0429

Date of Notification (1)			iva	me of Build	ling Owner/Operator	(2)		50	1 4/1	13.1		-
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Agencies Notified ☐ EPA ☐ Initial ☐ DOLWD ☐ DHSS ☐ Amended Amendment			Str	eet Address // Co	Home s Cooper	H:11	MOP	30	1 1	1 1 to	58	
DCA Emergence (NJAC 5:23-8) Justification		ling		3129	roes	NJ	08	175		G	UL	
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			F		NFORMATION	1)		30				
Name of Facility Where Abatement is T	aking Pla	ice (3)			Ottober 1010	Type of Facili	ty (4)					
Res. Home Street Address 116 Cooper 1-	1:)1	P	0,0	D		School (K- Subchapte Other (i.e., homes, et	er 8 (Other private ar	than K- nd comm	12) nercial l	buildii	ngs,	
, (0)						Square Feet	# of F	Floors	E	Bldg.	Age	
County (6)			I Co	untu Codo	/7\/07475 H05 01810	7500		2	- -	+2	5	
HUNTERDAN			0	unity Code	(7)(STATE USE ONLY)			ng demo	lished)			
Name of Monitoring Firm Hired by Buildi	ng Owne	r (8)	ASCI	VI No.	Name of Abateme	ent Contractor (me					
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MOHNTON F	20	,	QE	4	City, State, Zip Co	ode						-
roject Manager for Monitoring Firm	<i>y</i>		7 > lephone		Telephone No.	in f	A	195	40			
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914112	9_	Complete /	etion D	ate (11)	Name of OSHA M	onitor						
9 / 4 / 12 ccupancy Status During Abatement (Ch	eck only	Comple / _ *7	etion D	ate (11)		onitor					rs	
9 / 4 / 12 ccupancy Status During Abatement (Ch Facility Closed/Vacated During Entire	eck only	one)	etion D	ate (11) _1_2 N/4	Name of OSHA M K + B Env Street Address	onitor Ilraume~	TAS				F4	
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Date of Notification (1) 09/04/2012	4			f Building GAN CHA				112 SEP -	7	ind I. T					
Agencies Notified	Type Notification			Street A		PON RI	J/D 14'								
Ĕ EPA □ DEP ☑ DOL ☑ DOH	☐ Initial ☐ Amended ☐ Amendment ☐ Emergency ☐ justification)	(including	_	JERSE Name of	te, Zip Co Y CITY f Contact S. LIS	ode , NJ (7310		& LIC	EN	EING ephone No	00			
☑ DCA	☐ Cancellation				LITY INFO										
Name of Facility Where JPMORGAN BANK BE Street Address 1117 MAIN STREET	RANCH	g Place (3)	PAGE	LITT INIT	J. W.A.I.			of Facility (4 School (K-12 Subchapter (Other (i.e. pretc.)	2) 8 (Oth	er than K- & commen	12) cial buil	dings	, hom	es,
City (5) DATERSON	1,48							- 100 KG - 100 KG	re Feet 76SF	# o	f Floors		8ldg. <i>I</i> 10+	\ge	
County (6) PASSAIC		-		County (Code (7) USE ONLY)		Curre	ent Use (Prio K	r if be	ng demoli:	shed)	Δ,		ne"
Name of Monitoring Firm GCI ENVIRONMENTA	n Hired by Building	Owner (8)		ASCM	1 No.				tement Cont						
Street Address 655 THIRD AVENUE	3					=1	Street		ss EENS PLA:	ZA S	OUTH				
City, State, Zip Code NEW YORK, NY 100)17								ip Code AND CITY,	, NY	11101				23
Project Manager for Mor JAMES GROND	nitoring Firm			Telephor 212-98	ne No. 86-9460) ,	Teleph 718-				License 08853	No.			
Start Date (10) POSTPONED		Schedule		mpletion [Date (11)				HA Monitor BARNHART		L				
Occupancy Status Durin ☐ Facility Closed/Vac ☐ Abatement Perform ☐ Other – Describe:	cated During Entire I	Period of A	Abate	ment rs			City, S	ERRII tate, Z	ss NE AVENUE ip Code 30Y, NJ (2007-)				
Scope of Work (Check A	All That Apply)							-							
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			X					<u> </u>							
- (C)		-										-	18		
Name of Registered Was ATC	ŧ	NJDEP W Hauler ID 14644PA	No.	Cubic of Was 15 YZ	ste		Name of R								
City, State SHIRLEY, NY							sal Date /2012		City, State WAUNESE		ОН		Anj	4 V	× ×
Completed by ARIC DOMOZICK	Completed by Title						ignature		G#			ate 9/04/	201	2	

12-1518

Print Form

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Date of Notification (1)		1000000		uilding Ov	wner/Op							-11-000000
08/28/2012		D	ress B	am		2012	SEP -7 A	4 4:51				
Agencies Notified Type Notification		3,777	reet Add 33 Mc/	ress Arthur B	lvd.		ESTUS CL					
EPA Initial DEP Amended Amendment if				, Zip Code , NJ 07			LICENS	NG CD				
E DOH justification Cancellation	ncluding.		ame of C		-			Telephone Nu	nber			
K DCA			FACILI	TY INFOR	OITAMS	N						
Name of Facility Where Abatement is Taking Street Address	Place (3)								2) ial build	inas.	home	s.
933 McArthur Blvd.					-990	EX.	etc.)					
City (5) Mahwah, NJ 07430						1	quare Feet 60,000	# of Floors	27	dg.A 7 yrs		
County (6) Bergen County	-	C	ounty Co	ode (7) SE ONLY)			ument Use (Prio Commercial	r if being demolis	hed)			
Name of Monitoring Firm Hired by Building C Assessment, Resources & Technol	ogy		ASCM	No.			Abatement Con vironmental				4	
Street Address 111 John Street				3.		Street Ad 11-02 (dress Queens Plazz	a South		41		
City, State, Zip Code New York, NY 10038			****				e, Zip Code sland City, N	r 11101				
Project-Manager for Monitoring Firm Paul Offens			elephone			Telephor 718-34	e No. 9-0900	License I 00853	Vo.			
Start Date (10)	Scheduled 09/21/2			ate (11)			OSHA Monitor I Barnhart					
09/05/2012 Occupancy Status During Abatement (Chec		100				Street Ac	idress					
Facility Closed/Vacated During Entire I Abatement Performed Outside of Nom	Period of Aba	atem	ent			City, Stat	rine Avenue	9070		-		
Other – Describe:						Soun	Amboy, NJ 0	6019				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	Control Control	novat				×	Mini-Enclosure Glovebag Prod				-	
							Non-Exemple	1 () and reons no			emen	t
	The state of the s	ocatio									/pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenar	y by icel	Asbest (i.e.	tos Cont thermal surfac	scription or aining Ma systems i cing, VAT, niscellane	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure.
	1.03				VAT	& Mast	ic	200 SF	X			
Retail Space		X				OR TIL		8,000SF	X	1	-	+
BASEMENT		X			FIIC	JOR III						
		1 61	JDEP W	aste	Cubic	Yards	Name of	Registered Land	111			
Name of Registered Waste Hauter ATC	H	lauter ID 4644PA	No.	of Was	ste	Minerv	a Enterprises					
City, State Shirley, NY				Dispos 08/09	sal Date 1/12	City, Star Wayne	sburg, OH		160			
Completed by Aric Domozick	Title VP Bu	isine	ss Ope	erations		signature	CA		Date 08/28,			

PPROVED: PAUL HORNER, NIDOH

		NOT (F	IFICATIO	tate of Ne N OF ASE to <u>N.J.A.C</u>	w Jersey BESTOS ABAT C. 8:60 and 12	CER/CALT		2340
Date of Notification	(1) 9/4/12		Name	e of Building C	Owner / Operator (2	2012 SEP 7		
Agencies Notified EPA DEP	Type Notific		Stree 1490	t Address Prospect S	treet			
Ĭ DOL	☐ Initia	nded	Tren	State & Zip Coton, NJ 086		ASSESTES & LICE	NSING	JUA
☐ DOH ☐ DCA		rgency cellation		e of Contact Everett O. C	ollins			Telephone Number
			FA	CILITY INFO	DRMATION			
Name of Facility WI Trenton Central	here Abatem H S	ent is Taking f	Place (3)		Type of Facility (
Street Address 400 Chambers S	treet		3/		Other (i.e. pr	rivate & comme		SUBCHAPTER 8 lings, homes, etc.)
City (5)	-	County (6)	County	Code (7)	Square Feet 70,000	# of Floors		Bldg. Age 60+
Trenton		Mercer			Current Úse (Prio	or if being demo	lished)	
Name of Monitoring Environmental C	Firm Hired bonnection	y Building Ow	ner (8)	ASCM No.	Name of Abatem Bristol Enviror	ent Contractor (9)	
Street Address 120 North Warre	n Street				Street Address 1123 Beaver S			**************************************
City, State & Zip Co Trenton, NJ 0801	0				City, State & Zip Bristol, PA 190	Code		
Project Manager for Brian Holbig	Monitoring F	irm	Telephone		Telephone Numb (215)788-6040		License 00509	Number
Schodulad Start Dai	to (10)	Calandula d O	10 5		1		15000	

Name of Facility Where Ab	otomont in Takina F	11 /	FAC	SILIT	TY INF	ORMATION							1000	
Trenton Central HS	atement is Taking F	lace (3)			Type of Fac								
Street Address						School								
400 Chambers Street						Subcha	pter 8 (C	Other than K-	12) NON	SUBC	CHA	APTE	ER 8	1
400 Chambers Street								te & commer	cial build		-		etc.)	
0:4 - (5)						Square Fee	t	# of Floors		Bldg.	Ag	е	34 1/30	
City (5)	County (6)	Co	unty C	ode	(7)	70,00		3				604	÷	
Trenton	Mercer					Current Use	(Prior if	being demol	ished)					
						School			- 5:					
Name of Monitoring Firm H	ired by Building Owi	ner (8)		ASC	CM No.	Name of Ab	atement	Contractor (9)					
Environmental Connec	tion	10000				Bristol En			-/					
Street Address						Street Addre			70.000					
120 North Warren Stree	et					1123 Beav	er Stree	et						
City, State & Zip Code	and the latest of the latest o				- Alle	City, State &					-	V		30-111-
Trenton, NJ 08010						Bristol, PA								
Project Manager for Monito	ring Firm	Telep	hone	Numi	ber	Telephone N			License	Numb	er			
Brian Holbig			392-4			(215)788-6			00509	rvarrib	0.			
Scheduled Start Date (10)	Scheduled Cor	mpletio	n Date	e (11)	Name of OS		itor	100000					
9/4/12		9/5/		_ (,	Bristol Env								
Occupancy Status During A	batement (Check o					Street Addre		Jiitai iiio.		-				
Facility Closed/Vaca	ated During Entire P	eriod	of Aba	teme	ent	1123 Beav		of.						
Abatement Perform						City, State &					-			
	PM - 12:30 AM			C (o opin	Bristol, PA	The state of the s							
						DISTOI, FA	19007							
News a se		K7						Full Containn		Negati	ive	Pres	ssure	е
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Scope of Work (Check all the Scope of Work (nat apply)	ls I	Dem ocatio	olitio		Descriptio		Mini-Enclosu Glove Bag Pr Non-Exempte	re rocedures ed and No Amount	s on-Fria	ıble	Pro		ure
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Date of Notification (1)		1	Name of		Owner/Operator		CORT	ni. T	1416-			İ
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came of Facility Where Abatement is Taking	Place	₹]-					School (K-12)					i
PESIDENCE						100	1 & valoadydus	Other than	K-12)			1
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Sueer Address 17:51 HAUFW	2.00					Squ	are Feel	VOI Floor		6100		
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OCEAN CITY				5 1. 15	LICYAYE	Cur	rent Use (Prior	H being de	molsh	50)		
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City State Zp Code						- 6 6	SAN	License	NO			
- Marilana Firm	- T	Yelep	hone No	Э.	Yelephone No.	70	-0472	00	744	4		
Project Manager for Monitoring Firm	7.				836-1	17	-0120				-	1000
I Sche	duled Co	mpleti	on Date	(11)	Name of OSHA	MOON	41.614	M				:
Cian (lale (IV)	2/1		12		JOSE	17/4/	7:					
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Occupancy Status Down The P	L Capita	Hour										
Abatement Performed Outside of Normal	y racally	1100.			MAP	تن ب	SHADE	: N.	٠, ر	0000	-	
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Bound Waste Haules			Hauler E	No.	01 Waste	_		, 0 ,				
Name of Registered Waste Hauler			1/1		Disposal Dal	e	City. State		=	C.U	1.0	
KIÉMCO INC.					-		Woo	DBIN	C	-		
KIEMCO LNC.	~ /·	20	57						_			
KIEMCO LNC.	J, 0	80	52		Signatur	· e	110		Date	9/=	-/1-	>
KIEMCO INC.	ide		20 1	- Laylon	Sipoalu	re oa	1.1C 0		Date	9/5	1/1	2
KLÉMCO LNC.	ide		52 ER		Signatu	re oa	1.1C 0		Date	9/5	1/13	2

Date of Notification (1) September 4, 2012)				f Building itzgeral		Operator	(2) Ch	eck#4			***************************************	-		
Agencies Notified	Type Notification		1	Street A			2012	SEP -	100 (0.00 (0		3		, , , , , , , , , , , , , , , , , , , 		
EPA DEP DOL			-	City, Sta	ate, Zip C	ode	ASE	ESTO:		10					
☑ DOH DCA	justification) Cancellation)			f Contact itzgeral			os Elos	-13-0-123	Telep	afforne N	umber			
					LITY INF		ION								
Name of Facility Where Residence	Abatement is Takir	ng Place (3)	=1=3	-508 508				Type of F	acility (4	1)					
Street Address		2						Sub	ool (K-12 chapter (er (i.e. pr	(Other			Idinas	hom	201
219 Buttnwood Ave								etc.)				_			
City (5) Delanco								Square F 2800	eet	# of F	Floors		Bldg. 35	Age	
County (6) Burlington		- 11 -			Code (7) USE ONLY)		Current L Resider		r if being	g demoli	shed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	No.		0.000.000	of Abatem e Enviro		- 100 - 100 - 1000 Fin	200				
Street Address							Street	Address						-	
PO Box 341 City, State, Zip Code						51, 11		Lippinco tate, Zip C							
Chesterfield, NJ 08 Project Manager for Mor			- 1 -	Геlерho	ne No			e Shade	, NJ 0		Licana	Na			
Bill Weisgarber	intolling I lilli		(609-29	8-4070	Con surroll		755-0099)	- 1	License 00842	NO.			
Start Date (10) September 15, 201	2	Scheduled Septemb					Name of EMSI	of OSHA N L	Monitor						
Occupancy Status Durin	g Abatement (Che	ck Only One)	2 10/32	302			Street A	Address							
Facility Closed/Vac	ated During Entire	Period of Aba	atem	ent				ładdon A	2,9255		-				
Abatement Perform Other – Describe:		nal Facility H	ours			_		ate, Zip Co mont, N		sey (08108				
Scope of Work (Check A	III That Apply)	[D] =		1				l		1800 120	7 Ve	2			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		generates	noliti				×	Mini-En Gloveb	ntainmer closure ag Proce empted	edure V	Vrap r	Cut		·e	
		Is Lo						11011 22	I	() () ()	10111110		Abat	emen	t
Location Asbestos-Containing		Used S	mally Solely		Anhaa		scription					-	T 1	/pe	
TO BE AB	ATED	Mainte Custodi			(i.e.	thermal	systems	aterial (AC insulation,	IVI)		ount ecify	R	71	Enc	Ē
In Facil (13)			12)				cing, VAT niscellane			SF o	r LF)	Removal	Repair	Encapsulate	Enclosure
		Yes N	No	N/A							10 10	<u> 23</u>	1	late	Тe
Crawlsp	ace			xxx		Pipe	Insulat	ion		12	LF	xxx			
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*	75 Pd.														
Name of Registered Was Freehold	ste Hauler		No. of the last	DEP W		Cubic of Was		250000	me of Re	en ta nimaco, greco	d Landfil	1			
	22	253	- G.	1			ows La	anotili							
City, State Mount Holly, New Jersey 08060						9-17-2	al Date 2012		y, State Illytowr	ı, PA.					
Completed by		Title Owner	-			Si	gnature				1000	ate	-		
William Lynch	8		TOP AS THE	1/2	rela	-9.	Lyn	xc	S	epten	nber	4, 20)12		

Check# 3938

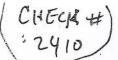
* Do not use this form for asbestos licensure exempted activities.

Date of Notification (1) 09/04/2012	- many constitu			uilding Owne SCHER	er/Operator	(2)	2017	SEP -7 AM	1,-5	4		
Agencies Notified Type Notification			eet Addr	ress PLAR AVE	=		2012	OLI I MI	4.0			
□ EPA □ Initial □ Amended □ Amendmen	t#	Cit	v. State,	Zip Code	E, NJ 081	09		& LICENSI		an		
□ Emergency is DOH justification □ DCA □ Cancellation	(including		me of C	ontact SCHER	911 27			Telephone Num	ber	e p		
			FACILI	TY INFORM	ATION	Type of	Facility (4)	5				\dashv
Name of Facility Where Abatement is Taki RESIDENTIAL Street Address	ng Place (3)					St.	chool (K-12) al buildir	nge h	nmas	
310 POPLAR AVE							c.)	# of Floors	Bld	g. Ag		-
City (5) MERCHANTVILLE		10	- 1.0	1- (7)		1512 Curren	t Use (Prio	2 r if being demolish	53 ed)			\dashv
County (6) CAMDEN		(S	ounty Co	SE ONLY) _		RESI	DENTIA					_
Name of Monitoring Firm Hired by Buildin CONNELL GREENE	g Owner (8)		ASCM I	No.	ASS	of Abate URED	ENVIRO	NMENTAL SE	RVIC	ES II	VC.	
Street Address 904 KINGS ARMS DRIVE						Address CLEM	s S RUN				735-	
City, State, Zip Code					City,	State, Zip LICA	o Code HILL, NJ	08062				
DOWNINGTOWN, PA 19335 Project Manager for Monitoring Firm			elephone	e No. 2-9363	Telep 610	hone No	o. 676	License N 01145	lo.	F #	1	
RICK PELLISSIER Start Date (10)	Scheduled	Comp	p		1/2/01/25/20	e of OSH	A Monitor				1.0	
09/05/2012 Occupancy Status During Abatement (CI	09/07/20 neck Only One				Stree	t Addres	s					
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe: RESIDENTIAL H	re Period of Ab	ateme	ent		City,	State, Zi	30 NORT p Code NSON, N					
Scope of Work (Check All That Apply)	☐ Re	enovati				- Mir	ni-Enclosur	cedure				
						× No	n-Exempte	d (*) and Non-Fria	ble Pro	Abate	ment	
		_ocatio						dir dir			ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair	I Solel ntenan odial S (12)	y by nce/	(i.e. th	Description Description of Containing Sermal system of Surfacing, Nother miscell	Materia ms insula AT, or	ation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
W F 10 1 10	Yes	No	N/A			ONED	ADIE	120 SF	X			
KITCHEN			X	FLOOI	R TILE-NO	JN FR	IABLE	120 31				-
												1
							2 5					
Name of Registered Waste Hauler NETS			IJDEP V lauler ID		Cubic Yard of Waste 1	s	1	f Registered Land D WASTE	nd		2027 Å	22 414
City, State HAZLETON, PA		+ 1,			Disposal Di 09/07/20	ate 12	City, Sta	RIAL, PA		-		
Completed by RONALD SWANSON	Title PRO	JEC1	r coo	RDINATO	OR Signal	ture	Qh		Date 09/04/	2012	2	

Print Form

State of New Jones! NOTIFICATION OF ASSESTED ASATEMENT. (Pursuent to NJAC 8:50 and 12:120)

. also of No. (2000) (1) 09/04/2012			Building Own FISCHER	enChamaior (2012 S	EP -7 AM	1	^-) 	
Agencies Norther Type Northeagan		Street A			4	- 111	170			
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TOPP TO Smerded		City, Sta	na, Zip Code		(E	117	4207	i	- 1	
図 DOL Arrestdoreni			HANTVILL	E, NJ 0870	e WAN	当物地	RO	-		
☐ Strangency Lustification)		Name of		×		THE SOLEM		1		
Carpellesson		i i	FISCHER			1			64.TH-1/1	
Name of Facility Where Abelement is Tekn	a Dinas (2)	FACS	LTY INFORM	ATION .	Type of Eaclify (,	>		- 1	
RESIDENTIAL	A LIGOS (9)									
Size Address					School (K-1) Subsheder	2) 8 (Other than K-1	12)			
310 POPLAR AVE				1	Other (i.e. p	richt & commer.	sied beild	ings,	inne	25,
City :	-				Source Foot	1 # of Floors	13	dg.A		
MERCHANTVILLE					1512	2	5		-	
County (a)		County C	Code (7)			x i berg demola	Siresi!			
CAMDEN	C(0)	1			RESIDENTIA f Abelement Con				-	
1 - 1 of Monitoring First - ed by Building COMNELL GREENLE	Usambr (8)	ASOM	1.2ACY	ASSU	RED ENVIRO	erecer (4) Inimental S	ERVK	ES	NC.	
Street Address 904 KINGS ARMS DRIVE			2.48.00.7	Street A	khiress LEMS RUN					
Chy, Sign. Zip Code					ste. Zir Coda					-
DOWNINGTOWN, PA 19335					ICA HILL, NJ	03062	1			
Frost Nemacy for Confloring Sime		Telephor		Telepho		Licerae.	o_		Martin Williams	
RICK PELLISSIER		484-43	2-9363	610-3	04-4676	01145				
F : 1Date (10) 09/05/2012	Scheduled (The state of the s	Date (11)	Name of EMSL	FOSHA Monitor	and the same of th				
Occupancy Status During Abatement (Che	sk Only One)			Street A						
Facility Closed/Vacated During Entire	Period of Aba	tenent		200 R	II. 130 NORT	H				
Abatement Performed Outside of Non Street - Describe: RESIDENTIAL HOL	nel Fedility H				er, zip Coce Aminson, N	3 08077				
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21:50 at or 52:50 II		rollian			Mini-Endosure	4				
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TO BE ABATED		lai Staff?	(i.e. the:	mmi systems urfecing, VAT	msulaida.	(Specify SF or LF)	HION	120	4800	1 Dia
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KITCHEN		×	FLOOR	TILE-NON	FRIABLE	120 SF	X			- Underso
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MAZLETON, PA	Tida			T Significant	Tini.	AND THE RESERVE OF THE PARTY OF	Oste		3.5	
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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) 9/4/2)12			Name of	Building (Owner/Ope A to Z	rator (2)	ECEIVE Inc.		20	6 D	7 -
[x] EPA []	Notification Initial Noti			Street Ac	ddress	940 Pa	rk Avenue 2012 S					•
[] DEP [] [x]	Amended M Amendmer Emergency	t # (including			te, Zip Co	^{de} Lakew	ood, New Jersey (F101 18 1141	>	4 50	21	
[X] DOH [] DCA	justification Cancellation			Name of	Irving	Perlstein		elephone Number		EF		
Name of Facility Where Abatement i	Taking Plac	2 (3)	FAC	CILITY II	NFORM	ATION	Type of Facility (4)					
Residence	raking riac	5 (3)				ı	Type of Facility (4)	School (k-12)				
Street Address 363 Ridge A	venue						[] [x]	Subchapter 8 (or Other (i.e., privationes, etc.)			ial bui	ldings,
City	Соц	inty (6)		County C	ode (7) USE ONL	Y)	Square feet 1500 sf	# of Floors	Bldg	g. Age	50	
Lakewood	Oc	ean					Current Use (Prior it Resider)			
Name of Monitoring Firm Hired by E N/A	uilding Owne	er (8)	5.5	ASCM No	0.	Name of	Abatement Contractor Guardia	(9) an Contracting,	Inc.			
Street Address				9		Street Ad	dress	oute 9, Unit 61	,			
City, State, Zip Code	-					City, Stat	e, Zip Code Toms R	tiver, New Jers	ev 08'	755-1	271	
Project Manager for Monitoring Firm		Telephone N				Telephon 732-349	e Number	License N 00624		755 1.	271	
Scheduled Start Date (10) 9/4/12		Scheduled Co 9/5/12	ompleti	ion Date (1	1)	Name of	OSHA Monitor E.M.S.I	L. Analytical				
	Vacated Dur ormed Outsic	one) ing Entire Period le of Normal Fac				Street Ad City, Stat	1056 St	telton Road				
L J	<u> </u>							way, New Jerso		54		
Scope of Work (Check all that apply)						[]	Full Containment Mini-Enclosure	with Negative Pro	essure			
$\begin{bmatrix} & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ \end{bmatrix} > 3 \text{ sf or } \ge 3 \text{ lf}$ $\begin{bmatrix} & & & & \\ & & & \\ & & & \\ \end{bmatrix} \ge 160 \text{ sf or } \ge 260$	lf		Renova Demolit			[] [x]	Glovebag Procede Non-Exempted (*		Procedu	ıre		
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Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Custodial Staff (12) YES NO N/A			todial		Asb M (i.e., insu	Description estos-Cont laterial (A) thermal s lation, sur VAT, or r miscellar	caining CM) ystems facing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
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and the second s				ļ								
Name of Registered Waste Hauler		NJDEP Waste	Hauler	ID No.	Cubic Yar	ds of Waste	Name of Register	red Landfill				4
Guardian Contracting	Inc.	202	223		3		T.R.R.F.					
City, State Toms River, New Jers	ey		Disposa 9/6/12	al Date		City, Stat	le wn, Pennsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title			Signatur	() //	che	140	1	Date 9/4/2	2012	,	

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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120

Agencies Notified Type of Petitification Street Address 940 Park Avenue 2012 SEP - 7 APT 1/4 1/4 1/4 Imagencies (noted and part of the petition	One		(Pursua	ni io njac 8.	00 and 12.1		DEMENDING	10.4			
Street Address Street	Date of Not fication (1)			Name of Build		erator (2)	With Colored to Colored Colored Colored				
Second Control Seco	9/4/2012	4.44			A to 2		Part of the second seco	, , ,		157.00	
Section of State Court of State Co	[x] EPA [] Initial ?	Notification		Street Address		ark Avenue					
Name of Facility Where Abatement is Taking Place (3) Street Address	[] DEI [[] ,]		n _	City, State, Zi	Code Lake						
Name of Facility Where Abstencent is Taking Place (3) FACILITY INFORMATION	[] Emerge		g	17 00		wood, New Jerse		C			
Type of Facility Where Abatement is Taking Place (3) Residence Type of Facility (4) Residence Type of Facility (4) Residence Type of Facility (4) School (8: 2) School (8: 2) School (8: 12)	[X] DOH [x] Cancel			The remember of present the second of the second		n	3 CASA Transaction				
Street Address Stre	DCA		EAG								
Street Address	Name of Facility Where Abatement is Taking	Place (3)	FAC	JILIT I INFO	KWIATION		4)				
Size Address Start Add						[]		tla o	l. 12\		
Lakewood Ocean STATE USE ONLY) 1500 a Current Use (Prior if being demo ished) Current Use (Prior if being demo ished) Residence Current Use		.oad				[x]	Other (i.e., privat			al buil	dings,
Carent Use (Prior if being demon ished) Residence	City	County (6)					# of Floors	Bldg		0	
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abstement Contracting, Inc.		0		(STATE USE	ONLY)		r if heing demolished)		- 6	0	
Street Address Stre	Lakewood	Ocean				Resid	lence				
Street Address		Owner (8)		ASCM No.	Name o			Inc			
Steet					Street /	Address					
Toms River, New Jersey 08755-1271 Project Manager for Monitoring Firm Telephone Number Telephone Number Scheduled Start Date (10) 9/04/12 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Other - Describe Scope of Work (Check all that apply) [] Full Containment with Negative Pressure [] Mini-Enclosure [] Mini-Enc					City C		Route 9, Unit 61	-	-		
Scheduled Start Date (10) Scheduled Completion Date (11) 9/05/12 Scheduled Completion Date (11) Scheduled Completion Date (12) Scheduled Complet	City, State, Zip Code				City, S	Tom:	s River, New Jerse	ey 087	755-12	271	
Scheduled Start Date (10) 9/05/12 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Abatement Performed Outside of Normal Facility Hours [] Other Describe Scope of Work (Check all that apply) [] Full Containment with Negative Pressure [] Abatement twith Negative Pressure [] Mini-Enclosure [] Mini-Enclosure [] Glovebag Procedure [] Abatement Visual Non-Exempted (*) and Non-Friable Procedure Solely by Material (ACM) TO BE ABATED in facility (13) YES NO N/A Setterior X Abbestos siding Normally used Sabestos Soling Fig. 1300 sf X I I Reposal Date Normally used Sabestos Soling Normally used Sabestos Soling Normally used Sabestos Soling Abount (Specify SF N P C C V R S S S S S S S S S S S S S S S S S S	Project Manager for Monitoring Firm	Telep	hone Numbe	r				lumber			
9/04/12 9/05/12 E.M.S.L. Analytical Street Address	Scheduled Start Date (10)	Sched	luled Comple	etion Date (11)			00024	7 17 1	775		
Scope of Work (Check all that apply) City, State, Zip Code Piscataway, New Jersey 08854	9/04/12	9/		N 10	G: 1		S.L. Analytical	-			
City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Piscataway, New Jersey 08854 City, State City, State, Zip Code Piscataway, New Jersey 08854 City, State	Occupancy Status During Abatement (Check	only one) I During Entir	e Period of A	batement	Street		Stelton Road				
Scope of Work (Check all that apply) Scope of Work (Check all that apply)					City, S	tate, Zip Code					
Section of Work (Check at that apply) [] $>3 \text{ sf or } \ge 3 \text{ lf}$ [] Renovation [] Glovebag Procedure [x] $\ge 160 \text{ sf or } \ge 260 \text{ lf}$ [x] Demolition [x] Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure R R R E E E N N N N N N N N N N N N N N	[] Other - Describe				- '	Pisca	itaway, New Jerse	y 088	54		
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Solition To Be Abate Abatement Type	•			• 44.00]	,1 - 10 pints (0.000)					
Abatement Type Abatement Type Asbestos-Containing Material (ACM) Asbestos-Con		[f v	1		l I x	The second contraction of the second contrac		Procedi	ure		\$5°
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. Is Location Normally used Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) M P C C C N M P C C C N N N M P C C C N N N M P C C C N N N M P C C C N N N M P C C C N N N M P C C C N N N N N N N N N N N N N N N N N	[X] 2100 \$1 01 2200 11	ι.^	<u> </u>					,		Type	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) YES NO N/A Normally used Solely by Maintenance/Custodial (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Exterior Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) YES NO N/A A A L C O I P O OTHER SET OF LET O		In I o	antion	ľ	Descript	ion of					
Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. Solely by Maintenance/Custodial Staff (12) Maintenance/Custodial insulation, surfacing, VAT, or other miscellaneous YES NO N/A Name of Registered Landfill T.R.R.F. Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler Guardian Contracting, Inc. Name of Registered Landfill T.R.R.F.	Location of				Asbestos-C	ontaining				100	N
In facility (13) YES NO N/A Staff (12) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. Name of Registered Waste Hauler 20223 Disposal Date Staff (12) VAT, or other miscellaneous) VAT, or other miscellaneous A U U U Cubic Yards of Waste A Name of Registered Landfill T.R.R.F.	Asbestos-Containing Material (ACM)			,				M		100	10000
(13) (12) VAT, or other miscellaneous) VAT, or other miscellaneous) VAT, or other miscellaneous) A L L R E E Exterior XX				11			- 0.2.)	2000	I	P	0
Take of Registered Waste Hauler Guardian Contracting, Inc. YES NO N/A N/A N/A N/A					VAT	, or			R		10000
Exterior X Asbestos siding 1300 sf X Name of Registered Waste Hauler Guardian Contracting, Inc. Disposal Date Disposal Date City, State		VEC N	10 N/A		other misce	llaneous)		1		L	R
Name of Registered Waste Hauler Guardian Contracting, Inc. NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill T.R.R.F.							1200 of			Е	В
Guardian Contracting, Inc. City State Disposal Date City, State	Exterior	X		Asbestos	siding		1300 81	+	-		
Guardian Contracting, Inc. City State Disposal Date City, State				-				-7-	-		
Guardian Contracting, Inc. City State Disposal Date City, State										7 12	
Guardian Contracting, Inc. 20223 3 T.R.R.F. City State Disposal Date City, State	Name of Registered Waste Hauler	NJDEI	Waste Haul	er ID No. Cul	oic Yards of W			-	E-		
	Guardian Contracting, Inc.		20223							1000	
Toms River New Jersey 9/06/12 Tullytown, Pennsylvania	City, State Toms River New Jersey						mia /				
Completed by (Print or Type) Nicholas Fernicola Project Manager Date 9/4/2012	Completed by (Print or Type)	Will be a second of the second			1:/18	14.	1				

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

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

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Date of Notification (1) September 4, 20	12			Name o	f Building (Department of F	Public Works	1.6 J.			
	l Notific	ation tification		Street A		271.0.1.0	State Street	ESCINCE		7.5		
[x] DOL Amer	ndment #			City, St	ate, Zip Coo		ı, NJ 08608	& LICENS			6	
[x] DCA justif	ication) ellation			Name o	f Contact Harold	Hall	Т	elephone Number				
			FACI	LITY	NFORM	ATION						
Name of Facility Where Abatement is Taking Trenton Water Wo		3)					Type of Facility (4) [] [x]	School (k-12) Subchapter 8 (otl	ner tha	n k-12)		
Street Address 669 Pennington A	venue	(corner of P	enning	gton &	Melon St	.)	į j	Other (i.e., priva homes, etc.)	te & co	mmer	ial bui	dings,
City	Trenton County (6) Mercer M					n	Square feet 3,375	# of Floors		g. Age	54	
Trenton	Merc	er 🦈	5 1 2	-			Current Use (Prior if	being demolished Pumping Station				
				ASCM N 00030	10.	Name of A	batement Contractor					
Street Address	-707					Street Add	lress	oute 9, Unit 61				-
City, State, Zip Code						City, State	e, Zip Code		0.0	7.5.1	271	
	Telephone M	ımher	The second		Telephone		Liver, New Jerse License N			271		
	Brian Holbig 609-392-4						-9932	00624				
Scheduled Start Date (10) 9/6/12	uled Start Date (10) Scheduled Con						OSHA Monitor E.M.S.I	Analytical				
[x] Facility Closed/Vacate				Street Add		elton Road						
Other - Describe						City, State		way, New Jerse	y 088	54		
Scope of Work (Check all hat apply)				8		[x]	Full Containment Mini-Enclosure	with Negative Pre	ssure			
$\begin{bmatrix} & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ \end{bmatrix} > 3 \text{ sf or } \ge 3 \text{ lf}$ $\begin{bmatrix} & & & \\ & & & \\ & & & \\ \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ lf}$			Renovat Demolit			[] []	Glovebag Proced Non-Exempted (*	ure) and Non-Friable	Prœedu	ıre		
									Abat	ement	Туре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	d odial N/A		Asb M (i.e., insu	Description estos-Cont faterial (A) , thermal si- lation, sur- VAT, or er miscellar	aining CM) ystems acing,	Amount (Specify SF or LF)	R E M O V A	R E P A I R	E N C A P S U L E	E N C L O S U R E		
First floor	X			Skim	coat plas	ter		4,000 sf	X			
									-			
		1 7	400	-								
Name of Registered Waste Hauler Guardian Contracting, Inc.	1	NJDEP Waste 1 202		ID No.	Cubic Ya	rds of Waste	Name of Registe T.R.R.F.	red Landfill			. 71	
City, State			Disposa 10/8/1			City, Sta	e wn, Pennsylvania					
Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola	Title Proje	ct Manager		Signat	ure	Tunyto	wii, i chiisyivallid		Date 9/4/	2012		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

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Date of Notification (1)	eptember 4, 20	12			Name o	of Building (10.75	rator (2) T	CEIV		21	$)\psi_{o}$	26	
Agencies Notified [X] EPA		al Notifi			Street A	Address	7 Whit	2012 SEF e Oak Drive	'-7 Al	1 4: 4 .			7.	
[] DEP [x] DOL [x] DOH	Ame	ndment	tification # including		City, Si	tate, Zip Coo	le Califo	n, NJ 07830	CEMSH	NTROL			u .	
[] DCA	12.17 M2.19	fication) cellation			Name o	of Contact Nick M	1andini	-0	Teleph	one Number	}			
		10201700		FAC	CILITY	INFORM	ATION							
Name of Facility Where A Res	batement is Takin sidence	g Place	(3)		F.A.			Type of Facili] Sch	iool (k-12)	•	1.10		1400
Street Address	Worthington	Avenu	e		3			[x] Oth	ochapter 8 (ot her (i.e., priva nes, etc.)				ldings,
City		Coun	ty (6)			Code (7) USE ONLY	0	Square feet 2000 st	1967	of Floors	Bld	g. Age	50	
Spring Lake		1/1/2000	mouth						sidence	gdemolished)			
Name of Monitoring Firm	Hired by Building ardian Contrac				ASCM N	No.	Name of	Abatement Con		ontracting,	Inc			
Street Address	9 Rte. 9, Unit		ic.				Street Ad	dress		9, Unit 61	me.			
City, State, Zip Code							City, Stat	e, Zip Code						
Tor Project Manager for Monit	ns River, NJ 0	8755	Telephone	Number	8		Telephon	e Number	ms River	, New Jers			271	
Nicholas Ferr			732-349-	9932			732-349	9-9932		00624				
Scheduled Start Date(10) 9/17/12	7		Scheduled 7/19/1		tion Date	(11)	1225		M.S.L. A	nalytical				
Occupancy Status During	Abatement (Check lity Closed/Vacate	1.5		ind of Al	satament		Street Ad		56 Stelto	n Road				
	tement Performed		70				City Stat						-	
	er – Describe	0.000					City, Stat	e, Zip Code Pi	scataway,	New Jerse	y 088	354		
Scope of Work (Check all	that apply)		. 9				[]			Negative Pre	ssure			
[] >3 e	for≥3 lf		f - 1	Renova	ation		[]	Mini-Enclo Glovebag F						
) sf or ≥260 lf		[x]	Demoli			[x]			Non-Friable	Proced	ure		
					T						Aba	tement	Type	
			Is Locatio	n		I	Description	n of			R	R	E	E
Location of		1	Normally u				estos-Con			Amount	E	E	N	N
Asbestos-Containing M TO BE ABA		Mair	Solely by stenance/Cu				laterial (A thermal s		(6	Specify SF or LF)	M	P A	CA	C
in facility			Staff				lation, sur	facing,			0	I	P	0
(13)			(12)				VAT, o				V	R	S	S
		YES	NO	N/A		othe	r miscella	neous)			A L		L	R
Exterior			X		Acho	stos siding			16	550 sf	X		Е	Е
Exterior			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Asoe	stos siuili	3		10	30 81	A			
-			-		+						-	-		
					1	Section 19		Approximation and						
Name of Registered Waste		1	VJDEP Wast		ID No.		ds of Wast		egistered L	andfill				
Guardian Cor City, State	ntracting, Inc.		2	0223	sal Date	3	City, Sta	T.R.R.	F.				-	
Toms River,			5.5	7/20/	12			wn, Pennśyl	vania	and the				
Completed by (Print or Typ Nicholas Ferr	ne)	Title Proje	ect Manage	er	Signat	ure \	hol	40		1	Date 9/4/	2012		

CK 1292

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

RECEIVED

Date of Notification (1) 9/4/12				Name of City of	of Building f Newar	Owner/O	perator of Eco	(2) nomic Ho	ousing Be	VeSER.	n7 /	М	<i>L</i> :	1, 7	
Agencies Notified	Type Notification		ens.	Street A											
EPA DEP DOL	Initial Amended Amendmen	The same of the sa			ate, Zip C rk, NJ 0		20			& LIC	ENS	MI	G	6	ħ
DOH DCA	Emergency justification) Cancellation		'		of Contact ew Bren		0.00		- <u> </u>	elephone N	lumber			13	
				FAC	ILITY INF	ORMATIC	M		· · · · · · · · · · · · · · · · · · ·				-		
Name of Facility Where Former Orbis Site Street Address		ng Place (3)						acility (4) ool (K-12) chapter 8 (O	ther than K	-12)			23	
55 Virginia Ave.								etc.)			rcial bu				es,
City (5) Newark, NJ	NOT SOLE A							Square Fo	5			70	g. A	ge	
County (6) Essex	r f				Code (7) USE ONLY	0	_	Vacant	se (Prior if b Manufactı	uring Fac					
Name of Monitoring Firm Weston Solutions	n Hired by Building	Owner (8))	ASCN	M No.				ent Contractorises Inc.	or (9)					
Street Address 205 Campus Dr.								Address Beers Str	eet						
City, State, Zip Code Edison, NJ					70			tate, Zip Coort, N.J.					-		
Project Manager for Mo Michelle Afflido	nitoring Firm			Telepho 732-41	ne No. 17-5800			none No. 739 1200		License 01095				£	
Start Date (10) 9/17/12		Schedul 10/31/		npletion	Date (11)			of OSHA M							
Occupancy Status Durin	g Abatement (Ched	k Only O	ne)	<u> </u>			Street	Address					-		
Facility Closed/Vac	ated During Entire	Period of	Abaten	nent				Beers St.							
Abatement Perform Other – Describe:	led Outside of Norr	nai raciity	/ Hours			_		tate, Zip Co ort, NJ 0							
Scope of Work (Check A	VII That Apply)														
≥3 sf or ≥3 if ≥160 sf or ≥260 if			Renova Demolit				X	Gloveba	ntainment wi closure ag Procedure empted (*) a	9			dure	4	
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Location			Normal d Sole				ription				-	Т	Ту		
Asbestos-Containing <u>TO BE AB</u> In Facil (13)	ATED	Ma	intenar todial S (12) No	nce/			ystems ng, VA			Amount (Specify SF or LF)	Removal		Repair	Encapsulate	Enclosure
Roo	f	1		х		Roof fel	t & fla	shina	1,	1,480 sf	x	+	-		
Pipe inside				X		pe Therr				25 lf	x	+			
Incinera				x		Fire Br				140 sf	X	+			
	7 = 2	1										†	1		
Name of Registered Was	ste Hauler			JDEP W		Cubic Y		Na	me of Regis	ered Land	fill				
R&B Debris		y.		N 2607		of Waste 200			nerva Ent	erprises					
City, State 5900 Sylon Blvd					in the state of th	Disposa 10/5/12	2		y, State aynesburg	, Ohio	de la		20.1		
Completed by John Mucha		Title Proje	ct Ma	nager	1.14 2.4	Sig	nature	[-/	Nach	1	Date G -	. G	1 -	12	



RECEIVED

Date of Notification (1) 8/23/12			Name of Buildi	ng Owner/Operato Char	nbers Proper	EPLET AM	L: :	, 3		(4)
Agencies Notified	Type Notificatio	n		Street Address	3	assau Street	Suite 129	150			
DEP DOL	Amended Amendment Emergency		34	City, State, Zip	Code	rinceton, NJ (& LICENSIA	G	al al)	
DOH DCA	justification) Cancellation			Name of Conta J	ct eremiah Obert		Telephone Nun	nber	- 43		
				FACILITY IN	FORMATION						on-so
Name of Facility When		ng Place ffices	(3)			Type of Facility School (K-1	2)				
Street Address	20 Na	ssau St	treet			Subchapter Other (i.e., p	8 (Other than K-1 private & commerce.)	2) ial bui	lding	s,	
City (5)	Pri	ncetor	1			Square Feet 30,000	# of Floors	E	ldg.	Age 80	7
County (6)	Mercer			County Code USE ONLY)	(7) (STATE		rior if being demol	shed)			
Name of Monitoring Fi (8)		Owner	7	ASCM No.		nent Contractor (9 vens Environ		es. I	nc.		
Street Address	PO Box 34	4 1	-1-		Street Address		3ox 322				
City, State, Zip Code	Crosswicks, NJ				City, State, Zip (Code	n, NJ 08501		in leading		
Project Manager for M				phone No.	Telephone No.		License No.			-	
	Veisgarber Jr.		(609	9) 298-4070	(609) 2:	59-9688		0049	3		
Start Date (10) 9/4/12	Sch		ompleti /11/1	ion Date (11)	Name of OSHA		ECS				
Occupancy Status Du	ring Abatement (Ch				Street Address						
☐ Facility Closed/Vac							30x 341				
☐ Abatement Perform Control ☐ Other - Describe:		al Facility	/ Hours		City, State, Zip C		ks, NJ 08515	i			
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	call that apply)		novatio molition		☐ Mini-En ☐ Gloveba	ag Procedure	gative Pressure	ıre			
		No	ocation					1	\bate Ty	ment pe	
Location Asbestos-Containing TO BE AB IN Faci (13)	g Material (ACM) ATED lity	Main Cu S	Solely tenanc stodial taff? (12)	e/ Asbes	Description of stos Containing Mar , thermal systems i surfacing, VAT, other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						ate	
Suite 22	1/222			x	pipe insulat	ion	70 LF	×			
Name of Registered W		a Inc	Ha	DEP Waste	Cubic Yards of Waste	Name of Regi		1	~11		
Stevens Enviror	imental Service	es, me.		18292	1 CU Disposal Date	/City, State	R.R.F., Inc. I	andi	111		_
				*	9/11/12	City, State	Tullytown,	PA			
Completed By Mahlon E. S	tevens		oject	Manager	Signature	Land and the same	Date -	9/4	/12		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Chambers Properties LLC

Chambers Properties LLC

7 AM 4: 43 Date of Notification (1) Name of Building Owner/Operator (2) 8/23/12 Agencies Notified Type Notification Street Address EPA DEP Initial Amended City, State, Zip Code Princeton, NJ 08542& LICENS CONTROL DOL. Amendment # Emergency (including iustification) DOH Name of Contact Telephone Number Cancellation ☐ DCA Jeremiah Obert FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Offices School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, 20 Nassau Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Princeton 30.000 3 80 County Code (7) (STATE USE ONLY) County (6) Current Use (Prior if being demolished) Mercer offices Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) **MECS** Stevens Environmental Services, Inc. Street Address Street Address PO Box 341 PO Box 322 City, State, Zip Code City, State, Zip Code Crosswicks, NJ 08515 Allentown, NJ 08501 Project Manager for Monitoring Firm Telephone No Telephone No. License No William Weisgarber Jr. (609) 298-4070 (609) 259-9688 00493 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 9/4/12 9/5/12 **MECS** Occupancy Status During Abatement (Check only one) Street Address PO Box 341 ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: 8 AM - 4 PM Crosswicks, NJ 08515 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Mini-Enclosure Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Normally Type Used Solely by Location of Description of Asbestos-Containing Material (ACM) Maintenance/ Asbestos Containing Material (ACM) Amount Removal Encapsulate Custodial TO BE ABATED (i.e., thermal systems insulation, (Specify Staff? surfacing, VAT, or IN Facility SF or LF) (12)(13)other miscellaneous) Yes No N/A Suite 221/222 X pipe insulation 70 LF × Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. 18292 of Waste Stevens Environmental Services, Inc. CH T.R.R.F., Inc. Landfill City, State City, State Disposal Date

ASB-41

Completed By

Mahlon E. Stevens

Allentown, NJ

Title

MAR 00

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

Project Manager

9/5/12

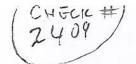
Signature

Tullytown, PA

Date

8/23/12

Date of Notification (1) September 5, 201					of Building		Operator	(2) Check	# 4960	VE		1		
Agencies Notified	Type Notification	1		Street A	Address			2012 SE		AM	4:42	1	-	
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	Caricellatio				ILITY INF		ION				W. S.			
Name of Facility Where Residence	e Abatement is Taki	ng Place (3))	.,,,,,		O. dilizati	ion	Type of Facility (4	C. T. C.					
Street Address 201 St. James Pla	ice				(17) = 12 (11 0)			Subchapter Other (i.e. pretc.)	8 (Other t			ldings	, hon	nes,
City (5) Merchantville								Square Feet 2800	# of FI	oors		3ldg.	Age	
County (6) Camden					Code (7) USE ONL	0		Current Use (Prio Residence	r if being	demo	lished)			
Name of Monitoring Fin MECS	m Hired by Building	Owner (8)		ASCN	/ No.	-		of Abatement Cont de Environment						
Street Address PO Box 341								Address Lippincott Ave						
City, State, Zip Code Chesterfield, NJ 0	8515							tate, Zip Code e Shade, NJ 0	8052					
Project Manager for Mo Bill Weisgarber	onitoring Firm			Telephoi 609-29	ne No. 98-4070			one No. 755-0099		cense	No.	7		
Start Date (10) September 22, 20	12	Scheduled Septem					Name EMS	of OSHA Monitor L						
Occupancy Status Durin	ng Abatement (Che	ck Only One	e)				Street	Address				-		
X Facility Closed/Va	cated During Entire	Period of Al	bater	nent				laddon Ave						
Other – Describe:	med Outside of Norr	mal Facility I	Hour	S				tate, Zip Code mont, New Jer	sey 08	3108				
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	presents .	enova					Full Containmer Mini-Enclosure				ге		u_
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Basem	nent			XXX		Pipe	Insulat	ion	15-20	LF	xxx			
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City, State Mount Holly, New Je	ersey 08060					Dispos 9-23-2	al Date 2012	City, State Tullytown	ı, PA.					
Completed by William Lynch					Si	ignature	1. Ly	nce	D	ate Septem	ber :	5, 20	12	



Date of Notification (1)	14/12		Nan	ne of Build	ing Owner/Operator	(2) . DNSTRUCT	-2047 SEP -7	ÀM	1.:	62	
Agencies Notified	Type Notification	n	Stre	et Addres	S			7,11		- free	-
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Прон	Emergency justification		Nan	ne of Conta	act		Telephone Number	er			112
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DES	ISLE C	1+4			IT ICTATE	Current Use (Pr	ior if being demolish	led)			
County (6) CAPE	MAY			E ONLY)	(7) (STATE	V A	CANT				
Name of Monitoring Firm	n Hjred by Building	Owner	ASCA	i No.		ent Contractor (9					
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Street Address				-	Street Address	S,SPRUC	€ due.				
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City, State, Zip Code					MAA	5 5 NA-	DEINIJI	080	57	1	
1						<u> </u>	License No.				
Project Manager for Mo	nitoring Firm		elephone	e No.	Telephone No.	9-0472		14			
Start Date (10)	Sche	duled Com		ate (11)	Name of OSHA	Monitor EPH KL	Eur				
9/17/12	- 2	1/24	1							-	
Occupancy Status Duri					Street Address	S, Spn	-va= duc.				
Abatement Performe	d Outside of Norm	al Facility H	ours		City, State, Zip C	ode			NO. 100 C		
Other - Describe:	d Odiside et i i e				M	APLE SI	IDDE N.	١, ١	08	05	<u> </u>
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Name of Registered Wa	ste Hauler		NIDEP	Waste	Cubic Yards		istered Landfill				Sec
KLGMCO	INC:		Hauler 179	10 No.	of Waste		, C, M.U. A		1		
City, State	E SHAD	E, A	1,5		Disposal Date	City, State LUCC	ABINE ,	1,7			
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Date of Notification (1) 8-30-12					Owner/Op y Manag			2	112 c	CD -	111				
Agencies Notified Type Notification			Street A	ddress ton ave	·.					EP-7					
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		_	Name of	f Contact		- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10			Tel	lephone	Numb	er.		PD	-
DCA Cancellation				rgueta.	ORMATIO	M						-		-	10.0070
Name of Facility Where Abatement is Takin Colonnade Apts Building C.	g Place (3	3)	1701		Oran Arrio		Туре	of Facility (
Street Address 25 Clifton Ave.								Subchapter Other (i.e. p	8 (Oth			build	lings,	home	es,
City (5) Newark NJ								etc.) ire Feet .000+	20	f Floors +			ldg. A	ge	
County (6) Essex			County (Code (7) USE ONLY	o		Curre	ent Use (Pri	or if be	ing demo	olishe	d)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.				atement Cor vironmen			LLC				
Street Address					- 1	Street		ss nia ave.							
City, State, Zip Code						City, S	tate, Z	ip Code NJ 073	04			-32.77			
Project Manager for Monitoring Firm		Telephoi	ne No.		Teleph	one N	lo.		Licens	1200					
Start Date (10) 8-31-2012	ed Cor	npletion I	Date (11)		Name	of OS	HA Monitor Invironme	ntal S	Solution	nsII	С				
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Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:						The state of the s	tate, Z	ip Code 07083			-				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	**********	Renova				×	Fu Mi Gl	II Containmeni-Enclosure	e cedure					e	
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Name of Registered Waste Hauler Tri-State Transfer Associated	H	JDEP W lauler ID A-456		Cubic Yaste 40			Name of Minerva			200					
City, State Bronx NY					Disposa 9-20-20			City, State Waynes		Ohio	I de		111.55		
Completed by Tiffany Nunez	Title Office	e Mar	nager		Sig	nature					Date 8-30				

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	DCA					Ann Ko	zar					**		
						FACI	LITY INFO	ORM/	ATION					
Name of	Facility Wh	ere Al		nt is Taking P sidence	lace (3))		Тур	e of Facility (4 School (K-12))				
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	d By (Print nick Trin		oe)	Title Pres.		- 500 c			Signature Dominick	Tringal	i			Date 8/30/12

Late of Notification (1)

Type Natification

Itillial

Name of Facility Where Abatement is Taking Place (3)

Name of Monitoring Firm Hirad by Building Owner (8)

Occupancy Status During Abotement (Check Only One)

Amanded

Amendment #

Cancellation

Emergency (including justification)

8/27/2012

Agencies Notified

EPA

DEP

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Strool Addrons 86 State st City (5) Hackensack County (6).

Bergen

Street Addraga

Slart Date (10)

08/27/2012

City, State 71p Code

competent supervisor

Project Manager for Montloring Firm

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	PICATION	to of New Jers OF ASBESTOS a 08:5 DALM of	by S ADATEME	NT	RECEI	VV.			
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Only One) erlad of Abi	stement	-	Street / 205 R	darcas oute 46 West		T			
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basement			X	1	tsl		3 If	×		x	
basement			×		floor tile		200sf	×	П	x	
Name of Registered Waste Hauter Newark carting		Н	JDEP W Joular ID 509		Cubic Yarda of Wasto 40	Name of IESI	Registered Landfi	ı			
City, State newark nj	1-64				Disposal Data TBA	City, Stat Bethlah			1		
Completed by Zlate Geleski	Title VP				Signatura	1000	The state of the s	ate 8/27/	2002	2	

ASB-41 (R-U6-08)

^{*} Do not uso this form for achestos ficensure exempted activities.

Geleski	Titlo	7.70	N Her		Dispossi Da	Ita	City, Stato Bethlehan					-	1
State Vark NJ		451	do sein	Vo.	Cutic Yard	la	Name of Ro	oglstered Loi	ndfill		-4	-1	+
no of Registered Weste Hauler Wark Carling	4	IN	DEPWE	ile	18					1	1	FI	
					reservation					X		7	4
	+	-	X		floor	tile .		250 SI	=			18	-
Ground Floor	Yes	No	NIA	1	Other rais	Cellaneo:	(ev	&F or _	F)	Removal	Repay	Encapsulpte	Eridosure
h Fnofily (13)	Cu	utodini (12)	Staff?	1	aurfacin	M BINDS	Eulation.	Amour (Speci	tu .	70	7	m	E.
Asbaston Containing Material (ACM) TO BE ABATED	U	Normal od Sol	olly by by	Ass	Juston Contai	ription of					Abal	ternor	nt .
10000000	T	18 Loca	illon	T	- 1		Glovobeg Pro Non-Example	madum				100	
21 CO of or 2200 H		Rono	vation sition			B	Full Contains Mid-Enology	nent with Ne	gativo	Pross	ure	1	
Scepa of Work (Chock All That Apply)		_				Totow	ate, Zip Code Ma NJ 07512				T	1	
Figure Closed/Vacated During En Abotement Parformed Outside of Motor - Describe 4Pm	ormal Fac	of Aba	toment one			205 m	oute 48 was	t				1	_
						Stroct /	Address	ווטטטט		-			
Occupancy Status During Abatement (C	Had and	.6	-	(T)		Acad	emy Constr	Uction					
Milhana Qu		MI											
							776111	rrl					
	C.F.					+ ril 1 F	a Dally				Managaria		
	M				1.1	122		M	Salar Sa	No.	300		
8/27/17	301	eduled	Complet	ion Date	1(11)	MARIA.	AL MALLA LA	There are a second	טָנוועטָ				
SIEU DG(\$ (10)	CT	sdule I		-		973	277 4544	100	1155				
Project Manager for Manitoring Firm	-1 1 1 1 1 1 1	Styruments.	Tok	phone i	Yo	Toleph	none No.	Little of the second of the se	License	Na.	+	_	
						City, S	tuto, Zip Gode wa NJ 0751			_	+	_	
City. Stato. Zip Codo			. (Street	Route 46 W		<u> </u>	8 8	+		<u> </u>
Competent Supervisor Street Address		rer (8)		ASCM N	la.	Namo	of Abstement demy Const	Contractor	(e)	-			-
Name of Monitoring Firm Hired by Bu	ildin- C		121		EONLY		Office Office	(Prior if beld	ng dem	ollsho	d)		+
County (8)							N/A	1 10	Floors		ð	ldg. A	1
31 Warren St Cty (5)							III Subch	apler B (Oth	חבול זפו חדונים ב	K-12 tercta) I bulle	linga.	home
Street Addross							Type of Fa	(K-12)				- 11	-1.
Name of Facility Where Abotement	a Taking F	Tace (3			ITY INFORM	ATION 6	10 -					1	4
ווייטון חרב וויים ועסעו	rgancy (in ication)	Oluding	N		Contact	C 750	110	AIVETO	केव्यवक	NUM	ribeh.	1	-11
DEP DOL Ame	ndod ndmout #		1	ity. Sto	e zip codo	7 A	M 3: 50		G 2	7 2	212	-	4
El FPA	U. 2 L F 15			Stoot A	francist.	The I	14 Jan 15	-	Dest. A	11.0			\dashv
Agencies Notified Type Not	U. 2 L F 15		· \	Stoot A		<u>* C1</u>	444	-	Desi of			$\stackrel{\cdot }{\rightarrow}$	7)

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notificatio	n (1)				ng Owner/Operator	(2)	REI	CEN	1 100 85		
9/4/12			Willi	am G	riggs	- North Bushell of Color		- 18-1 2			
Agencies Notified	Type Notific	cation	Street Add				2012 SEP	7 64	1.0		-
[]EPA	[X]Initial		101 C	oope	er Ave.		TOTAL OF	A	1 3:	39	
[]DEP		cation	City, Sta				ASBES!	fis ter	2 (T* #4.	ethe p	
[X]DOL	[]Amended Notifi	2412.002 334	Monte	lair	, NJ 07043		& 11	CENSI	MIKI	ĴĹ	
[X]DOH			Name of Co	ontact	:	Telepho	ne Number	Q = 18.14.	40		5
[]DCA	[]EMERGEN		Willia	am G	riggs					91	
	[]Cancell	ation	<u> </u>								20 CH -
Name of Facility Wh	ere Abatement	ie Taki			INFORMATION .	Type of Faci	1:+ (4)				
Private	ere Abacement	. IS IGK	ing Flace (3)		Type of Facil	200 D. W.				
						[]School []Subchar	(K-12) pter 8 (Oth	ner than	K-12)	
Street Address						[X]Other	(i.e., priv	rate & c	ommer	_	
101 Cooper Ave	•						buildings,				
City (5)		County	(6)	lo	ounty Code (7)	Square Feet 5109	# of Flo	ors B	ldg. <i>1</i> 89	age	
Montclair		Esse		0.188	STATE USE ONLY)	Current Use	(Prior if h	eina de	100000	hed)	
		1,								,	
Name of Monitoring	Firm hired by	Buildir	ng ASCM No		Name of Abate	ment Contracto	or (9)				
Owner (8) N/A					AZTECH M	ianagement	!, Inc.				
Street Address					Street Addres	s					
					86 Chris	topher St	:.				
City, State, Zip Coo	de .				City, State,	Zip Code		-			
					Montclai	r, NJ 070.	142				
Project Manager for	Monitoring F	irm Te	elephone Nu	mber	Telephone Num	ber		License	Numb	er	-
		N.	/A		(973) 744	-8800		0037	71		
Scheduled Start Date			letion Date	e (11)	Name of OSHA	Monitor				- 15	
9/13/12		/14/1:			N/A						
Month Day Y Occupancy Status Du		A Charles of the Language of the Control of the Con	Day Yes	ar	Street Address	e					
[X]Facility Clo	sed/Vacated I	711		od	Detect Address						
of Abatemen []Abatement Pe		ide of No	ormal Facil	itv	City, State, 1	Zin Code					
Hours - Desc	ribe: «OffHour	s Descr	ipt»		Daty, boats,	alp code		- 1			
[]other - Desc			y Descript»	:							
Scope of Work (Check	k all that ap	БТА)			[]Full	Containment wi	th Negativ	e Press	ure		
[X]>3 sf or			[X]Renovati		[]Mini-	Enclosure					
[] <u>≥</u> 160 sf	or <u>></u> 260 II		[]Demoliti	on		bag Procedure riable Procedu	ire				
			Is Location					Aba	temer		
Location Asbestos-Con			Normally Used		Descriptio Asbestos-Cont		Amount	R	R	E N	E
Material	(ACM)		Solely		Material (ACM)	(Specif	E	E	CA	C
TO BE AB	-	1	By Main- tenance/		i.e., thermal insulation, surfa	100000000000000000000000000000000000000	SF or LF)	O V	A	PS	OS
(13)			ustodial taff (12)		or other miscel			A	R	U	UR
<u></u>		Yes	No N/A	-							E
Garage			X	200	,		LF	X	+	100	
									-		
							L				
Name of Registered V AZTECH MANAG			JDEP Waste auler ID No		Cubic Yards of Waste 1.5	Name of Regi G.R.O.W.		dfill .			
		1	.7040								
City, State Montclair, NJ	07042				9/15/12	City, State Morrisvi	מם פון	1004	7		
MONICCIAIL, NO	07042				3/13/12)	TIE, PA	1906	, ,		
Completed De (Deint	an mana) m:	tle			01	1	/	B-4-			-
Completed By (Print	or Type) Ti	rre		Signatúre	1	1/	Date				
Constantine V		reside	ent			mstantin	while	9/4			

Chrck # 8318

Date of Notification (1) 9-5-	17	IN	lame of l	Building Owner/O	. 4	11	and the Fredhill		Mr. + 2 . 1 . 1 . 1	16	100
Agencies Notified Type Notification	12	S	Street Ad	Hara dress	A 11 40 - 20-1	on this time to make	pe 201	OLF	ר -	+77-X	
□ EPA DK Initial	100		7.65	238	All	rent:	Stree	+	7.	AM	3:
□ DEP □ Amended Amendment #_	1.02	C	City, State	e, Zip Code	DI	010	117	ESIT	S.		
☐ Emergency (inc	cluding	-	Name of	Noveth Contact	lain	stield,	Telephone N	umber	Ole	IME	FAC
DOH justification Cancellation			140	irold t	lappe					2.130.1	1
Name of Facility Where Abatement is Taking I	Place (3)		FACIL	ITY INFORMATIO		e of Facility (4)				
Single family			· 110	C		School (K-1					
Street Address)		Subchapter	8 (Other than K- rivate & commer		dinge	home	
228 Albert	St	re	et			etc.)					s,
City (5)	.1		N.	_	Squ	uare Feet	# of Floors		ldg. A		
North Plain Riel	1		County C	ode (7)	Cur	rent Use (Pric	or if being demol		(D)	<u>.</u>	
Jomenset		(SE ONLY)							
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM	No A	Name of Al	batement Con					
Street Address				10	Street Addi	ress	hael	1	6		
P.O. Box 337					.6.0	· Ba	331	6			
City, State, Zip Code		0	2	3	City State,		-4 1	T	79	57	12
Project Manager for workfuring Firm	-		Telephon	e No.	Telephone	No. 3Y	License	No.	-0	94	10
Steve Schenker		10	5097	38-3ks	6097	58-33	65	00	3	94	1
Start Date (10)	Schedule		pletion D		Name of O	SHA Monitor	h N	.000			
Sept 17, 2012 Occupancy Status During Abatement (Check	Sep Only On		11,	2015	Street Add		pueles	169			
Facility Closed/Vacated During Entire Pe			ent		P.0	· Bax	337				
☐ Abatement Performed Outside of Norma	l Facility	Hours			City, State,	AND		PA	AC	291	20
Other - Describe:					Jaser	ESY	98 IV.	r 0	00	5	3_
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	□ R	enovat	tion			Full Containme	ent with Negative	e Pressu	ire		
□ ≥160 sf or ≥260 lf	1000	emoliti				Mini-Enclosure	9		=		
							d (*) and Non-Fri	able Pro	cedur	e	
	0.000	Locati	200							ement /pe	
Location of		lormall d Sole			Description of Intaining Material (ACM) Amount						
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>		ntenar odial S		(i.e. thermal	systems ins	ulation,	(Specify SF or LF)	Ren	Re	Encapsulate	Enclosure
In Facility (13)	11 1	(12)			cing, VAT, o niscellaneou		SF OF LF)	Remova	Repair	osula	osuri
	Yes	No	N/A							te	to
Basement Funnace room Only	X			Pipe I	nsula.	tion	50 L	FX			3 -
Descrient Amarca Real One											
							+			(A 110)	
			1								
Name of Registered Waste Hauler		10000	IJDEP W lauler ID		Yards	Name of	Registered Land				
EPC Tech.			700	00		Wa:	ste mo	100	Jea	aca	17
City, State				Dispo	sal Date	City, Stat		7	04	1	
NE NI	Title			Set	7 + 18 20 Signature	12 700	aisvill	Date		•	- 1-3
Completed by		sid	e t		500	Schol	1		5 -	12	

(HECK#)

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

RECEIVED

Date of Notification (1)	15/12	E- (62)	1.	lame of		Owner/Operator (1.0. N. 70/	ACTO.	Mar	7					
Agencies Nouned	Type Notification		S	Veel A	ddre ss			2012 SET		 	4		7			
D BPA :	⊠ Jinial .				155	- A+, 5	U			•	-		_			
<u></u> ○ ∞ .	- Amended		7		e. Zip Co			3500	873 N	INC			1			
□ ∞r	Amendment #_	Judino		(inc	-GN 1=15L	THE RESIDENCE OF THE									
C oon	justification)		7		Contact				M M. C. Chala	anper			0			
<u> </u>	Cancellation			B	NUCE	BREUN	10						4.			
			=لنـ	EACI	TY INF	ORMATION							1			
*	. 7 .7	BI 7	41	PACE		1	Type	of Facility (4)								
riame of Facility Where	Abatement is Taking	Place (3)				100.00	chool (K-12)	2							
155	IDENCE						MS	ubchanter 8 (Other (pan)	K-12)			1			
Street Address	,		1.	=			Do	omes, etc.)	ate & comm							
1105	DELIBER	20	AU					70 Feel	A OL A JOOLE		IIGQ A					
- 151							10	00	- 1		40					
N:on 1	-H WIL	200	001	Cauphy	Code 17) (STATE	Cun	ent Use (Prior	H being der	noisned)					
County (b)				USE	YLY)	,		VAC	DUT				_			
AME	MAX		_	SCM No		Hame of Abatem	rent C	ounador (a)					į.			
risme of Maritoning Fin	m Hired by Building O	WU 61	^	JUM NO		KLEM	00	INC	//							
(8)	1/1		-1-			Sueel Address			= 1.10				1			
Street Adoress						369 5	Ż	SPRUC	2700							
	4					Cry. State. Zip C	c∞de	_	. 41.	5 08	25	_	, !			
City State Zip Code						MAP	10	SHAD	E N	,00	=		=			
			Yalan	hone No	2	Telephone No.	_		License N	246	1		1			
Proci Manager lor M	ontoning Firm		1 9102	DIN		856-7	79 -	-0472	_00							
		1 Ued Co		on Date	(11)	10001	Mondo	¥								
Sian Date (10)		000 CO	mycreti	2	1	JOSE	14/	Arch	M1				=			
: 9/28/1	2 10	15	1			Sueel Address										
Occupancy Status Du	nng Abatement (Chec	X OUIL	X10]			3695	1/2	PILUCE	7100			<u>-</u>	=			
	ared Dunne Entre Pe	DOO OI	Colon	i Gill		Mineral Control of the Control of th		· .		T .	c		1			
Abatement Perform	sed Outside of Norma	racally	110011			MAP	تن ب	SHADE	- N	2,00	202					
Ower - Describe:			==					ment with Neg	4							
Scape of Work (Chec	k all that apply)					C Marie	nclose	9 14	,2010		- 3					
23 51 01 23 11		Re	novation molition	on .		Glove	bag P	rocedure	n-Friable Pr	910080018	Con Con					
2160 st or 2260 H		M De	World	'		Mone	xemp	160 () sito ()			20	1 pe				
		Isl	ocalio	n		*										
		Used	Soleh	y by		Description	ol	LIACH)	Amour	nı	- 1	1	F . c			
Locatio	on of	Mair	Jenen M	Q8/	Asbe	sios Containing M	s insu	lation.	(Specil		Herroval	Harry	English May			
Aspesios Containin	BATED		us lodia Statt?	,	. 11.0	Tudagno YA	11.01	The state of the state of	3, 4,		8	E	1			
INFA	ZITY		(12)			other miscellar	18000				-	- 1	;			
(13	1	V.	No	NIA						-	3.4	-				
		Yes	110	-		nsw517			1600	4	X					
5/0/	11/6		15.	X		10000			939		1					
5/0/									-							
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		-		+							1	-	1.00			
The state of the s		·L		NOEP	Waste .	Cubic Yards	1	Name of Re	, C,	4 ()	1	100	and a se			
name of Registered	Wasie Haulor		10	Hauler I	O No.	Ol Waste	144	C,M	,01							
KLEM	co INC.		_	179	04	Disposal Date	e	City, State		_ 1	1.7					
C.N. State		,	20	57				Woo	DBIN	5 , A						
MAPLES	NADE, NI	5,0	00			Signatur	6			Date	1-	1	,			
		oe _	Est 15	ER		7	oar	MISE		7	12	1/1				
Compaind by				1-16	· I kak	Δ				-						
Congeled By	LEMM -					esios licensure e	\									

Date of Notification (1) 09/04/12 Ck#: 2237 \$200	Anna Pare III de			Building leitbrink		perator	(2)	1.1.1.1.19		The L	· En	11	51		4- 4-
					`				2012	CEO			1.2		
Agencies Notified Type Notification EPA Initial				llside A	17	orp .	EP-7 AM 3:5.								
DEP Amended Amendment		_ [City, Stat Leonia	ુવર્ ુ	Sig										
✓ Emergency justification)		Ī	Name of			-			Tele	ephone	Num	ber/;			
DCA Cancellation				leitbrink					J. AR			,	(10	
Name of Facility Where Abatement is Takin	a Place (3)	\	FACIL	LITY INFO	ORMATI	ON	Type	of Facility (4	<u> </u>						-
Residence	g Flace (5))						T 980							
Street Address 402 Hillside Avenue							S X	chool (K-12 ubchapter 8 ther (i.e. pr	(Oth	er than & comm	K-12) ercia	l build	dings,	home	es,
City (5) Leonia, New Jersey 07605	etc.) Square Feet # 6 10,000 2							Floors		Bldg. Age 55+					
County (6) Bergen	County Code (7) Current Use (Prior (STATE USE ONLY) Home							ng dem	olishe	ed)					
Name of Monitoring Firm Hired by Building Environmental Design Inc.		ASCM	l No.	12-400/00/04/04/04	of Abatement Contractor (9) Corporation										
Street Address 5434 King Avenue, Suite 101	Street Address 606 McBride Avenue														
City, State, Zip Code Pennsauken, New Jersey 08109			City, State, Zip Code Woodland Park, New Jersey 07424												
Project Manager for Monitoring Firm Tim Gromen	T	Telephone No.						License No.							
Start Date (10)	rd Cor	mpletion [00 100 100 100 100 100 100 100 100 100		OSHA Monitor								
09/13/12	09/15/1	2	TIPICTION E			J&S E	Enviro	nmental I	Labs						
Occupancy Status During Abatement (Chec	Street Address 2333 Route 22 West						at .								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr							tate, Zip								
Other – Describe: 8AM Start		Tiour				17.0	on, New Jersey 07083								
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Completo	enova emoli				×	Mini	Containmer -Enclosure /ebag Proce -Exempted	edure					e	
	le	Locat	ion	7.1			1 14011	Lacinpled	() (1)	4 14011 1	naon		100574	ement	
Location of	lorma	lly		Des	scription	ription of						Ту	ре		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Asbestos-Containing Material (ACM) TO BE ABATED In Facility Used Main Custo					tos Containing Material (ACM) thermal systems insulation, surfacing, VAT, or other miscellaneous)						Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			10								(D	
Basement		X		Ai	r Cell F	Pipe Ins	sulatio	on ·	7	0 LF		X			
			20.00										5.7		
		7. 1.0		1.04	With Street					115-3	1				. 4
Name of Registered Waste Hauler Lilich Corporation	1	IJDEP Warder ID 1 18724		Cubic of Was 2		ds Name of Registered Landfill G.R.O.W.S Landfill									
City, State Woodland Park, New Jersey 07424				12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		sal Date		City, State Morrisvil		ennsy	lvan	ia			Z.
Completed by Tatiana Kalenikova	Title	Control of the Contro					ture Date 09/04/12								

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

RECEIVERAL 1331

Date of Notification (1) 09/04/2012		Name of Building Owner/Operator (2) 2012 SEP -7 AM 3: 56.														
Agencies Notified Type Notification			Street Address 100 Newkirk Street City, State, Zip Code													
X EPA Initial X DEP X Amended Amendment #		City, State, Zip Code Jersey City, NJ									GD.					
Emergency (ii DOH DCA Emergency (ii justification) Cancellation	ncluding		Name of Angelo					Tel	ephone N	***********						
	ITY INFO	ORMATION							27,151							
Name of Facility Where Abatement is Taking Private Property Street Address	Place (3))					ype of Facility School (K- Subchapte	12) r 8 (Oth	er than K-	-12)						
100 Newkirk Street				etc.)							es,					
City (5) Jersey City, NJ						6	quare Feet 360				Bldg. Age +50					
County (6) Hudson)		Current Use (Pr	ior if be	ing demol	ished)						
Name of Monitoring Firm Hired by Building ON/A	wner (8)		ASCM N/A	No.	23		Abatement Co hase Group		r (9)							
Street Address N/A				Street Ad 567 52	dress and Street S	uite #1	16									
City, State, Zip Code N/A		City, State, Zip Code West New York, NJ 07093														
Project Manager for Monitoring Firm N/A		Telephon	ne No.		Telephor 201-75	ne No. License No. 58-7158 001144										
	mpletion E	Date (11)			e of OSHA Monitor S Environmental Laboratories											
Occupancy Status During Abatement (Check			5	Street Address								-				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm		urs City, State, Zip Code														
Other – Describe:						Union,	NJ 07083									
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if		lenov emol				×	Full Containn Mini-Enclosu Glovebag Pro	re ocedure								
						Ц	Non-Exempte	ed (*) ar	nd Non-Fr	iable P			-			
		Loca Norma							Abatement Type							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sol inten	ely by ance/ Staff?		tos Contain thermal sy	ystems i ng, VAT,	terial (ACM) nsulation, or	(Amount (Specify SF or LF)			Repair	Encapsulate	Endosure		
Basement, floors 1through 8 (bathre		×			Ell	bows		1	20 LF	X	,					
floors 1 through 8 (mechanical room		×				bows				Х						
Basement		x		-	Floor tile	and m	astic	2,	000 SF	Х				177		
Basement (boiler room)		×		in- in in	Elk	bows					1					
						ards	Name o	5.00	ered Land	ifill				1		
Asbestos Transportation Company Hauler ID 24310					of Waste		Minery	a Ent	erprices							
City, State Shirley NJ			Name a	ama G	Disposal	I Date	City, Sta Wayne		, OH 44	688						
Completed by Edwin Precilla	Title Proje	ct M	anager	Mari	Sig	nature	n He	U.		Date 9/3/20	01	2				