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

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MV#14239 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMEN Check#3423 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 09 03 19 1 2019 SEP Chris Hrycyshyn Agencies Notified Type Notification Street Address ☐ EPA X Initial ■ DOLWD ASBESTOS CONTROL & LICENSING Amended City, State, Zip Code X DHSS Amendment # DCA ☐ Emergency (including Clifton, NJ 07011 (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Chris Hrycyshyn FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Street Address Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Clifton, NJ 07011 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Passaic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09 / 14 / 19 __09__/__15__/__19 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____ AM-PM/ PM_ AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure ⊠ Renovation Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) Remova Repair Encapsulate Enclosure TO BE ABATED Maintenance/ Amount (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or (12)SIF or LF) (13)other miscellaneous) Yes No N/A Basement П X Pipe insulation 150 LF П Name of Registered Waste Hauler NUDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Tentre Wenad Owner 09/03/19 ASB-41

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	ACM)	Use	d Sole	ly by	Asbe:				Amount	Re	Re	En	四
						., therm	al systems i	nsulation,	(Specify	Mov	pair	cape	Enclosure
				J					SF or LF)	a a		Encapsulate	ure
30 3 30 5 5		Yes	No	N/A		load to Mind		,				e	
Througout				\boxtimes	VAT				10,000 SF	- 🗵			
Date of Notification (1)										-	П		
Date of Notification (1) 09													-
		+								-	-		
Date of Notification (1)		Ш											
	conti-	.~	11200		A397/5	The second second		Name of Regist	ered Landfill				
<u> </u>	Cartin	ig				As	Needed						
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Confin	al at t						100	D4 / D				
								Morrisville,	PA / Pen A	rgyl, PA			
						S	Signature	701	1.1				
Allen Wonchik	F	roject	Man	ager			NEC	en Monc	rue	09/04	/2019		

TIM	共12110	A N			- 10 VIII 0 VIII 0								ı		
N/2100			NOT	IFICATION	State of I	SBESTO	SABATE	EMENT							
Date of Notification (1)) 11 (5)	以几旦月			nt to NJA					= P	G I	M	F	1	- Janesan
7/26/2019				Name Eric	of Buildir Sporn	ng Owner	/Operato	or (2)	DE	- W	5 1	U	طا		A Carrier of the Carr
Agencies Notified	Type Notificatio	n		Street	Address					٥٢٥		0010	,		
× EPA DEP	Initial Amandad			City	State 7:-	0 1		Mer apod		SEP	6	2019	,	1	d -
× DOL	Amended Amendmen			Sho	State, Zip rt Hills N	Ude 1J 0707	87	Semilation and an artist of the seminated and a seminated and	_	SBESTO	18.00	NTR	31.8		Conduction
DOH DCA	justification	1)	ig		of Contac Abraha				/1	Teleph				Nathana	
	Cancellatio				CILITY IN		ION			1					
Name of Facility Where A	Abatement is Taki	ng Place	(3)					Type of F	acility (4)						
Street Address				S-116 A-25				Scho	ool (K-12)) (Other ti	nan K-1	2)			
0:: (5)								Othe etc.)	r (i.e. pri	vate & co	mmerc	ial bu	ildings	s, hon	nes,
City (5) Short Hills								Square Fe 3,202	eet	# of Flo	ors		Bldg. 1953		
County (6) Essex					Code (7)			Current Us	se (Prior	if being o	demolis	hed)			
Name of Monitoring Firm	Hired by Building	Owner (8	3)	ASC	M No.		Name Che	of Abateme ckmark Ir	ent Contra	actor (9)					
Street Address							Street	Address Norgan Dr							
City, State, Zip Code							City, S	tate, Zip Co	de						
Project Manager for Moni	toring Firm			Telepho	one No			ta NJ 078	371 						
							973-	570-2645			ense N 334	10.			
Start Date (10) 7/27/2019		8/7/20)19	mpletion	Date (11))		of OSHA Mo ckmark In							
Occupancy Status During X Facility Closed/Vaca			25		. 1		LEAD OF STATE	Address lorgan Dr				7			
Abatement Performe Other – Describe:	d Outside of Norn	nal Facilit	y Hour	nent s			City, St	tate, Zip Co	de						-
Scope of Work (Check All	That Apply)						Spai	ta NJ 078	571						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Section 1	Renova Demoli					Mini-Enc	losure	with Neg	jative P	ressu	ire		
							×	Gloveba Non-Exe			n-Friab	le Pro	cedur	е	
Location	of		Locat Norma										Abate	ement pe	t
Asbestos-Containing N TO BE ABA	Material (ACM)	Use	d Sole	ly by	Asbes	stos Conta	scription aining Ma	aterial (ACN	1)	Amour	nt				
In Facility (13)		Cus	todial (12)	Staff?	(1.e.	surfac	ing, VAT	insulation, , or		(Special SF or L	fy F)	Remova	Repair	ncap	Enclosure
(1.5)		Yes	No	N/A		otner m	iscellane	eous)				oval	air	Encapsulate	sure
Baseme	nt		X	137		Flo	or Tiles	S	-	825 S	F	X			
								***************************************		2 TO COM TO COM					
Name of Desires 1141															
Name of Registered Waste Newark Carting	: Hauler		3335	JDEP W auler ID	7797	Cubic Y of Wast 8				istered L ntral Sa		/ Lar	ndfill		
City, State Newark NJ						Disposa	al Date	City,	State						
Completed by		Title				Sid	gnature /		n Argyl,	, ra	Dat	ο			
Corey Stankovic		CEO			-1				Konc			e 26/2(019		

OKLO	540 DA	86	NO			TIO	N OF AS	New Jersey SBESTOS AI			1	NV#	14	9.	33	3
1301-02	IT AL		Į.		(Pui	rsua	int to NJ	AC 8:60 and	5:1	6)	1 E	CEI	W	F	100	1
Date of Notification (1)	05 /	1	9				e of Buildi rtua	ng Owner/Opera	ator	(2)		9 6 1	U	- (5)		Paralleon based or y
Agencies Notified	Type Notifi	ication	1		+	Stree	et Address			1 1 1	4	SEP 6	2019		11	4
⊠ EPA						20	Stow Ro	1		and the second						N-A-THIRD
☑ DOLWD	☐ Amenda Amenda		4		-	City,	State, Zip	Code	-515	- tr	AS	BESTOS CO	VTRC	11 8.		No.
□ DCA	☐ Emerge			-		Ma	arlton NJ	08053		-	·	LICENSIN		the life		
(NJAC 5:23-8)	justifica	ition)	riciadii	ig	T	Name	e of Conta	ct			T	elephone Num	ber	OTHER PROPERTY.	And String Course	men.
-	☐ Cancell	ation				Da	vid Cran	ston				215 253-721	6			
						FA	CILITY	NFORMATION	1							
Name of Facility Where A			g Plac	e (3)					Type of Facili	ty (4)					
Tatem Brown Famil	y Practice	1								School (K						
Street Address					- 5 8 8 10	1100000				Subchapte	er 8 (O	ther than K-12 te and commer) rcial h	ildin	75	
2225 Evesham Road	<u> </u>									homes, et	c.)	io and commo	Oldi D	unun	90,	
City (5) Voorhees										Square Feet	7	f of Floors	В	dg. A	ge	
County (6)						_	_			>25,000		1		30+		
Camden						Cou	nty Code (7)(STATE USE ON	LY)	Current Use (Prior it	being demolis	hed)			
Name of Monitoring Firm I	dired by Pui	ilding	0	(0)		0014	NI-	The same								
Vertex Environment		ilding (Jwner	(8)	A	SCM	No.			ent Contractor ((9)					
Street Address	aı	-						Delta/BJD	- 1	nc						
700 Turner Way, Sui	te 105							Street Addres	5500	-1.01						
City, State, Zip Code	10 100							1345 Indu								
Aston, Pa 19014								City, State, Zip		Pa 18966						
Project Manager for Monit	orina Firm	-		T	elent	none	No	Telephone No		1 Fa 10900	- 11	! N-				
David Brown	9						-8902	215 322-29				icense No. 00783				
Start Date (10)		Sched	duled C				ite (11)	Name of OSH				00763				
_ 8 / _ 14 /			9 /				19	Criterion		ornior						
Occupancy Status During	Abatement (Chec	k only					Street Address				9				
☐ Facility Closed/Vacated						ent		400 Street	-	ad						
☐ Abatement Performed (Outside of N	lormal	Facilit	у Но	ours -	Des	cribe	City, State, Zip								
Time of Abatement: 7A	M- <u>4</u> PM/	P	Λ	A	M			Bensalem								
Scope of Work (Check all t	hat apply)															
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	1000 5580		⊠ Re		ation ition				Encl	ainment with Nosure Procedure pted (*) and No	- Table 1		Э			
5. 207	2				cation						T			atem	ent T	ype
Location o Asbestos-Containing M		A)			nally olely		Asha	Descriptio stos Containing					-		_	
TO BE ABAT	ED	.,			nance al Sta		(i.e	., thermal system	ns ir	nsulation,		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)			Cus	(12		111?		surfacing, V				SF or LF)	val	7	Sul	sure
(10)			Yes	N		N/A		other miscella	aneo	ous)					ate	
1 st Floor Office Areas				\boxtimes	[Pedesta	al Mastic				120 SF				
				\boxtimes								- Avvisord-st				
				П	I									П		
			П	П							10		-			
Name of Registered Waste	Hauler			Н			Vaste	Cubic Yards of		Name of Reg	istoros	I Landfill	Ш	Ш	Ш	Ш
Service Transport Gr					Haul	ler ID	No.	Waste	8	Minerva L						
City, State 58 Pyles Lane New C	astle DE							Disposal Date		City, State Waynesb	urg, (Ohio				
Completed By (Print or Typ	e)	Title						Signațure			-/-	Date	9		-	
Christine Del Viscio		As	sst. A	dmi	nist	rato	r	1 (Max	1	ToDol	VA			5-5	101	9

19/4/1	42	3							-					Print F
CK 8710 I	PAI	D	TIFICAT (Pursu	State of ION OF A ant to NJ	SBES	Jersey TOS ABAT 30 and 12:1	EME 20)	ENT	ID.	EC			V	E
Date of Notification (1) 09/02/2019			Nam	ne of Build	ing Ov	vner/Operato	or (2))		SEF)	6 ;	2016	
Agencies Notified Type Notificati	on	0.500		et Address		uions LLC	,			ULI		U Z	2019	
EPA X Initial Amended						reet, Unit	301	A	L _A	SBEST	Oc	0037		
DEP Amended Amended				State, Zip ewood,						L	CEN	ISING	HO	2
DOH Emergen	cy (includ	ing		e of Conta		0/01			TEL					NO STONY
DCA Cancellat						tions LLC	;			hone Nu -226-30			1	
Name of Facility Where Abatement is Ta	king Place	e (3)	FA	CILITY IN	VFOR	MATION	T							
133 Shore Blvd	3	- (0)					Ту	pe of Facility (4	2.5.2					
Street Address 133 Shore Blvd							H	School (K-1) Subchapter	8 (Other	than K-1	2)			
City (5)							×	Other (i.e. pi etc.)	rivate & c	commerc	ial bu	uilding	s, hor	nes,
Keansberg County (6)						1	Sq	juare Feet	# of F	loors		Bldg.	Age	
Monmouth		51	Count (STAT)	y Code (7 E USE ONI) _Y) _		Си	rrent Use (Pric	r if being	demolisi	hed)			
Name of Monitoring Firm Hired by Building	g Owner ((8)	ASC	CM No.		Name AAA	of A	batement Cont AD PROFES	ractor (9)	ALS.				
Street Address						Street	Add							
City, State, Zip Code						City, S	tate,	Zip Code OOD, NJ 08						
Project Manager for Monitoring Firm		-141 (4-2-17)	Teleph	one No.		Teleph	one		Li	cense No	0.			-
Start Date (10) 09/12/2019	Schedi 09/15	uled C	L ompletion	Date (11)	Name	of OS	SHA Monitor AD PROFES		200				
Occupancy Status During Abatement (Che	ck Only C	One)			- 50	Street	-		SIUNA	LS				
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of mal Facili	Abate ty Hou	ment rs			The second secon		DOVE COL	JRT	2 4				
cope of Work (Check All That Apply)					_			OOD, NJ 087	701					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demo				×	GI	ull Containmen ini-Enclosure lovebag Proceo on-Exempted (dure					
1		s Loca										Abate	ement	
Location of Asbestos-Containing Material (ACM)	Us	Norma ed Sol aintena	ely by	Asbes	tos Cr	Description on the containing Ma	of ateria	al (ACM)	۸	_,		Ту	pe	
TO BE ABATED In Facility		stodial	Staff?	(i.e.	. therm	al systems facing, VAT	insul	lation,	Amou (Speci	ify	Re	ת	Enca	En
(13)		(12)			othe	r miscellane	ous)		SF or L	.F)	Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A								<u>a</u>		ate	re
INTERIOR					-	ACM Tiles	3		150 S	F	x			
me of Pogistors I Wall I		- 751				H. J.S.				-				
me of Registered Waste Hauler WARK CARTING		F	IJDEP W lauler ID 4509		Cubi of W	c Yards aste		Name of Reg	gistered L	andfill				
y, State WARK, NJ					Disp	osal Date 5/2019		City, State	EM 5.1				-	
mpleted by	Title		-			Signature		BETHLEH	⊏M PA		- No.			
SEPH PERLSTEIN	OWN	IER				3				Date 09/0		019		

Date of Notification (1)	14	NOT	IFIC TO	Nam	N OF AS nt to NJ/ e of Buildin	BESTOS ABA 8:60 and 5:1	(2)) E C E	6 7	₩ 2019	EG	
9 / 4 /	19	_		St	s. Basilio	s-Gregorios Ort	hodox Church	The second second second second second	NAMES OF THE PARTY OF	NAME OF THE OWNER, OWNE	Marine Marine	8
Agencies Notified Type Notific ☐ EPA ☐ Initial	cation			100000000000000000000000000000000000000	et Address		Treatment	ASBESTOS			L&	
☑ DOLWD ☐ Amende	ed				Mercer Av		Louis	Start Sur Town	(antiporting	50/2 (Museum)	The Update	THULTHE
☑ DHSS Amendr	nent #_				State, Zip			12 3				
DCA Emerge (NJAC 5:23-8)		cluding	3	_	e of Contac	field, NJ 07060		T+			_	
(NJAC 5.23-6) Justilica				0.000	ay Thoma	-		732-766-312				
				-	-	NFORMATION						
Name of Facility Where Abatement is	Taking	Place	(3)	3000			Type of Facility	(4)				
Sts. Basilios-Gregorios Ortho	dox C	hurc	h				School (K-12)				
Street Address							☐ Subchapter 8	(Other than K-12)	rial hı	ildin	19	
9 Mercer Avenue							homes, etc.)	rvato and comme	olai be	maniş	,,,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
North Plainfield County (6)							4000 SF	2		70		
Somerset				Cou	nty Code (/	()(STATE USE ONLY)		or if being demolis	ned)			
Name of Monitoring Firm Hired by Bui	Idina O	wner i	(8)	ASCM	l No.	Name of Abateme	Church					
Horizon Environmental	iding 0	WIICI ((0)	710014	1140.	A CONTRACTOR OF THE PARTY OF TH	d Mold Service	s Corn				
Street Address			_			Street Address	a mora der vice	э, согр.				
PO Box 316						3859 Sylon B	Boulevard					
City, State, Zip Code						City, State, Zip Co					-	
Thorofare, NJ 08086						Hainesport, N	NJ 08036					
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.		SAIL CO		
Dave or Steve Flanigan				56-848		609-702-0400		00862				
Start Date (10)9 /16 /19					ate (11) 19	Name of OSHA M EMSL Analyt						
Occupancy Status During Abatement						Street Address						-
☐ Facility Closed/Vacated During Ent	ire Peri	od of	Abate	ement		200 U.S. Rou	te 130 North					
Abatement Performed Outside of N Time of Abatement:AM	lormal F PM	-acility /	/ Hou	ırs - Des	scribe AM	City, State, Zip Co						
						Cinnaminson	, NJ 08077					
Scope of Work (Check all that apply)					82	☐ Full Cont	ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ Rei				☐ Mini-Enc	losure	advo i resoure				
24 - 100 31 01 - 2200 11	ı		HOIL	OH		☐ Glovebaç ☒ Non-Exe	g Procedure mpted (*) and Nor	-Friable Procedure	9			
			Loca							ateme	ent Ty	уре
Location of Asbestos-Containing Material (ACN	/I)		lorma d Sol	ally ely by	Asha	Description o stos Containing Ma			R	R	Щ	ш
TO BE ABATED	"'			ance/		., thermal systems i		Amount (Specify	Removal	Repair	сар	Enclosure
IN Facility (13)		Cusi	(12)	Staff?	1	surfacing, VAT, other miscellane		SF or LF)	/al		Encapsulate	ure
(1.5)		Yes	No	N/A	1	other miscellane	ous)				te	
Main Hall, Kitchen, Classroom				\boxtimes	Floor til	e		4,000 SF		П	П	П
_												
			П									
Name of Registered Waste Hauler				JDEP 1	Waste	Cubic Yards of	Name of Regist	ered Landfill		Ш	П	Ш
Waste Management				Hauler II	D No.	Waste	Grand Cent					
City, State				17273	5	5 Disposal Date	City, State					\dashv
Lafayette, NJ						9/20/19	Penn Argyl	e, PA				
Completed By (Print or Type)	Title					Signature /	1 1	Dat	9			
Kaysi Gruner	Off	ice A	ssis	tant		VIIA	MIXL	/ (71	11	1	1
ASR-41	1					1000	HXV		1 1	11	1	

Date of Notification (1)	Inv	NO	TIFI	Pursu	nt to N	New Jersey SPESTOS ABA AC 8:60 and 5:	6)	DE C		6 3		
9 /	4 /	19		1000000		ng Owner/Operator	25.00	8-2483 Chk. #2		0 2	.UIJ	COLUMN TO SERVICE STATE
Agencies Notified	Type Notificatio				et Address		7 300 #130	ASBES	THE PERSON	CON	TROI	8
⊠ EPA	Initial								JCEN			
☑ DOLWD ☑ DHSS	Amended	ш		City	State, Zip	Code		-	5355400 E354	231(0):1-3(8)	S-COMMUNICATION	
□ DCA	Amendment Emergency (na			NJ 08302						
(NJAC 5:23-8)	justification)	inoidai	iig	_	e of Conta	Market Control of the		Telephone Nur	nber			
	☐ Cancellation			Do	onna Syri	ng			207.50			
				FA	ACILITY II	NFORMATION						
Name of Facility Where A		ng Plac	ce (3)	A Property			Type of Facility	(4)				
Residential Propert	У						School (K-1					
Street Address							Subchapter	8 (Other than K-1 private and comme	2)	mildir		
							homes, etc.		erciai i	Junan	igs,	
City (5)							Square Feet	# of Floors	E	Bldg. /	Age	
Bridgeton							983 SF	2		69		
County (6)				Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demol	ished)	V		
Cumberland							Residential					
Name of Monitoring Firm I		Owner	(8)	ASCN	l No.	Name of Abateme	ent Contractor (9)	1				
Horizon Environeme	ental					Asbestos an	d Mold Service	es, Corp.				
Street Address PO Box 316						Street Address						
City, State, Zip Code						3859 Sylon B	COLUMN THE PROPERTY OF THE PARTY OF THE PART					
Thorofare, NJ 08086						City, State, Zip Co						- 544 1144
Project Manager for Monito			1-			Hainesport, N	1J 08036					
Dave and Steve Flan	75			ephone		Telephone No.		License No.				
Start Date (10)		dulad (56-848	ate (11)	609-702-0400		00862				
9 / 16 /				8_ /		Name of OSHA M EMSL Analyti	2011/201					
Occupancy Status During	Abatement (Chec	k only	one)			Street Address						
□ Facility Closed/Vacated	During Entire Pe	riod of	Abate	ement	4	200 U.S. Rout	te 130 North					
Abatement Performed (Outside of Norma	Facilit	у Нос	rs - Des		City, State, Zip Co	de					
Time of Abatement:		M/	PN		_AM	Cinnaminson						
Scope of Work (Check all t	hat apply)					200000000000000000000000000000000000000					-	
≥3 sf or ≥3 lf		⊠ Re	enova	ion		☐ Full Conta	ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf		☐ De				☐ Glovebag	Procedure					
		l le	Loca	tion	1	Non-Exer	npted (*) and No	n-Friable Procedu	-			
Location of			Norma			Description of	:		Ab	_	ent T	_
Asbestos-Containing M	aterial (ACM)		ed Sol	ely by		stos Containing Mat	erial (ACM)	Amount	Rer	Repair	E	Enclosure
TO BE ABAT IN Facility				Staff?	(i.e.	 thermal systems in surfacing, VAT, 		(Specify	Removal	air	Encapsulate	losi
(13)			(12)			other miscellaneo		SF or LF)	<u>=</u>		ulat	are.
		Yes	No	N/A							Ф	
Basement				\boxtimes	Mastic			770 SF			П	П
										F		
									+	1		1
		_		-						Ш	Ш	Ш
Name of Registered Waste	Haulas		Ц									
Waste Management	nauler			IJDEP V		Cubic Yards of Waste	Name of Regist					
				17273		5	Grand Cent	tral				
City, State						Disposal Date	City, State					
Lafayette, NJ						9/18/19	Penn Argyl	e, PA				
Completed By (Print or Type	97				- 10	Signature	· Alh	Da	te	,		
Kaysi Gruner	0	ffice A	\ssis	tant		Iller	1/1/	(1/11	119	i i	
SB-41							11/		1 61	11 1		

00 1 of 2								100			
Ch 2094	o Inv	NO 14	TIFIC	CATIC	ONOFA	New Jersey SBESTOS ABA IAG-8:60 and 5	TEMENT	DEC	E	<u> </u>	// [
Date of Notification (1)	4 /	19			me of Build	ing Owner/Operator	(2) ‡1710-2243	Chk. #2096	- 6	20	19
	Type Notification	on		Stre	et Address			and the same of th	20.00		
[7] DOLLING				3000000	Turnpike			ASBESTO LIC	JS CC		ROL
☑ DHSS	Amended Amendmen	t #			, State, Zip					PORTION CAN	PROPERTY.
□ DCA □	☐ Emergency	(includi	ng			je, NJ 07095					
(NJAC 5:23-8)	justification				ne of Conta	T32		Telephone Nun	nber		
L					obert Wo	A CONTROL OF THE CONT		732-442-86	00		
Name of Facility Where Aba	atement is Tal	ina Dlac	(2)	F	ACILITY	NFORMATION					
NJTA MUB - E - Hight		ang Plac	æ (3)				Type of Facility				
Street Address							School (K-	12) · 8 (Other than K-12	2)		
Milepost 67 S - NJ Tur	rnpike						Other (i.e.,	private and comme	rcial b	ouildin	ıgs,
City (5)							homes, etc Square Feet			21.1	
East Windsor/Hightsto	own						20,000	# of Floors	B	Bldg. A	
County (6)				Cou	inty Code (7)(STATE USE ONLY)		rior if being demolis	shed)	unk	OWI
Mercer							Trades Bui		sileu)		
Name of Monitoring Firm Hir	red by Building	Owner	(8)	ASCN	No.	Name of Abateme					
Horizon Environmenta Street Address	al					Asbestos and	d Mold Servic	es, Corp.			
PO Box 316						Street Address					
City, State, Zip Code						3859 Sylon B					
Thorofare, NJ 08086						City, State, Zip Co					
Project Manager for Monitorin	ing Firm		Tole		Ne	Hainesport, N	IJ 08036				
Dave or Steve Flanigar				ephone	8-0800	Telephone No.		License No.			
Start Date (10)		eduled C			ate (11)	609-702-0400 Name of OSHA M		00862			
9 / 16 / 1	19				19	EMSL Analyti					
Occupancy Status During Aba	atement (Che	ck only	one)			Street Address					
			Abate	ment		200 U.S. Rout	e 130 North				
▼ Facility Closed/Vacated Drawn	ouring Entire P	eriod of		o Do	scribe						
	ouring Entire Po	al Facilit	y Hour	s - Des	ANA	City, State, Zip Co.	de				
∑ Facility Closed/Vacated Down ☐ Abatement Performed Out Time of Abatement: ☐	Ouring Entire Potside of Norma AMF	al Facilit	y Hour PM-	S - Des	AM	City, State, Zip Co-					
□ Facility Closed/Vacated Di □ Abatement Performed Out □ Time of Abatement: □ Scope of Work (Check all that □ ≥3 sf or >3 If	Ouring Entire Potside of Norma AMF	al Facilit	PM-		AM	Cinnaminson,	NJ 08077	gative Pressure			
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Date of Notification (1) 9/4/19 Agencies Notified Type Notification X EPA	#1 (including	To the second	Name Colfa Street Colfa City, St	of Building X Mano Address X Ave. E ate, Zip C Ille Park	Owner Bldg 17 ode NJ 07	ABATE d 12:12 Operator	0)	VT	Teleni		LIC		11 \ 5 20	rint Form
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Name of Monitoring Firm Hired by Building of Project Manager	Owner (8)		ASCI	M No.			of A	batement Cont es Abateme	tractor (9))				
Street Address						Street	Add	ress						
City, State, Zip Code						City, S	tate,	Aidland Ave Zip Code Brook, NJ 0						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	one	12.	Li	icense N 1305	0.			
Start Date (10) 9/13/19	Schedule 9/19/19		npletion	Date (11)		Name	of O	SHA Monitor						
Occupancy Status During Abatement (Chec	k Only On	ie)				Street	Addr	ess						
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Completed by

Richard Cristofol

Title

President

Date

9/4/19

Signature

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:420)

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Date of Notification (1) 9/4/19				f Building y Tower		Operator	(2)				and the second	wagethe week	spawner-word	атиштита	oguvor
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Richard Cristofol	Presi	iaent					Maj	1/1			9,	4/19			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 80 30 19 Joan Hudanish 2019 Agencies Notified Type Notification Street Address ☐ Initial **⊠** DOLWD ASSESTOS CONTROL & City, State, Zip Code **⊠** DOH Amendment #1 LICENSING Jackson, NJ 08527 ☐ DCA ☐ Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Joan Hudanish **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Hudanish Residence School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Jackson 1.946 66 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Ocean Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Management & Enviro. Consulting Services Shade Environmental, LLC Street Address Street Address PO Box 341 623 Cutler Avenue City, State, Zip Code City, State, Zip Code Chesterfield, NJ 08515 Maple Shade, NJ 08052 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Bill Weisgarber 856-755-0099 609-298-4070 00842 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __09__ / __06__ / __19 09 / 10 / 19 EMSL Analytical, Inc. Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure □ Renovation Mini-Enclosure $\boxtimes \ge 3$ sf or ≥ 3 If ≥160 sf or ≥260 lf □ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ 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 Laundry Room & Adjacent Room X Floor Tile 156 SF X П П П П Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Cubic Yards of Hauler ID No. Waste Freehold Cartage Fairless Landfill 15939 1 City, State Disposal Date City, State Freehold, NJ 09/10/2019 Morrisville, PA Completed By (Print or Type) Signature

ASB-41 JAN 13

Margie Muller

Administrative Manager

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			т/	TOA		51/29	MUMBERL	AND COUNTY	LAN	DF	14	
City, State						Disposal Date						-
Hackensacl	k , N.J. 07	601				9/17/19	NEWBINE	6H. PA. 17	1240	2_	•	
Completed by	Title					Signature	1	1	late ,	1		7

J. MAIORANO

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

1 NV# 12	4120												Pı	rint F
UK0273 I	PAID	NOTI	FICATIO	State of N ON OF AS nt to NJA	BESTOS	ABATE	EMENT (0)) <u>E</u>	2 [\mathbb{V}		
Date of Notification (1) 8/29/2019 check #0273				of Buildin	g Owner	Operato	r (2)	1 60)) SE	 =P	6	2019		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Agencies Notified Type Noti	fication			Address N 55TH	CT		37100		1 01			2013		Lou
EPA Initia	nded		City, S	tate, Zip (Code			1	ASBE	STOS			1 2	
× Emer	ndment # gency (includin	g		ONNE,N		2		<u> </u>					A.T-LANSAC	
	cation) ellation			INZITA					Telephone 201 344					
Name of Facility Where Abatement i	s Taking Place	(3)	FAC	CILITY IN	FORMAT	ION	Type of Facil	ity (4)						
							School (15 3/50 						
Street Address 28 EAST 29 ST							Subchar X Other (i.	oter 8	(Other than ate & comm	K-12) nercial	build	lings, l	nom	es,
City (5) BAYONNE NJ 07002							etc.) Square Feet 50X100		# of Floors	8	3.65	dg. Ag	e	
County (6) HUDSON				Code (7) USE ONL			Current Use (Prior i	f being den	nolishe	-			
Name of Monitoring Firm Hired by Bu	uilding Owner (8	3)	ASC	M No.			of Abatement (Contra		TING				
Street Address						Street	Address HURCH ST							
City, State, Zip Code							tate, Zip Code WOOD NJ 0	7407	,					
Project Manager for Monitoring Firm			Telepho	one No.		1703333333	one No. 3739418		Licens 0130	se No.			-1.115	
Start Date (10) 08/31/2019	09/01/	2019	mpletion	Date (11)			of OSHA Monit		NTRACT	ING				
Occupancy Status During Abatement Facility Closed/Vacated During B	N 578	50					Address HURCH ST							
Abatement Performed Outside of Other – Describe: 8:00AM TO 4:	f Normal Facility	y Hour	nent s			City, St	ate, Zip Code NOOD NJ 0	7407	,					
Scope of Work (Check All That Apply))					LLIVI	7000 113 0	1401						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- Industrial	Renova Demolii				×	Full Contain Mini-Enclos Glovebag P Non-Exemp	ure rocedi	ıre					
		Locati					TYON EXOMP	T	and Non-i	TIADIE		batem		
Location of Asbestos-Containing Material (AC	M) Use	Normal ed Sole iintena	ly by	Asbes	tos Cont	cription	aterial (ACM)		Amount	-	T	Туре		
TO BE ABATED In Facility (13)	Cus	todial 8	Staff?	(i.e.	thermal surface	systems sing, VAT niscellane	insulation,		(Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								a		ate	ıre
ATTIC	X			Р	APER	NSULA	ATION		900SF	Х				
											+			
Name of Registered Waste Hauler		1 81	IDEE											
ATLANTIC CARTING		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	JDEP W auler ID		of Was				stered Lan					
City, State PEN ARGYL PA 18072					Disposa	al Date	City, Sta		/L PA 18	072			9990	\neg
Completed by LUIS ARCILA	Title PRES	SIDEN	NT		Si	gnature	- /	1		Date 8/29/	201	9		

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

Ch 2286

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

10	EG		Print Form	1
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Date of Notification (1) 9/4/19	1423	2			f Building (Manor	Owner/0	Operator	(2)			aum/Jednohodo	AUG/IN-WIGH	anasa tanbin	Gr_5ktpen/c	Nesc Dentificad
Agencies Notified	Type Notification	less.	+	Street A	ddress				-	- A	SBES	1 44. 4	S CC ENSI		OL 8
× EPA	× Initial			Colfax	Ave. Bl	dg 44			Scientera	VIOS (TRISSANC)	triustenander-		eres Sistem		
DEP	Initial Amended		-	City, Sta	ate, Zip Co	de								1	
X DOL	Amendmen		-	Rosell	le Park,	NJ 07	204								
П рон	Emergency justification)			Name of	f Contact				Tel	ephone	Numb	per			
DCA	Cancellation			Elizab	eth Cair	ney			90	8-245	-635	3			
				FACI	LITY INFO	RMAT	ION								
Name of Facility Where		ng Place (3)						Type of Faci	lity (4)						
Apartment Complex	Κ							☐ School							
Street Address									pter 8 (Oth			buile	lingo	home	
Colfax Ave. Bldg 44	ł.,							Other (i etc.)	i.e. private	& COITIII	lercial	Dulic	illigs,	ПОПТЕ	:5,
City (5)								Square Feet	10000	f Floors		1000	ldg. A	ge	
Roselle Park								5000	2			6	5+/-		
County (6)					Code (7)			Current Use			olishe	d)	11-	7-1-1-1	
Union				STATE	USE ONLY)	-	_	Apartmen							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	l No.			of Abatement		(9)					
Project Manager							All S	tages Abat	ement						
Street Address								Address	142						
								N. Midland							
City, State, Zip Code								tate, Zip Code							
								lle Brook, N	NJ 07663	85					
Project Manager for Mon	itoring Firm		1	Telepho	ne No.		100000000000000000000000000000000000000	one No.			se No.				
								500-3184		0130)5				
Start Date (10)		Scheduled	Com	pletion I	Date (11)		Name	of OSHA Mon	itor						
9/13/19		9/19/19													
Occupancy Status During	g Abatement (Che	ck Only One)				Street	Address							
Facility Closed/Vaca	ated During Entire	Period of Ab	atem	ent											
Abatement Perform Other – Describe:		nal Facility F	lours				City, S	tate, Zip Code	9						
(A)				211-1-1-1											
Scope of Work (Check A	Il That Apply)	_					_	,							
≥3 sf or ≥3 lf			nova				-		inment with	n Negati	ive Pre	essur	re		
× ≥160 sf or ≥260 lf		☐ De	moliti	ion			×	Mini-Enclo							
									pted (*) an	d Non-F	riable	Pro	cedur	е	
		ls L	ocati	on										ement	
Location	of		rmall			De	scription	of			-		Ту	ре	
Asbestos-Containing		Used Main				os Con	taining M	laterial (ACM)	3 11 200	mount				ш	
TO BE ABA		Custo		100000	(i.e.		l systems cing, VA	insulation,		Specify or LF)		Ren	Re	пса	ncl
(13)	i.j		(12)				niscellan		0.	OI LI)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u>a</u>	50.50	ate	Ге
l a a.d F	200			3.311.3.		D:	no 11/2 -		-	4015				5.2	
Laundry F	Koom		Х			PI	pe Wra	р	34	40 LF		X			
								T-1-2-17-12							
Name of Registered Was	te Hauler		N	JDEP W	laste	Cubic	Yards	Name	e of Registe	ared La	ndfill				
				auler ID		of Wa	ste					Len	AEII.		
All Stages Abatemen	IL		00	036592	2	3 YD		Gra	nd Centr	ai San	iitary	Lan	IdTIII		
City, State						The second second	sal Date	City,							
Saddle Brook, NJ						TBD		Pen	Argyl, P.	A		-) - -			
Completed by		Title	0722			5	Signature	111	//		Date				
Richard Cristofol		Presid	ent				/	110 9	//	_	9/4	/19			

Ch 362		NOTII	FICATION Pursuant	tate of Ne N OF ASE Lto NJAC	8:60 ar	ABATE	(الاق		D	E C	E		\mathbb{V}	E	
Date of Notification (1) 8/8/2019	Yde	R	Weiss	of Building sman R	Owner/ ealty	Operator	r (2)			SEF	D - (5 2	2019		Ш,
Agencies Notified Type Notification X EPA Initial			Street A	Address erbert S	treet					A O O IT O IT	annam,	SAPSON	Mara de mara de la compansión de la comp	West reasons	No. of Parties
DEP Amended Amendment				ate, Zip C ark NJ	ode				- Vac. no consequen	ASBEST	OS O	ON:	TRO	L &	2-7 4-100, -2-4
DOH justification Cancellation	including			of Contact Weissm					Tel	enhone N	Numbe	r			
			FAC	ILITY INF	ORMAT	ION			-			-			
Name of Facility Where Abatement is Taking N/A	g Place (3)					Emmes.	of Facility School (K-				RESILE.			
Street Address 16 Herbert St								Subchapte Other (i.e. etc.)	er 8 (Oth			uildi	ngs,	nome	es,
City (5) Newark							Squar 50,0	re Feet 100	# o	f Floors			ig. Ag	je	
County (6) Essex				Code (7) USE ONLY)		Curre	nt Use (Pr mercial	or if bei proper	ng demo ty	lished)	Ŋ.			
Name of Monitoring Firm Hired by Building C	Owner (8))	ASCN	M No.		Name Che	of Abat ckmar	tement Co k Indus	ntractor trial	(9)					
Street Address						7/27/27/27	Addres /lorgar								
City, State, Zip Code								p Code 07871							
Project Manager for Monitoring Firm			Telepho	ne No.			one No 570-2			License 01334					
Start Date (10) 8/9/2019	Schedul 8/17/2		mpletion	Date (11)				IA Monitor k Indust							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P		*.	ment				Addres lorgar								
Abatement Performed Outside of Normal Other – Describe:	al Facility	/ Hour	S				tate, Zip rta NJ	p Code 07871							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	DESCRIPTION OF THE PERSON OF T	Renova Demoli				×	Min Glov	Containm i-Enclosur vebag Pro i-Exempte	e cedure						
	Is	Locat	ion				110.	LXOIIIpto	, di	2 14011-1 11	abic i		bater		
Location of	1	Norma	lly		De	scription	of					_	Тур	е	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intena todial (12)	nce/ Staff?		thermal surfa	taining M systems cing, VA niscellan	s insulat T, or		(S	mount pecify or LF)	Kemova		Repair	Encapsulate	Enclosure
	Yes	No	N/A								-			हि	O .
Storage Area		X			Trans	ite Pan	eling		70	00 SF	Х	1			
											_	-			
						2 2 - 2 2 - 2 2 - 2 -					-	-	-		
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic	Yards	1	Name of	Registo	red Land	fill				
Newark Carting		1 8	lauler ID		of Wa					al Sanit		anc	lfill		
City, State Newark NJ					Dispos	sal Date		City, Star Pen Ar		4					
Completed by Corey Stankovic	Title CEO				S	ignature	(\$	tarko	·u		Date 8/8/2	019	9		

Ch 3ldp	NO	(Pu	ATION rsuant	of New OF ASBI to NJAC	ESTOS 3:60 and	ABATEI 12:120	0)	IT		E C		\mathbb{V}	E		
Date of Notification (1) 8/30/2019	25			Building (eline Sc			(2)	T		SEP	- 6	201	9	The state of the s	7
Agencies Notified Type Notification	n	S	Street Ad	ddress							0.00	UTC.	namouna 1	Ω.	-
EPA Initial Amended			City Sta	te, Zip Co	de			1	P	SBESTO LIC	EHO!	IG IG	10L	ex.	Name and Address
X DOL Amendme			Pine E		40			less	A CONTRACTOR OF THE PARTY OF TH	CONTRACTOR OF A					
DOH justification Cancellation			lame of Joe No	Contact otare					l Ta	alenhone N	lumhar				
Name of Facility Where Abatement is Tak	ing Place (3)		FACII	LITY INFO	RMATI	ON	Tv	pe of Facility	(4)						
N/A	ing Flace (5)						Ty	School (K-	W-100						
Street Address							×	Subchapte Other (i.e. etc.)	er 8 (Otl			ildir	ngs, I	nome	s,
City (5) Pinebrook								uare Feet 878	2	of Floors			g. Ag 160	je	
County (6) Morris				Code (7) ISE ONLY)			Cu re	rrent Use (Presidence	rior if be	eing demol	ished)				
Name of Monitoring Firm Hired by Buildin	g Owner (8)		ASCM	No.				batement Co nark Indus		r (9)					
Street Address						Street 54 N		ress gan Dr							
City, State, Zip Code						City, S Spar	state rta l	, Zip Code NJ 07871							
Project Manager for Monitoring Firm		T	elephor	ne No.		Teleph 973-		No. 0-2645		License 01334					
Start Date (10) 8/31/2019	Scheduled 0 9/8/2019	Comp	pletion [Date (11)				SHA Monito nark Indus							
Occupancy Status During Abatement (Ch	eck Only One)					Street		ress gan Dr							
Facility Closed/Vacated During Entire Abatement Performed Outside of Noted Other – Describe:			ent			City, S	tate,	, Zip Code NJ 07871							
Scope of Work (Check All That Apply)						Ора	i ta i	110 07 07 1							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovati nolitic				×	1	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure	9				ı	
33	ls Lo	catio	n										bate	ment	
Location of Asbestos-Containing Material (ACM)	Non Used S	mally solely		Ashaat		scription		rial (ACM)		Amount	-	-	Тур		
TO BE ABATED	Mainte Custodi				thermal	systems	s ins	ulation,		Specify	7 0		۳	Encapsulate	Enc
In Facility (13)		2)				cing, VA niscellar			5	F or LF)	Kelliova		Repair	psula	Enclosure
	Yes N	No.	N/A								=			ate	Ø.
Basement		X			Flo	oor Tile	es			522	X				
		2000													
Name of Registered Waste Hauler Newark Carting		90000	IDEP Wauler ID	38	Cubic of Wa 7	Yards ste				tered Land ral Sanit		and	dfill		
City, State Newark NJ					Dispos	sal Date		City, Sta		PA					
Completed by Corey Stankovic	Title CEO				S	Signature	6	Hark	· mc		Date 8/30	/20	19		

10 CL	N	OTIFICATIO (Pursuan	State of New Jers N OF ASBESTO It to NJAC 8:60 a	S ABATE and 12:12	0)	Consumer and proposed states and assessment of the consumer of		E C	<u>E</u>	20		int Fo
Date of Notification (1) 08/30/19			of Building Owne ersey City, LLO		r (2)	The second second	LI LI	0.621		LU	10	- Processor
Agencies Notified Type Notificati X		Street 855 L	Address exington Ave					ASBEST	OS CO		ROL	8
X DOL Amendme	ent #_02		tate, Zip Code York, NY 1106	65								
□ DOH □ DCA □ Cancellati		10.000000000000000000000000000000000000	of Contact ric Albanese					phone No 3-300-00				
Name of Facility Where Abatement is Ta	king Place (3)	FAC	ILITY INFORMA	TION	Type	of Facility (4)					
Residential						School (K-1	127					
Street Address					×	Subchapter Other (i.e. p etc.)	rivate &	commerc	12) cial bui	dings	, hom	es,
City (5) Jersey City					1.5	re Feet 00 +	# of 6 +	Floors	101 50	3ldg. <i>A</i> 50 +	Age	
County (6) Hudson			Code (7) USE ONLY)		Curre	ent Use (Prid	or if bein	g demolis	shed)			
Name of Monitoring Firm Hired by Buildin	g Owner (8)	ASCI	M No.			tement Con acting & I			Con	sultin	ıg, In	c.
Street Address					Addres	A Commence of the Commence of						
City, State, Zip Code				City, S	state, Z	ip Code J 07470	-					
Project Manager for Monitoring Firm		Telepho	one No.	Teleph	none N 628-9	0.		License N	No.			
Start Date (10) 04/08/19	Scheduled	Completion	Date (11)	A CONTRACTOR OF THE PARTY OF TH		HA Monitor acting & E	Enviror	montal	Con	ultin	a la	
Occupancy Status During Abatement (Ch	그 내 그 전문화 왕인 그리고 있다.				Addres			IIIIeiiiai	Cons	uitiii	y, in	C.
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: Occupied	e Period of Ab rmal Facility H	atement lours		City, S		p Code	19					
Scope of Work (Check All That Apply)				vvay	ne, iv.	J 07470						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novation molition		×	Min Glo	I Containme ii-Enclosure vebag Proc n-Exempted	edure					
Location of	No	ocation rmally	De	escription		I-Exempted	() and	Non-Fria	JIE PTO	Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Maint Custoo	Solely by enance/ dial Staff? 12)	Asbestos Cor (i.e. therma surfa	ntaining M	laterial insula T, or	(ACM) tion,	(Sp	ecify or LF)	Removal	Repair	Encapsulate	Enclosure
Room 301	Yes	No N/A									ate	ге
Room 301		X	Floor	Tile & N	Aastic		3,20	0 SF	X			-
Name of Registered Waste Hauler J.R. Contracting & Environmental	Consul., Inc	NJDEP W Hauler ID 17819		Yards aste		Name of R	D. Charles and C. Sandara					
City, State Vayne, New Jersey		17019		sal Date		City, State Pen Arg				10	47-7-11-	
Completed by Jerry Bijelonic	Title Project	Manager		Signature	1	/ John Aig	yı, F 61	Da	1,100,054,5	9		