	piess	uic		
≥160 sf or ≥2		Demolitio						Glovebag						
				used solely				Non-Exen	npted (*)	and Non-	riable R	proce	20070	
Location of asbestos-con	taining		enance/cus		1	•			mount		e	e	E n	E
material (acm	n) to be	staff(12)			material (sbestos-containing	877.	Specify S	For	m o	р	С	n
abated in faci	lity (13)	Yes	No	N/A	,			L	F)		v	i	a p	L
basement (behind wa	lls/ceiling)			1	PIPE INSU	LATI	ON	1201	ft		e	FT	П	
coming wa					11.2.11.00			1201				뉘	片	H
								_			H	님	+	H
											H		Ħ	
									7		H	Ħ	Ħ	
Registered Waste H			EP Hauler	ID# C	ubic Yards of V	Vaste	Name of Registered	I Landfill						
D & S RESTORA	ATION, INC.	135	506	_	yds.		TULLYTOWN,		RCE RE	COVER	Y			
City, State PATERSON, N.	J 07503			Disposal D 09/14/13			City, State TULLYTOWN,	. PA						
Completed by (Print	or Type)	Title			Signature		1	,		Date			_	
BOGDAN JOLI	DZIC	PRESID	ENT							08/29/	2018			

D&S Proj. #: 18-180

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

M	E	C			\mathbb{V}	E	In
K			-			· / ***********************************	Processor of the same of the s
		SEP	-	5	2018		

							14 4	SEP -	- 5 SI	110		/
Date of Notification (1)		Name of Bu	uilding Owi	ner/Operator (2)							- Constitution
Agencies Notified Type Notifica	tion	mitchell					A	SBESTOS	CONT	ROL	&	7
EPA Initial	ation	Street Addr	ess				TO CHARLES	LIGE	Nailve			
☐ DEP ☐ Amended												
DOL Amendment		City, State,	Zip Code	E								
L_! Emergency	- 11		k, nj 074.	52								
justification)	Name of Co	ntact				Telep	hone Numb	er			
DCA Cancellation	n	mitchel	l baum									
			FAC	ILITY INFORM	ATIO	N			-			_
Name of facility where abatement	is taking p	lace (3)					Type of Facil					
mitchell baum							=	hool (K - 12 bchapter 8 (oon K	12)	
Street Address							2000	er (Private/			12)	
						11	Bld	gs./Homes,	etc.			
City (5)	I Cou	inty (6)			Co	unty Code (7)	Square Feet	# of Flo	ors	Bla	lg. Age	
225323 (* 0.3k 0.4k)		, (-)				ate use only)	Current Use	(Prior if he	ing dem	olishe	d)	_
glen rock		rgen			1000			,		2	7/	
Name of Monitoring Firm Hired by	Bldg. Owr	ier (8)		ASCM No.		Name of Abatement Co	ontractor (9)					_
				7		D & S RESTORA	TION, INC.					
Street Address						Street Address						
City Chate 71: O. I.						20 California Ave						
City, State, Zip Code						City, State, Zip Code						
Project Manager for Monitoring Firr	n	Ink	none Numb		_	Paterson, NJ 0750)3					
1 Toject Manager for Monitoring Fill		Pr	none Numb	er		Telephone Number 973-345-8020			e Numb 01169	er		
Start Date (10)	Io-k-		5 1 7	-		Name of OSHA Monito	r		01109			_
The Secretary Control of the Secretary Control	Sche	d. Completio	on Date (1	1)		D & S Restoration						
09/12/18	09/2					Street Address						_
Occupancy Status During Abateme		0.740				20 California Aver	nue					
Facility closed/vacated during Abatement performed outside Describe:	entire per of normal	facility hour	ment. rs-			City, State, Zip Code						_
Other-Describe: NORMAL I	HOURS				-	Paterson, NJ 0750)3					
Scope of Work (check all that appl							Il Containmer	nt w/negative	e pressi	ıre		
\boxtimes >3 sf or >3 lf	Renovation	on,				☐ Mi	ni-enclosure		о р. осо.			
≥160 sf or ≥260 lf	Demolitio	n					ovebag proce					
Location of		n normally i	used solely	/		No	on-Exempted	(*) and Non	-friable	Proced R	dure E .	_
asbestos-containing	by maint staff(12)	enance/cust	todial	Description	n of a	asbestos-containing	Amoun	t	e m	e	n t	E n
material (acm) to be abated in facility (13)			Τ	material (/	ACM)		(Specif	y SF or	0	a a	c a	2
, , , , , ,	Yes	No	N/A				",		v e	i	p L	70 P
BASEMENT BOILER ROOM		LX		PIPE INSU			43 l ft		Ň			J
crawl space				PIPE INSUI	LAT	ION	5 l ft					
												I
]
Registered Waste Hauler	L IN US		D# 10	ubio Vord (1)	la-t-	IN. CE CO	1511]
D & S RESTORATION, INC.		EP Hauler II 506	1	ubic Yards of W yd	vaste	Name of Registered La TULLYTOWN, RI		RECOVE	RY			
City, State PATERSON, NJ 07503			Disposal D 09/13/1			City, State TULLYTOWN, P.	A					
Completed by (Print or Type)	Title			Signature		1		Date				_
BOGDAN JOLDZIC	PRESID	ENT						08/29	/2018			

Ch 130	115 B.1	N	ОТІ	FIC.	ATIO	U OF AS	lew Jersey BESTOS ABA AC 8 60 and 5:1	TEMENT 6)	DEC	E			
Date of Notification (1)					Name	e of Buildin	g Owner/Operator	(2)	II SEP	- 5	20	10	111
9 /	4 /	18	2		Но	using Au	thority of City o	of Camden	H L OCT	J	20	10	
Agencies Notified	Type Notific	cation			Stree	t Address			ACDECTO	O O C	opening the	To the same of the	
⊠ EPA					202	21 Watso	n Street 2 nd Floo	or	ASBESTO LIG	IS CC ENSI	NTF NG	IOL	&
☑ DOLWD	Amende Amendm	· ·			City,	State, Zip (Code				110		- Alexandra
□ DCA	☐ Emerger		dina		Ca	mden NJ							
(NJAC 5:23-8)	justificat	ion)	J			e of Contac	ot .		Telephone Numb	oer			
	☐ Cancella	ition			N/A	4			856-968-270	0			
N (5 W)					FA	CILITY IN	FORMATION						
Name of Facility Where A		Taking P	lace	(3)				Type of Facility					
Branch Village Bldg	3 11							School (K-1	 Other than K-12 				
Street Address	-4							Other (i.e., p	orivate and commer	cial b	uildin	gs,	
1800 South 9 Th Stre	et							homes, etc.)				
City (5) Camden								Square Feet	# of Floors	1	ldg. A	ge	
County (6)					10000	-h · O - d - /	VOTATE 1105 0111 16	>50,000	1	- 1	70		
Camden					Cou	nty Code (/	()(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)			
Name of Monitoring Firm	Hired by Ruil	dina Owr	nor (S	57	ASCM	No	Name of Abatem						
A. Seine Light Hous		-	101 (0	"	ASCIVI	NO.	Delta/BJDS.)				
Street Address	o oolution						Street Address	IIIC					
P.O. Box 354							1345 Industr	ial Blvd					
City, State, Zip Code							City, State, Zip C						
South Orange NJ 07	7079						Southampton						
Project Manager for Monit				Tele	phone	No.	Telephone No.	11 4 10000	License No.				
Sarah Calandra					73 275		215 322-2900)	00783				
Start Date (10)		Schedule	d Co				Name of OSHA N		00703				
09/14/					/	20	Criterion Lab						
Occupancy Status During	Abatement (Check or	nlv or	ne)			Street Address			_			
☐ Facility Closed/Vacated					ment		400 Street Ro	oad					
☐ Abatement Performed	Outside of N	ormal Fa	cility	Hour		cribe	City, State, Zip Co	100,000					
Time of Abatement: 7A	AM- <u>4</u> PM/	PM		_AM			Bensalem, Pa						
Scope of Work (Check all	that apply)												
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				ovati nolitic				g Procedure	gative Pressure on-Friable Procedure	e			
				ocat						1	atem	ent T	ype
Location of Asbestos-Containing M				Sole	lly ely by	Ashau	Description o		De Managemente de marco		1		T
TO BE ABAT	red `	"	Mair	itena	nce/		stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)	/			(12)	Staff?		surfacing, VAT,	, or	SF or LF)	val	=	lusc	sure
(13)		Y	es	No	N/A		other miscellane	ous)				ate	(0)
Bldg 11 crawlspace			1			Pipe			500LF				
BLDG 11 Underground	d						Augan building			-			1
DEDO 11 Onderground	<u> </u>		-			FIFE DE	tween buildings	•	240LF		Ш	Ц	
				Ц									
Name of Registered Waste				100000	JDEP V	254 E400 C/L	Cubic Yards of	Name of Regis		-			
Service Transport G	roup Inc				auler II 2099 0		Waste	Minerva La	andfill				
City, State 58 Pyles Lane New C	Caetla DE						Disposal Date	City, State	01:				
								Waynesbu	rg, Ohio				
Completed By (Print or Typ Christine Del Viscio	oe)	Title Asst	. Ad	mini	strato	or	Signature	treD	Warn Dat	e 74	()	Oi	13

192-03 R	10		NOT		ATIO	N/OF/AS	BESTOS ABA AC 8:60 and 5:1		DEC] [
Date of Notification (1)	, , ,				Nam	e of Buildir	ng Owner/Operator	(2)				1.0	111
	04 /	18	<u> </u>				thority of City o		II SEP	- 5	20	18	
Print	ype Notific	cation				et Address			ASBESTO	20.00	NA ITT	201.1	
	⊠ Initial □ Amende	d					on Street 2 nd Floo	or		DENS!		1UL C	X
⊠ DOH	Amendr					State, Zip			1		17-4-30-	Section 11	
] Emerger	ncy (in	cludin	g g		mden NJ							
(NJAC 5:23-8)	justificat	550 S S S S S S S S				e of Contac	ct		Telephone Num	ıber			
	Cancella	ation			N/	0.750			856-968-27	00			
N					FA	CILITY IN	NFORMATION						
Name of Facility Where Aba		Takin	g Place	e (3)				Type of Facility					
Branch Village Bldg	13							School (K-1	2)	01			
Street Address 1800 South 9 Th Street	ŧ							Other (i.e., phomes, etc.	8 (Other than K-12 private and comme	2) ercial b	uildin	gs,	
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Name of Monitoring Firm Hi	red by Buil	ding C	Owner	(8)	ASCN	No.	Name of Abateme	ent Contractor (9	9)				-
A. Seine Light House	Solution	S		10.00			Delta/BJDS,		. .				
Street Address							Street Address						
P.O. Box 354							1345 Industri	al Blvd					
City, State, Zip Code							City, State, Zip Co	ode					
South Orange NJ 070							Southamptor	Pa 18966					
Project Manager for Monitor	ing Firm			Tele	ephone	No.	Telephone No.		License No.				
Sarah Calandra				17 .000		5-5000	215 322-2900		00783				
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							Bensalem, Pa	19020					
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()			Yes	No	N/A		Other miscellanet	ous)				ate	
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58 Pyles Lane New Ca							Disposal Date	City, State Waynesbu	rg, Ohio				
Completed By (Print or Type))	Title					Signature	7 ~	Da	te }-4	_		
Christine Del Viscio		Ac	lmini	strate	or		1 16. T		1,1,3	1.4	-21	01	5

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Carden NJ Cardellation Cardellation Name of Contact N/A R56-968-2700			(5)			City,	State, Zip	Code			Total Control of Contr				
NJAC 5:23-8 justification Name of Contact Telephone Number 856-968-2700					g g	Ca	mden NJ	J							
Scheduling Street Address Street A	(NJAC 5:23-8)	justificat	ion)			Nam	e of Contac	ct			Telephone Num	ber			
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Sarah Calandra								S	Southamptor	Pa 18966					
Start Date (10)	[1]	ring Firm			Tele	ephone	No.	Tel	ephone No.		License No.				
Og					9	73 275	-5000	2	15 322-2900		00783				
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement ZAM-4PW PMAM Street Road City, State, Zip Code Bensalem, Pa 19020 Scope of Work (Check all that apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf Demolition Asbestos-Containing Material (ACM) IN Facility (13) IN Facility (13) Pipe Bldg 14 crawlspace Bldg 15 Underground Bldg 15 Underground NJDEP Waste Service Transport Group Inc NJDEP Waste Service Transport Group Inc City, State Street Address 400 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 Street Road City, State, Zip Code Bensalem, Pa 19020 State Code State City, State State Cubic Yards of Waste Minerva Landfill Minerva Landfill Minerva Landfill City, State State City, State Waynesburg, Ohio Completed By (Print or Type) Christine Del Viscio Title Asst. Administrator State City, State Waynesburg, Ohio City, State City State City State City State City State City State							50 E-50	Nar	me of OSHA M	lonitor					
Secondation of Abatement Ado Street Road City, State, Zip Code Bensalem, Pa 19020	09/14/	18	_1	10_/	_31	1_/	18	C	riterion Lab	s					
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf ≥ Demolition ≥ Mini-Enclosure ≥ Mini-En	Time of Abatement: <u>I Al</u>	VI- <u>4</u> PIVI/	PI	ΛI	AM			В	ensalem, Pa	19020					
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Christine Del Viscio Asst. Administrator (Muslice) Del VIII 9-4-2018	Completed By (Print or Type	e)	Title						Signature	1	Dat	е.			
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Date of Notification (1)	04 /	18	_				g Owner/Operator of City of Ci		LI II S	EP - 5	5 20	18	
Agencies Notified	Type Notific	ation			Stree	t Address			OLD VINCOU			*********	
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(140/10/03.25-0)	☐ Cancella				N/A				856-968-				
					FA	CILITY IN	FORMATION						
Name of Facility Where A	batement is	Taking I	Place	(3)	TEN			Type of Facility	(4)				
Branch Village Bldg	g 16							School (K-12					
Street Address								☐ Subchapter 8	(Other than k				
1800 South 9 Th Stre	et							Other (i.e., property)		mercial b	uilding	gs,	
City (5)								Square Feet	# of Floors	E	ldg. A	ge	
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Name of Monitoring Firm	Hired by Build	ding Ow	mer (8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
A. Seine Light House	se Solutions	s					Delta/BJDS,	Inc					
Street Address							Street Address						_
P.O. Box 354							1345 Industri	ial Blvd					
City, State, Zip Code							City, State, Zip Co	ode				-	
South Orange NJ 07	7079						Southamptor	n Pa 18966					
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No				
Sarah Calandra				9	73 275	-5000	215 322-2900	(00783				
Start Date (10)	5	Schedul	ed Co	mple	tion Da	ite (11)	Name of OSHA M	lonitor					
09 /14 /	18	10	_ /	31	_ /	18	Criterion Lab	s					
Occupancy Status During	Abatement (Check o	nly o	ne)			Street Address						
□ Facility Closed/Vacate	d During Entir	re Perio	d of A	Abate	ment		400 Street Ro	oad					
☐ Abatement Performed	Outside of No	ormal Fa	acility	Hour	s - Des	scribe	City, State, Zip Co	ode					
Time of Abatement: 7/	AM- <u>4</u> PM/	PM		_AM			Bensalem, Pa						
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58 Pyles Lane New 0	Castle DE							Waynesbur	g, Ohio				
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	☐ Cancella	ition			N/A				856-968-270)		
					FA	CILITY IN	IFORMATION					
Name of Facility Where A		Taking	Place	(3)				Type of Facility	y (4)			
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Name of Monitoring Firm	Hired by Buil	ding C	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9	9)			
A. Seine Light House	e Solution	s					Delta/BJDS, I	Inc				
Street Address							Street Address	4,450				
P.O. Box 354							1345 Industri	al Blvd				
City, State, Zip Code							City, State, Zip Co	ode				
South Orange NJ 07	7079						Southamptor	Pa 18966				
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No.			
Sarah Calandra				9	73 275	-5000	215 322-2900		00783			
Start Date (10)	15	Sched	uled C	omple	tion Da	te (11)	Name of OSHA M	lonitor				
09 /14 /	18	_ 1	0_/	31	_ / _	18	Criterion Lab	s				
Occupancy Status During	Abatement (Check	only o	ne)			Street Address					
□ Facility Closed/Vacate					ment		400 Street Ro	oad				
☐ Abatement Performed	Outside of N	ormal	Facility	/ Hou	s - Des	cribe	City, State, Zip Co	ode				
Time of Abatement: 7	AM- <u>4</u> PM/	PN	1	_AM			Bensalem, Pa					
Scope of Work (Check all	that apply)											
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≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re ⊠ De				Mini-Enc Glovebag					
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Name of Registered Wast				1000	JDEP V		Cubic Yards of	- American	istered Landfill			
Service Transport G	roup Inc			_ 「	auler ID 20990		Waste	Minerva L	.andfill			
City, State				-			Disposal Date	City, State				-
58 Pyles Lane New	Castle De							Waynesb	urg, Ohio			
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Christine Del Viscio		As	st. A	dmin	istrato	r	1/1/1/2	101	1, - 9	-4-	721	0

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Date of Notification (1) 09 /	04 /	18			0.508		g Owner/Operator (thority of City of		II II SEP	- E	5 20	18	
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				2710711	FA	CILITY IN	IFORMATION						
Name of Facility Where A		Taking P	ace	(3)				Type of Facility					
Branch Village Bldg Street Address	18							School (K-12	²⁾ 8 (Other than K-12)	į.			
1800 South 9 Th Stree	at .							Other (i.e., p	rivate and commercial	cial bu	ilding	IS,	
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Camden						,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		rei ii veing deimene	100/			
Name of Monitoring Firm I	Hired by Build	ding Owr	ner (8	3)	ASCM	No.	Name of Abateme	l ent Contractor (9)		-			
A. Seine Light Hous	e Solutions	5					Delta/BJDS, I	보고 (2017년 - 12년 - 12년 2017년 - 12년 - 1 1					
Street Address							Street Address						
P.O. Box 354							1345 Industri	al Blvd					
City, State, Zip Code	A. II						City, State, Zip Co	ode					
South Orange NJ 07	n Pa 18966												
Project Manager for Monit	oring Firm				phone		Telephone No.		License No.				
Sarah Calandra				1975	3 275		215 322-2900		00783				
Start Date (10)		Schedule					Name of OSHA M						
09 /14 / _			- 2		_ / -	18_	Criterion Lab	S					
Occupancy Status During	1.5			200			Street Address	2					
☐ Facility Closed/Vacated☐ Abatement Performed						cribe	400 Street Ro						
Time of Abatement: 7A		PM	Omity	_AM	0 000	onbo	City, State, Zip Co						
Scope of Work (Check all	that apply)						Bensalem, Pa	19020					_
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	пасарруу			novati nolitic				g Procedure	gative Pressure	e			
				Locat						Ab	ateme	ent Ty	/ре
Location of Asbestos-Containing N		n		ormal I Sole	lly ely by	Asha	Description o stos Containing Ma		Amount	R	ړي	Щ	Щ
TO BE ABAT	ED			ntena	nce/ Staff?		., thermal systems i	insulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)			JUSIC	(12)	olan :		surfacing, VAT, other miscellane		SF or LF)	\a		sula	sure
(10)		Y	es	No	N/A		otror misconario	ous)				te	
Bldg 18 Crawspace]	\boxtimes		Pipe			500LF				
Bldg 18 Underground]	\boxtimes		Pipe be	tween Bldgs		240LF				
		T	1	П	П					П	П	П	
			1							1=			\exists
Name of Registered Waste	Hauler		1		JDEP V		Cubic Yards of	Name of Regis	stered I andfill			ш	ᆜ
Service Transport G				Н	auler II	No.	Waste	Minerva La					
City, State	•				20990)	Disposal Date	City, State	novesti A.F.O.				
58 Pyles Lane New C	astle DE						opour.buto	Waynesbu	rg, Qhio				
Completed By (Print or Typ	oe)	Title					Signature		Dat	te			
Christine Del Viscio	02 O.W.	Assi	Ad	mini	strato	r	1/7/2.	H. N	011 100 0		d >	7 5	5

NOTIFICATION OF ASSESTEDS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)												\mathbb{V}_{-}				
Date of Notification (1)	0.0				Name	of Buildin	g Owner/Operator (2)	HAN	2		0.10	- 11			
	04 /	18			25000		thority of City of	II II SEF	-	5 2	018	The same of				
Agencies Notified	Type Notific	ation			Stree	Street Address										
⊠ EPA				202	21 Watso	n Street 2 nd Floo	ASBEST	ASBESTOS CONTROL & LIGENCING								
☑ DOLWD	☐ Amende	576			City,	City, State, Zip Code										
☑ DOH □ DCA	Amendm Emerger				Ca	mden NJ										
(NJAC 5:23-8)	ion)	Giudiliiç	3	Name	of Contac	t	Telephone Number									
	☐ Cancellation						· · · · · · · · · · · · · · · · · · ·	856-968-2700								
FACILITY INFORMATION																
Name of Facility Where A		Taking	Place	(3)				Type of Facility (4)								
Branch Village Bldg	20							School (K-12)								
Street Address								☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings,								
1800 South 9 Th Stre	et							homes, etc.)								
City (5)							Square Feet	# of Floors	BI	dg. A	ge					
Camden								>50,000	1		70					
County (6)	5-7			Cou	nty Code (7)(STATE USE ONLY)	NLY) Current Use (Prior if being demolished)									
Camden																
Name of Monitoring Firm	ding C)wner ((8)	ASCM	No.	Name of Abateme	ement Contractor (9)									
A. Seine Light Hous	s					Delta/BJDS,	Inc									
Street Address							Street Address									
P.O. Box 354							1345 Industri	rial Blvd								
City, State, Zip Code							City, State, Zip Co									
South Orange NJ 07							Southamptor	n Pa 18966								
Project Manager for Monit				ephone		Telephone No.	License No.									
Sarah Calandra			73 275		215 322-2900											
3 St. (2011) 10						ite (11)	Name of OSHA Monitor									
					_ / .	18	Criterion Lab									
Occupancy Status During						(# - - - - - - - - -	Street Address									
☐ Facility Closed/Vacate						400 Street Ro	NO 400 MINUS									
☐ Abatement Performed Outside of Normal Facility Hour Time of Abatement: 7AM-4PM/PMAM						scribe	City, State, Zip Co									
						Bensalem, Pa	Pa 19020									
Scope of Work (Check all	that apply)						M Eull Cont	ainment with Nea	ativo Proceuro							
≥3 sf or ≥3 lf Renovati							☑ Mini-Enc									
≥160 sf or ≥260 lf Demolition Demolition □ □ □ □ □ □ □ □ □ □ □ □							☐ Glovebag		a Friable Precedure							
			le	Loca	ion		□ Non-Exe	mpted (") and Nor	n-Friable Procedure	_	Cyr. new					
Location of Norma							Description o	f		Ab	atem		ype			
Asbestos-Containing Material (ACM) Used Sol							stos Containing Ma	terial (ACM)	Amount	Remova	Repair	Enc	Enclosure			
TO BE ABA	200		Staff?	(i.e	 thermal systems i surfacing, VAT, 		(Specify SF or LF)	SVOL	air.	aps	losu					
(13)				(12)			other miscellane		SI OILI)	<u>m</u>		Encapsulate	Гe			
			Yes	No	N/A							a				
BLDG 20 Crawlspace	•					Pipe			500 LF	\boxtimes						
BLDG 19 Underground						Pipe Be	tween Bldgs		240 LF							
	5221															
						Waste	Cubic Yards of	Name of Regist	tered Landfill							
SERVICE TRANSPO	INC			lauler II	J NO.	Waste	MINERVA L	ANDFILL								
City, State							Disposal Date	City, State	10202 1240							
58 PYLES LANE NE							JRG OH									
Completed By (Print or Ty	Title					Signature	- '\ h	Dat	е							
CHRISTINE DEL VIS	CIO	A	SST. A	ADMI	N		Christ	a blu	Leons 9	-4	10	101	8			



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

Date of Notification (1)	O 600 60000				Nome	o of Duildin	~ 0.		(2)	KENK		. !	1 >				
9 / 4 / 18						Name of Building Owner/Operator (2) NJSDA											
		t Address				5	ECE	Π 7	\// [3 6	7						
Agencies Notified EPA)			V L		111		
⊠ DOLWD	☐ Initial	4				Box 991				IIN					111		
☑ DOH	Amendm				City,	State, Zip (Code)			SEP -	E 20	110	111	III		
DCA	☐ Emerger			q q	Tre	enton, NJ	086	552-0991			SEF -	J 21	110		2		
(NJAC 5:23-8)	justificati	on)		~	Name	of Contac	t		Telephone Number								
	☐ Cancella	tion								ASBESTOS CONTROL &							
					FA	CILITY IN	IFO	RMATION	LICENSING								
Name of Facility Where A	batement is	Taking	Place	(3)				and the first of t	Type of Facility (4)								
Denbo ES Pember						⊠ School (K-12)											
Street Address					1 - 3 - 1 - 1 - 1 - 1	☐ Subchapter 8 (Other than K-12)											
1412 Junction Road								er (i.e., private and commercial buildings, es, etc.)									
City (5)								Bldg. /	Age								
Browns Mills											1		50+				
County (6)	Cou	nty Code (7)(STA	ATE USE ONLY)	Current Use (Prior if being demolished)												
Burlington		2 m	**	8	School												
Name of Monitoring Firm	(8)	ASCM	No.	Na	Name of Abatement Contractor (9)												
Whitman Environme					Environmental Systems												
Street Address			-	Street Address													
7 Pleasant Hill Rd				Carrier .		lehem Pike - Suite 60											
City, State, Zip Code								y, State, Zip Co									
Cranbury, NJ 08512							1	Spring House		77							
Project Manager for Monit	toring Firm			Tel	ephone	No.	-	lephone No.	-,		License No.						
3 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1		0-5858	215 542 7000 00847										
Start Date (10)		etion Da		Name of OSHA Monitor													
_ 9 / 17 /		0 /		CES													
Occupancy Status During	Abatement (Street Address											
☐ Facility Closed/Vacate	ment				nlehem Pike - Suite 60												
☐ Abatement Performed	rs - Describe City State Zin C																
Time of Abatement: 7;	AM																
Scope of Work (Check all			Spring House, PA 19477														
	that apply)						☐ Full Containment with Negative Pressure										
□ ≥3 sf or ≥3 lf ☒ Renovation ☒ ≥160 sf or ≥260 lf ☐ Demolition							☐ Mini-Enclosure ☐ Glovebag Procedure										
								☐ Glovebag	g Procedure empted (*) and Non-Friable Procedure								
			Is	Loca	tion	T			Abatemer						Cypo		
Location of Norma								Description o	f					1	_		
Asbestos-Containing N		ed Sol	ely by			Containing Ma			Amount	Kemoval	Repair	nc	Enclosure				
TO BE ABAT IN Facility			Staff?	(i.e		ermal systems is urfacing, VAT,			(Specify SF or LF)	OVE	쁰	apsi	uso				
(13) (12)						1	other miscellaneous)				or or Er j	=		Encapsulate	6		
	N/A									0							
Exterior Transite Pipe						Exterio	r Tra	ansite Pipe			500 LF	D					
							-				estimated						
				100	-								1 1	\vdash	-		
Name of Registered Waste Hauler					NJDEP I		(2) (A) (A)	oic Yards of	Name of Registered Landfill								
David Geppert Recycling						O No.	ste	Western Berks Commnity Landfill									
City, State							Disi	posal Date	City, State								
Hatfield, PA						Disposal Date C				Birdsboro, PA 19508							
Completed By (Print or Type) Title						Signatura											
Patricia Visco Office Manag								Signature	Tueso Visco 9/4/2018								
	viaila	901			1 selle	ew lisco 9/4/2018											