Notification of Asbestos Abatement Pursuant to NJAC 8:60-7 and 40 (7)

B & G proj. #: 2017-121

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

B a o proj. #.				•				•		Check	# 8573				
Date of Notification	12. 5	- 11		Accessed to the second		er/Operator (2)					(G. IE		\mathbb{W}	E	M
10 19 1/10 11				Stelluto				- Control of the Cont		11:31				****	
Agencies Notified EPA DEP	Type Notificati Initial	on	Street A	ddress						And the second s	SEP -	- 6	2017	1	الكا
X DOL	Amenda			te, Zip Cod urn, NJ 0		41				ASL	LIOT	COi	TA)L 8	il.
X DOH		re III	Name of	Contact						Telephor	e Numbe	f	- Supremental	HALF CONTRACTOR	toleratemo/ph
☐ DCA	Cancella	ation	Laur	a Stelluto)								=		
				F	ACI	LITY INFORM	ATIO	N	201						
Name of facility wh	ere abatement is	s taking p	place (3)						Т	ype of Facility	(4) ol (K - 12)				
Laura Stelluto											apter 8 (C		han k	(-12)	
Street Address						385		3		Other Bldgs.	(Private/C /Homes, e		rcial	56	
					_					Square Feet	# of Floo	rs	В	ldg. A	ge
City (5)		Cor	unty (6)					inty Code (7) ate use only)	-	Current Use (P	rior if bein	na den	nolish	ed)	
Millburn, NJ (ssex						١.	residential		3			
Name of Monitoring	g Firm Hired by B	Bldg. Owi	ner (8)		1	ASCM No.		Name of Abatemen							
Street Address					_	n/a	_	B & G Restora	tior	i, Inc.					
Street Address								105 Ryerson	Roa	ıd					
City, State, Zip Cod	e							City, State, Zip Code Lincoln Park,		07035					
Project Manager for	Monitoring Firm			Phone Nu	mb	er	-	Telephone Number	20		License		er		
						2001		(973)696-686			10(0378			
Scheduled Start Da	te (10)	Sche	d. Comp	letion Date	(11)		B & G Restora		ı, Inc.					
09/12/2017		_	/13/201					Street Address							
Occupancy Status [105 Ryerson F		d 					
▼ Facility closed Abatement per	erformed outside							City, State, Zip Code	9						
Describe:Other-Describ	oe:						-1	Lincoln Park, I	NJ (7035					
Scope of Work (ch	eck all that apply)													
Demolition	X	Renovat	ion				F	full Containment w/ne	egati	ve pressure	X Glove	oag pr	oced	ıre	
\times >3 sf or >3 If		≥160 sf o	r <u>≥</u> 260 If				X	Mini-enclosure			Non-f	riable	oroce	dure	
Location of	2012 10			Illy used so custodial	lely					Amount		R	R	E n	E
asbestos-con material to be	300 (100 (100 (100 (100 (100 (100 (100 (staff(12)			_	Description material (sbestos-containing		(Specify S	F or	m	p a	С	n
abated in faci	lity (13)	Yes	No	N/A	4					LF)		v e	i	a p	L
boiler room				×		pipe				20 lf		Ď		X	
															무
												井	부	ዙ	H
			-		4				-			井	H	H	ዙ
Registered Waste H	auler	I N.IF	DEP Hau	er ID#	C	ubic Yards of V	Vaste	Name of Registered	d La	ndfill		.	Ш	Ш,	
B & G Restorat			19563			2 yds		Tullytown		source & Re	covery	Cent	er		
City, State Lincoln Park, N	11			Disposa 09		ate 3/2017		City, State Tullytown,	PA					5.	
Completed by (Print Gordana Luna		Title Secreta	ary/Trea	asurer		Signature		Gordana Luna	ALLES.		Date 09/01	1/201	7		

D&S Proj. #: 17-235

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

EMERGENCY NOTIFICATION

						PATE	L	Ch	# 19	85	7_			
Date of Notification (1)			. .	ner/Operator (2		G INC		同區	CE	<u> </u>	7-15			
Agencies Notified Type Notified Initial Amended		P.O. BC	ess X 179	STOM BOIL	DIIV	O IIVC		S	EP - 6	20	17			
DOL Amendment Emergence (including	y	MEND Jame of Co	HAM, NJ	07945		ASE US CONTROL & LICENSING Telephone Number								
☐ DCA justification☐ Cancellation☐	. 11	ТОМ Р	AGANO							p				
			FAC	ILITY INFORM	IATIO	N								
Name of facility where abatemen	t is taking pla	ace (3)					T	ype of Facility	(4)					
RESIDENCE								=	ol (K - 12) napter 8 (0		han k	′.12\		
Street Address							11	Other	(Private/C	omme		(-12)		
								Bldgs. Square Feet	/Homes, e	57777	В	ldg. A	ae	
City (5)	Cour	nty (6)			1077	unty Code (7)			011100			-3		
SHORT HILLS	ESS	SEX			(St	ate use only)		Current Use (P	rior if bein	g den	nolish	ed)		
Name of Monitoring Firm Hired by		Name of Abatement Contractor (9)												
-		D & S RESTO	RATI	ON, INC.										
Street Address		Street Address												
City, State, Zip Code					_	20 California 2 City, State, Zip Cod								
,, , , , , , , , , , , , , , , , , , , ,						Paterson, NJ (
Project Manager for Monitoring Fire	m	Ph	none Numb	er	_	Telephone Number			License	Numb	per	-		
						973-345-802			0	1169				
Start Date (10)	Sched	. Completi	on Date (11)		Name of OSHA Mo		Inc						
08/29/17	08/30					Street Address	ttion,	inc.			77.00			
Occupancy Status During Abateme						20 California A		е						
Facility closed/vacated during Abatement performed outside Describe:	e of normal f					City, State, Zip Cod	le							
Other-Describe: NORMAL					-	Paterson, NJ 0)7503							
Scope of Work (check all that app 3 sf or 3 lf 2160 sf or 260 lf						 X X	Mini- Glov	Containment we enclosure ebag procedure Exempted (*)	re	8		adura	8	
Location of			used solely				1	Zitarriptou ()	and mon	R	R	E	E	
asbestos-containing material (acm) to be abated in facility (13)	staff(12)	nance/cus	Т	Descriptio material (/	n of a	sbestos-containing		Amount (Specify S LF)	F or	e m o	e p a	n c a	n c	
1000-00-00-00-00-00-00-00-00-00-00-00-00	Yes	No	N/A					,		v e	i r	р	Ľ	
1ST FLOOR-Room 1 and 2 2ND FLOOR - BATHROOM		X		PIPE INSU				16 LF		M				
ZND FLOOR - BATHROOM		_X_		PIPE INSUI	LAII	ON	-	7 LF				뷰	ዙ	
										片	屵	Η	H	
										H	Ħ	H		
Registered Waste Hauler D & S RESTORATION, INC.	NJDE 1350	P Hauler I 06		ibic Yards of W yds	Vaste	Name of Registere TULLYTOWN			COVER	v v	_			
City, State			Disposal Da			City, State	, KES	OURCE RE	COVER	1				
PATERSON, NJ 07503			08/30/17			TULLYTOWN	N, PA							
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDE	ENT		Signature	hi	2-City		7	Date 08/28/	2017	0)			
ASB-41			for asbesto	s licensure exe	mote	1			00/20/	201/			_	

D&S RESTORATIO

PAGE 03/04

Das Proj. #: 17-235		N (P	otification of A	te of NJ sbestos Abater AC 8:60 and 12:	nent 120)	EMERO NOTIFIC	ATION			
Date of Notification (1) 10 18 1/12 18 1/11 7 Agencies Notified	PA Stree P.C City, WI Name	RAGANO (Address D. BOX 179 Stelle, Zip Coo ENDHAM, of Contact	NJ 07945	2) LDING INC	CO CONTRACTOR OF THE CONTRACTO	SEP -	JONIFIGE	And the state of t	別人工	
Name of facility where abatemen		M PAGAN	ACILITY INFORM	MATION		==			-	
RESIDENCE Street Address	County (8)					Sub Othe Bidg	chapter 8 (Other (Private/Cons./Hornes, atc	-	iai	
SHORT HILLS	Beomie		-	County Code (7) (State use only)	- 11	Square Feet Current Use (demoi		. Age
Street Address: City, State, Zip Code	(0)		ASCM No.	Stress Addre	STORAT	ION, INC.				
Project Manager for Monitoring Firm Start Date (10) 08/29/17	Sched. Comp			Paterson, Telephone No. 973-345 Name of OSH D & S Re	, NJ 0750: umber 5-8020 HA Monitor		Linense Nu 011			
Occupancy Status During Abatemen Facility closed/vacated during Abatement performed outside Describe: NORMAL HO	(Check only one) inline period of ab of normal facility h			20 Califor City, State, Zip	nia Avenu Code	le		-		
Location of asbestos containing	Renovation Pernelition Is location normality maintenence/cr	y used solely		Paterson,	Mini-	Containment w enclosure obag procedur Exempted (*)				
material (scm) to be absted in facility (13)	Yes No	N/A	material (AC	1	line.	Amount (Specify SI LF)	y	K a p a :	E C & D	Engl
ND FLOOR - BATHROOM			PIPE INSULA	TION	NAME OF TAXABLE PARTY.	6 LF	<u> </u>			
	NJDEP Houler 13506	Disposat Da 08/30/17	ble Yards of Wast yds te	Name of Regist TULLYTOV City. State TULLYTOV	WN, RES	OURCE REC	COVERY		5	
	RESIDENT	- 1	Ro la	led activities	n		Date 08/28/2017			

PAID

State of NJ

						Abatement and 12:120)	In) EC E		E	M		
D&S Proj. #: 17-239	_	(Puisuaii	IL IO NUMO	0.00	and 12.120)	$\parallel \downarrow \downarrow$		2 1 1		and the state of	- distribution	
11/11/198/03								1 000	6 201	7		100	
Date of Notification (1)				Operator (2)			. ILI L	A DEL	- 6 201	1	Land	4	
0 8 / 3 0 / 1 7		RS TRICI	ELAWA	ALL			_		A TO THE PART INCOME.		_	-	
Agencies Notified Type Notification	Stre	et Address						ASL' LUCE	SCONTF NSING	IOL 8)L	Distraction of the Control	
DEP Amended			_				-	LIOL	DVIION			, d	
Amendment #:		, State, Zip											
Emergency	- 11 -	ADISON	A second second second second	940				Telephone	Number			A last	
DOH (including justification)	Nan	ne of Contac	Ct					1	<u> </u>				
DCA Cancellation		TRICIE LA						_'	=	-			=
			FACILI	TY INFORMA	TION		1 1 =	a of Espility (4	`				
Name of facility where abatement is	taking place	e (3)					l l i y	oe of Facility (4) (K - 12)				
RESIDENCE									pter 8 (Oth			2)	
Street Address							11	Other (F			ial		
Out out / ludi out							S		lomes, etc		Bldg	. Age	
	County	. (6)			Cou	nty Code (7)	1 "	Judio , voi					
City (5)	County	(0)				te use only)		urrent Use (Pri		demo	lished)	
MADISON	MOF	RRIS						RESIDENCE					
Name of Monitoring Firm Hired by B	ldg. Owner	(8)		ASCM No.		Name of Abateme							
					_	D & S RESTO	RATI	ON, INC.			_	_	
Street Address			111000000			Street Address	A						
					_	20 California City, State, Zip Coo	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN			-			
City, State, Zip Code						Paterson, NJ							
		I Dho	ne Numbe	r	-	Telephone Number			License N	lumbe	r		
Project Manager for Monitoring Firm		Filo	ne Numbe			973-345-802			01	169			
<u> </u>	1011	Completion	Data (11)		_	Name of OSHA M	lonitor						
Start Date (10)	Sched.	Completion	Date (11)	1.5		D & S Restor	ration,	Inc.					_
09/12/17	09/13					Street Address		W(+1)					
Occupancy Status During Abatemen			ont			20 California City, State, Zip Co		ie			_	_	_
Facility closed/vacated during Abatement performed outside	of normal f	a of abatem	-			City, State, Zip Co	Jue						
					-	Paterson, NJ	07503	3					
Other-Describe: NORMAL H								Containment v	/negative	pressi	ıre		
Scope of Work (check all that apply >3 sf or >3 lf	Renovatio						Min	i-enclosure					
_ =	Demolition						Glo	vebag procedu n-Exempted (*)	re and Non-f	riable	proce	dure	
≥160 sf or ≥260 lf		normally u	sed solely					II-Excitipted ()		R	R	E	Е
Location of asbestos-containing	by mainte	nance/custo			ion of	asbestos-containing	g	Amount		e m	e p	n	n
material (acm) to be	staff(12)			material				(Specify S	or or	0 V	a	а	L
abated in facility (13)	Yes	No	N/A				-			е	r	р	_
GARAGE		T X T		ASBESTO	S DU	JCT INSULATION	NC	50 SF		X	부	ᆜ	뜌
GARAGE										뷰	屵	님	ዙ
										井	片	ዙ	쓔
-										井	片	片	쓔
						-1 (5		- dEII		Ш.	Ш	Ш	
Registered Waste Hauler	NJD 135	EP Hauler II		ubic Yards of 2 yds	vvast	e Name of Register TULLYTOW	VN, RI	ESOURCE R	ECOVER	RY			
D & S RESTORATION, INC.			Disposal D		-1	City, State							
City, State PATERSON, NJ 07503			09/13/1			TULLYTO	WN, P	Α. /	T===				
Completed by (Print or Type)	Title			Signature	Ro	adon 1	Jol	ar)	Date 08/30	/17			

1 1 4 9/129									E	Р	rint F	
CK#8439			FICATIO	State of New Jerse ON OF ASBESTOS	ABATE		PEGEI	1///	E	E	7	
Data of Natification (4)		(F		nt to NJAC 8:60 an		i IIU	<u> </u>	M	<u>E</u>	\prod	A CONTRACTOR OF THE PARTY OF TH	
Date of Notification (1)			Name PSE	of Building Owner/0	Operator	(2)			-			
Agencies Notified Type Notification			The second	Address	-		SEP - 6	201	1	11	4	
□ EPA □ Initial			4000 HADLEY ROAD									
DEP X DOL Amended Amendment Emergency (i			City, S	IOL	Ši.							
DOH justification)	HGIUUIH	y	Name of Contact Telephone Number									
EACH ITY INFORMATION												
Name of Facility Where Abatement is Taking	Place	(3)	FAC	JETT INFORMATI	OIN	Type of Facility	y (4)					
PSE4G Street Address						School (K		;				
14 BROADWA	V					Other (i.e etc.)	er 8 (Other than K- . private & commerce	12) cial bui	ldings	, hom	ies,	
	1					Square Feet	# of Floors		Bldg.	W. W. C. V.		
PATERSON County (6)		1	County	Code (7)		April 2500 Current Use (P	rior if being demolis	hed)	2PPx	97	7yes	
PASSAIC				USE ONLY)			STAT: 01					
Name of Monitoring Firm Hired by Building O ENVIRONMENTAL TACTICS	wner (8	3)	ASC 004	M No. 5		of Abatement C	ontractor (9) MS OF AMERIC					
Street Address						Address	VIO OF THIELTHO					
64 BROAD STREET City, State, Zip Code					_ SSE	WHITEHEAD	AVE.					
MATAWAN, NJ 07747						tate, Zip Code TH RIVER, N	J 08882					
Project Manager for Monitoring Firm TOM GEIGER			Telepho 732-2	one No. 90-2217		one No. 432-8350	License N	Vo.				
Start Date (10) 8 / 29 / 17	Schedu	led Con	npletion	Date (11)		of OSHA Monito	MS OF AMERIC	Δ				
Occupancy Status During Abatement (Check	Only O	ne)	11			Address	NO OF AWENO					
Facility Closed/Vacated During Entire Pe	riod of	Abatem	nent		396 V	VHITEHEAD	AVE.					
Abatement Performed Outside of Normal Other – Describe: NECESSARY	ope	y Hours	ORS	DNLY		tate, Zip Code TH RIVER, N	1100000					
Scope of Work (Check All That Apply)					300	TIT KIVEK, N	13 00002	_		-2006		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit			XX	Mini-Enclosu Glovebag Pro				_		
	Is	Locati	on			- Non-Exemple	d () and Non-Friat	le Pro	Abate			
Location of	Location of Normally Description of											
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenar	ice/	Asbestos Conta (i.e. thermal s	ining M systems	aterial (ACM) insulation.	Amount (Specify	R		En	Е	
In Facility (13)	Cus	todial S (12)	idii?		ing, VA7	Γ, or	SF or LF)	Remova	Repair	Encapsulate	Enclosure	
** **	Yes	No	N/A			/		val	=	ılate	ure	
BASEMENT +1 of Fle. STAIRWALL		X		PIPE INS	. 147	(0.0)	110 LF	×				
BASEMENT		X		TRANS:TE			75 SF	×				
BASEMENT		X		FIRE D			10 3F	X				

Cubic Yards of Waste

APPX 20 Disposal Date

TBD

Signature

NJDEP Waste Hauler ID No.

OFFICE MANAGER

Title

000692068

WRAP

City, State

CAROL RAIMO

City, State
FLANDERS,
Completed by

Name of Registered Landfill **GROWS NORTH**

MORRISVILLE, PA

80 LF X

Date 9

CK# 8399			CATIO	tate of New Je N OF ASBEST t to NJAC 8:60	OS ABATE				3 20		ant Fo		
Date of Notification (1)			Name o	of Building Own	er/Operator	(2)	SEP SEP						
Agencies Notified Type Notification EPA Initial				Address HADLEY RO	DAD		ASL	LICENSING					
DEP Amended Amendment #				ate, Zip Code TH PLAINFIE	ELD, NJ (7080	Contractor						
□ DOH	nciuaing		JAn	of Contact	RAV	INA	¥						
Name of Facility Where Abatement is Taking	Place ((3)	1 40	ILITT IN ORWI	ATION	Type of Facility School (K							
Street Address 14 BROAD WAY	Ļ					Other (i.e etc.)	ter 8 (Other than K-12 . private & commercia	al buil			es,		
PATERSON						Square Feet App. 2500		A	PPX		yes		
County (6) PASSAIC.				Code (7) USE ONLY)			Prior if being demolish						
Name of Monitoring Firm Hired by Building Or ENVIRONMENTAL TACTICS	wner (8)	ASCM No. Name of Aba				oatement Contractor (9) SYSTEMS OF AMERICA						
Street Address 64 BROAD STREET					Street 396	AD AVE.							
City, State, Zip Code MATAWAN, NJ 07747						tate, Zip Code TH RIVER, N	NJ 08882						
Project Manager for Monitoring Firm TOM GEIGER			Telepho 732-29	ne No. 90-2217		one No. 432-8350	License No.	0.					
Start Date (10) 8 /29 / 17	Schedul 9	led Com	pletion	Date (11)	11 POST 10 POS	of OSHA Monito	MS OF AMERICA	\ \					
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe						Address WHITEHEAD	AVE.						
Abatement Performed Outside of Norma Other – Describe: NECESSARY	I Facility	v Hours		ONLY		tate, Zip Code TH RIVER, N	J 08882			(HE-TOSE			
Scope of Work (Check All That Apply)						1							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti			X	Mini-Enclosu Glovebag Pr							
Location of	Ī	Location Normall	у		Description		Cu () and Non-i habi		Abate				
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Solel aintenar todial S (12)	ice/	(i.e. thern su			Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure		
BASEMENT +1 of Fle. STAIRWGH	Yes	No X	N/A	Λ'	- 1		1. 15	×		te	to .		
BASEMENT		X		PIPE IN TRANS!			110 LF 75 SF						
BASEMENT		X		F:RE			605F						
Name of Registered Waste Hauler ETGI		Ha	JDEP Wauler ID	No. of V	oic Yards Vaste	GROV	f Registered Landfill VS NORTH						
City, State FLANDERS, NJ				Dis	oosal Date	City, Sta	RISVILLE, PA		- Minister				
Completed by CAROL RAIMO	Title OFFI	CE M	ANAG	ER	Signature	. l Lau	Dat	e 8//	6/	17			

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Uri	nt	For	***
1 11	111	LOI	11

()	r#1820	7		NOTIF	ICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE	MENT 0)	AID	D)r	E C	尾	A CONTRACTOR OF THE PARTY OF TH	\mathbb{V}	E		
	of Notification (1) /17	-				of Building Angelou		Operator	(2)			SEI	J -	6	201	7		
Age	ncies Notified	Type Notification	/*************************************			Address				1	-1 1-1						houses	
×	EPA DEP	Initial Amended			City, State, Zip Code ASI US CONTROL LICENSING											OL (8.	
×	DOL	Amendment Emergency		_		wood, N		50		ž	*************	Page			-	MILE THE PERSON NAMED IN	anunchisial/p	
	DOH DCA	justification) Cancellation			Mark Angelou									ρr				
Nam	ne of Facility Where	Abatement is Takin	g Place	(3)	FAC	ILITY INF	ORMAT	ION	Type	of Eacility (A)							
Res	sidential Home		•						Type of Facility (4) School (K-12)									
	et Address								School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, hometc.)								es,	
	gewood									re Feet	# o	f Floors		1000	ldg. A 0 +/-	-		
Ber	nty (6) gen		County (STATE	Code (7) USE ONLY)	_	Curre	ent Use (Prid idential H	or if bei	ng demo	olished	i)						
Nam Pro	e of Monitoring Firm ject Manager)	ASC	M No.				tement Cor Abateme		(9)		<i>-</i>	20012111					
Street Address					Street Addres					dress Midland Ave								
City,	State, Zip Code							ip Code ook, NJ 0	763									
Proje	ect Manager for Mon		Telepho	ne No.		Teleph	one No	0.		License 01305								
	Date (10) 3/17		Schedu 9/17/1		npletion	Date (11)				A Monitor		01000					-	
Occu	pancy Status During	g Abatement (Chec	k Only O	ne)	Street A					ss					-			
	Facility Closed/Vaca Abatement Perform Other – Describe: 8	ed Outside of Norm	eriod of al Facilit	Abaten y Hours	nent			City, S	tate, Zi	p Code								
	e of Work (Check A															21.2.77		
	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
				Locati							<u> </u>	21101171	idbic i		Abate	ment		
А	Location sbestos-Containing			Normal ed Sole		Achoo	De:	scription taining M	of	(4014)			-		Ту	pe		
	TO BE ABA In Facili (13)	ATED		aintenar stodial S (12)		(i.e.	thermal surfa	systems cing, VA niscellan	insula T, or	tion,	(S	mount pecify or LF)		Remova	Repair	Encapsulate	Enclosure	
	D		Yes	No	N/A											te	Ф	
	Baseme	X				VAT			67	6 SF	x							
Name	of Registered Was	te Hauler		1	IDED													
	tages Abatemen			Н	JDEP W auler ID)36592	No.	Cubic of Was 3 CU			Name of F				and	dfill			
City, State Saddle Brook								sal Date		City, State Pen Arg	1	-						
Completed by Richard Cristofol President								ignature	//	/ //	, , , ,		Date					
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 09 05 17 1 Verizon SEP - 6 2017 Agencies Notified Type Notification Street Address 1 Verizon Way **⊠** DOLWD ☐ Amended US CONTROL City, State, Zip Code **⊠** DHSS Amendment # LICENSING Basking Ridge, NJ ☐ DCA ☐ Emergency (including) (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Alex Baylor **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 90 West Milton Avenue homes, etc.) City (5) # of Floors Square Feet Bldg. Age Rahway, NJ 07065 10,000 3 50 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Union Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. USA Environmental Managaement Inc. JVN Restoration Inc. Street Address Street Address 8436 Enterprise Avenue 47 Foster Road City, State, Zip Code City, State, Zip Code Philadelphia, PA 19153 Staten Island NY 10309 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mark Jenkins 215-365-5810 718-605-6256 00774 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09 / 14 / 17 09 / 17 / 17 Testor Tech Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 10 59 Jackson Avenue Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: __AM-____PM/5:00PM-1:30AM LIC NY 11101 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\boxtimes \ge 3$ sf or ≥ 3 If □ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Encapsulate Remova Asbestos Containing Material (ACM) Amount Maintenance/ nclosure TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement Water Meter Room X Pipe Insulation and Fittings 10 LF X П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Newark Carting Hauler ID No. Waste G.R.O.W.S., Inc. NJ-566 30 City, State Disposal Date City, State Hackettstown, NJ 09/17/17 Morrisville,PA Completed By (Print or Type) Title Signature Ralph Barnhardt **Project Manager** 09-05-201 ASR-41

State of New Jersey