Nock

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Job #: 1208-1669 Check #: NA

gencies Notified    Pap	te of	f Notification 2	(1)			1	St.	Pet	er'	s Ur	nited N	er / Operator (i lethodist Ch	urc	h	AND	13	AM	3:	20	-
DCA	enci	es Notified EPA		Initial			501 City	Ea, St	ate	Eigh & Zi	nth Str p Code		ald.		2	TOS	SING	Ro	L.	
### FACILITY INFORMATION ame of Facility Where Abatement is Taking Place (3) ### Floor   Asheestos Containing Material (ACM)   Place   Address   County (6)   County Code (7)   County (6)   County Code (7)   County (6)   County Code (7)   County (7)   County (8)   County Code (7)	$\boxtimes$	DOH		Emer	gency	LD	Nar	ne o	of C	onta	ct		de	nt)	1	Telep	hone N	Num	oer	
Type of Facility Where Abatement is Taking Place (3)   School (K-12)   Schoo						-	F	-AC	ILI	TYI	NFOR	MATION								
Other (i.e., private & commercial buildings, homes, etc.)   Oth	t. Pe	eter's Unite	/here A ed Met	bateme	ent is Taking Pl t <b>Church</b>	ace						ype of Facility School (K-	12)	(Other that	n K-12)					
Square Feet			2	2								Other (i.e.	priv	rate & com	mercial build	lings, h	omes,	etc.	)	_
Assessor	01 E	ast Eighth	Stree	t							1	Square Feet		# of Floo	rs	Bldg.	Age			
Name of Monitoring Firm Hired   Horizon Environmental	ity (5	5)			County (6)	C	oun	ity C	Cod	e (7)				3			last a	ddit	ion	
Street Address   Stre						ON	НС	OLI	) -	- WI	LL RI	ETURN MO	NI	DAY 9/10	)	-		-		_
Street Address   Stre	lame	e of Monitorir	ng Firm	Hired					_			Aspestos an	a r	viola Serv	ices, corp					_
Street Address PO Box 316  City, State & Zip Code Thorofare, NJ 08036  Telephone Number 856-848-0800  Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start During Abatement (Check only one) Abatement Performed Outside of Normal Hours Describe: Scope of Work (Check all that apply)  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Telephone Number 609-702-0400  Scheduled Start Date (11) Scheduled Completion Date (11) Scheduled Start Date (11) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (11) Street Address  107 Haddon Ave. City, State & Zip Code Westmont, NJ 08108  Street Address			nmen	tal				_	L										-	
City, State & Zip Code   City State & Zip Code   City State & Zip Code   City State   Cit												3859 Sylon I	Blv	d						_
Titly, State & Zip Code Thorofare, NJ 08036 Project Manager for Monitoring Firm Dave or Steve Flanigan Scheduled Start Date (10) 9/4/12 Occupancy Status During Abatement (Check only one) □ Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Hours □ Describe: □ Isolated Area Scope of Work (Check all that apply) □ ≥3 sf or ≥3 if □ ≥160 sf ≥260 if □ Demolition □ Renovation □ Abbestos-Containing Material (ACM) TO BE ABATED in Fracility (13) □ Floor □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □						-	-		-	511		City, State & Z	Zip (	Code						
Project Manager for Monitoring Firm   1elephone Number   256-848-0800   856-848-0800   856-848-0800   856-848-0800   856-848-0800   856-848-0800   809-702-0400   00862	City,	State & Zip (	Code									Hainesport,	NJ	08036						_
Scheduled Start Date (10)   Scheduled Completion Date (11)   Scheduled Start Date (10)   9/10/12   Scheduled Start Date (10)   Scheduled Completion Date (11)   Scheduled Start Date (10)   Scheduled Completion Date (11)   Scheduled Start Date (11)   Scheduled Schedule	Tho	rotare, NJ	for Mor	oitoring	Firm	Te	leph	one	e Nu	umbe	er			er	Licens					
Scheduled Start Date (10) 9/4/12 Occupancy Status During Abatement (Check only one)	Proje	ect Manager	Florio	illoring	F 11111	85	6-8	48-	080	00							0802		_	
9/10/12   Street Address   Street Add	Dave	e or Steve	Data /1	0)	Scheduled Co						and and									
Coccupancy Status During Abatement (Check only one)			Date-(-I	U)										al				-		-
Facility Closed/Vacated During Entire Ferious of Normal Hours   Describe:   Isolated Area	9141	01.1	ıc Durir	ng Abat	oment (Check	only	one	)							19.0					
Abatement Performed Outside of Normal Hours   Describe:   Isolated Area	UCCL	pancy Statu	:losed/\	Vacateo	During Entire	Peri	od o	f At	oate	emen	t							-	-	-
Describe:	F	Abateme	nt Perf	ormed (	Outside of Nor	nal H	Hour	rs												
Scope of Work (Check all that apply)  Scope of Work (Check all that apply)  Scope of Work (Check all that apply)  Renovation Demolition  Scope approcedures Non-Exempted and Non-Friable Procedures Non-Exemp	-			0,,,,,,	mente presentation of the							Westmont,	NJ	08108						
Scope of Work (Check all that apply)  Scope of Work (Check all that apply)  Renovation Demolition  Renovation Demolition  Description of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)  Personal Procedures Solely by Material (ACM) TO BE ABATED In Facility (13)  Personal Procedures Non-Exempted and Non-Friable Procedures Non-Exempted and Non-Friab		_																	-	-
≥3 sf or ≥3 lf	Scol	ne of Work (	Check	all that	apply)					WALKE IN				Eull Co	ntainment w	ith Nea	ative F	res	sure	
≥3 sf or ≥3 lf   ≥160 sf ≥260 lf   Demolition   Demoli	300	pe or work (	Oncon										H							
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)  1st Location Normally Used Solely by Maintenance or Custodial Staff? (12) Yes No N/A  1st Floor 1	Г	] ≥3 sf or	≥3 If				$\boxtimes$									ıres				
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)  1st Floor  2st Floor	×			*		. [		De	emo	olition	1			Non-F	remoted and	Non-F	riable	Proc	edu	r
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)  1st Floor		K										Description	_				Abat	eme	nt T	y
Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)  1st Floor  2st Floor						١.	Is	Loc	atio	n								П		Γ
Maintenance or Custodial Staff? (12) Yes No N/A     1st Floor						ſ											70		E	
(13)  (12)  Yes No N/A  Pipe Insulation  Start Floor  Start Floor  The Amastic  Tist Floor  The Amastic  Tist Floor  The Amastic  Tist Floor  The Amastic  The Am						1	Jain	ten	anc	e or	0.0	(i.e., thermal s	syst	ems			em	Rep	Encapsulate	١
(13)  (12)  Yes No N/A  Pipe Insulation  St. Floor  St.		-			<u>D</u>	0	Cust	odia	al S	taff?	ir	sulation, surfa	cin	g, VAT			ova	air.	sula	
Yes   No   N/A												or other miscel	llan	eous)			-		e	1
1st Floor 1st Floor 2st Fl	1					)	Yes	N	0						700 SE		M	П	П	1
1st Floor 3rd Fl	4st	Floor						L					С	%				Ħ	H	1
3rd Floor  3rd Floor  3rd Floor  1										$\boxtimes$						*		H	H	1
3 <sup>rd</sup> Floor  1st Floor  (2) Hallways  2nd Floor  Name of Registered Waste Hauler  Horizon Disposal  Plaster Ceiling  Pipe Insulation  Plaster Ceiling  NJDEP Waste Cubic Yards of Waste Hauler ID No. 22612  Disposal Date  City, State			-							$\boxtimes$			C					H	H	+
1st Floor  (2) Hallways  2nd Floor  Name of Registered Waste Hauler  Horizon Disposal  Plaster Ceiling  Plaster Ceiling  Plaster Ceiling  Plaster Ceiling  Plaster Ceiling  NJDEP Waste Cubic Yards of Waste 10  City, State								I		$\boxtimes$				-1				H	H	1
(2) Hallways  2nd Floor  Name of Registered Waste Hauler  Horizon Disposal								TE								72 1/2		H	片	-
2 <sup>nd</sup> Floor Name of Registered Waste Hauler  NJDEP Waste Cubic Yards of Waste Hauler ID No. 22612  Disposal Date  Name of Registered Landfill  Of Waste City, State								TE		$\boxtimes$								H	片	i
Name of Registered Waste Hauler  Horizon Disposal  NUMBER Waste Cubic Failus of Waste of Waste 10 No. 22612  Disposal Date City, State								T		$\boxtimes$	Plast	er Ceiling		(5)		ndfill				-
Horizon Disposal Disposal Date City, State	Na	ame of Regis	stered V	Vaste F	lauler				NJ Ha	uler l	ID No.	of Waste			egisteted La	num .				
Disposal Date City, State	Н	orizon Disp	posal						-	226	14	1 0 1 7 A	-							
Tranton N.I	Ci	ty, State										9/12/12	<u> </u>	Morrisvill	e, PA		Date			_
Completed By (Print or Type)  Kim Trumbetti  Admin.  Title Signature  9/6/12			(Print o	or Type	)	37.78					1	Signature			_		1973	12		

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Job #: 1208-1669 Check #: NA

Date of Notification 8/21/12			S	t. Pe	ter's	United	wner / Operator d Methodist C	(2) Z hurch	012 SEP 13	AH	रेस्ट	P)		
Agencies Notified EPA	Type Notific	cation	5	01 E		ighth :		4.	BESTAG		" e".	5		
☐ DEP ☑ DOL	☐ Initia	al Inded #3 OFF HOLI				Zip Co <b>, NJ 0</b>			BESTOS C & LICENS	ING	POL			
□ DOH     □ DCA		ergency icellation			of Cor		(Trustee, Pres	sident)		Telep	hon	e Nu	mbe	r
							RMATION			1				
Name of Facility W St. Peter's Unite			ice (3)	-	<i>/</i> 1		Type of Facilit	(-12)						
Street Address 501 East Eighth	Street						Other (i.e		mmercial build	_		s, et	c.)	
		10 (0)	70				Square Feet	# of Flo	oors	Bldg.				
City (5)		County (6)	Cor	inty C	ode (	/)	41,161	3		1908, 1973	iast	add	Ιτιοι	1
Ocean City		Cape May					Current Use ( Church	Prior if being	demolished)					
Name of Monitoring		by Building Own	er (8)		ASC	M No.	Name of Abat		ctor (9)					
Street Address	memai						Street Addres		vices, corp.					-
PO Box 316							3859 Sylon							
City, State & Zip Co							City, State & 2							
Project Manager fo	r Monitoring		Telep <b>856-8</b>		Numb	er	Telephone Nu 609-702-040	umber	License		per 0862	,		
Dave or Steve F Scheduled Start Da		Scheduled Com					Name of OSH	A Monitor			0002			\$ 100
9/4/12		9/12/12				-	EMSL Analy							
Occupancy Status Facility Clo	During Abat sed/Vacated	ement (Check on d During Entire Po	ily one eriod o	e) of Aba	ateme	nt	Street Addres							
		Outside of Norma					City, State & 2	Zip Code						
Describe:	ea					r	Westmont,	NJ 08108						
Scope of Work (Ch	eck all that	apply)				4-2		☐ Full Co	ontainment wit	n Nega	tive	Pres	sure	
≥3 sf or ≥3	lf		$\boxtimes$	100	novatio			Mini-E	nclosure					
≥160 sf ≥2	60 If			Der	nolitio	n			Bag Procedure		abla	Den		
	ocation of		le l	ocat	ion		Description	K-ZI	xempted and 1 Amoun		Aba			
	stos-Contair	nina			Used		Asbestos-Con		(Specify		T			ypc
	terial (ACM)			olely			Material (A		SF or LF	-)	R		Enc	ш
TO	BE ABATES in Facility	2			ice or Staff?		i.e., thermal s) nsulation, surfac			7 31	Removal	Repair	Encapsulate	Enclsoure
	(13)		Ousid	(12)	otan.		or other miscell		× 1 1 100		val	air	ulat	oure
			Yes	No	N/A		1-1 1 V II						Ф	
1 <sup>st</sup> Floor							Tile & Mastic	:	700 SF					
1 <sup>st</sup> Floor							Insulation	1.1	85 LF			Ц	Ц	Щ
3 <sup>rd</sup> Floor			Ц	ᆜ			Tile & Mastic	:	408 SF	-			<u>H</u>	Н
3 <sup>rd</sup> Floor				H	X		ng Plaster		160 SF			H	H	H
1 <sup>st</sup> Floor			H	Η			er Ceiling		180 SF 7 LF			H	H	H
(2) Hallways	<u> </u>		H	H			Insulation er Ceiling		92 SF			H	H	H
Name of Registere	ed Waste Ha	auler		100	JDEP '	Waste	Cubic Yards	Name of Re	gistered Landf				Ц	
Horizon Dispos	al			Ha	226		of Waste 10	GROWS						
City, State			. "				Disposal Date	City, State	DA				901 Z	
Trenton, NJ				1-	1-		9/12/12	Morrisville	e, PA	- 15	oto			
Completed By (Pr	1765 23			Tit	<sub>lle</sub> dmir	ղ.	Signature	<u></u>		1000	ate /7/1	2		

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Job #: 1207-1657-2 Check #: 2837

Date of Notification	(1)					Owner / Operato		20	12 SEP 13	A SA	2 6			
9/10/12						he Atrium, Inc	<b>.</b>		0[1 [3	Art	J 2	5		
Agencies Notified EPA	Type Notifica	ation		et Add		0 11 0 100		A 4	STOTOR	0.00				
⊠ EPA   □ DEP	☐ Initial				el Road e & Zip C	, Suite C-120		,	& LICEN	MUN	TRO	4		
□ DOL	│				n, NJ 0				CE LILETY	DIMI	ì			
☑ DOH	Name of the last o	gency		4 10/1/2010 6/2010 6/2010	Contact	5340				Tele	nhor	na Ni	ımhe	)r
D DCA		ellation	15000 F1500			za, C&C Cons	tructio	n Man	nt	1100	DITO	16 141	,,,,,	21
							riacie	in wigh	ire.			-	-	
N. (F. 35, 140			1900	ACIL	ITY INF	ORMATION								
Name of Facility What The Atrium	nere Abateme	ent is Taking Pl	ace (3)			Type of Facili								
Street Address	<u> </u>					Subchap		thar tha	- K 40)					
40 Riverside Ave	nuo								nmercial build	linge	2000	00 0	o 1	
40 Riverside Ave	ilue					Square Feet		# of Floo		Bldg			C.)	
City (5)		County (6)	County	Code	0 (7)	MAKES AND MAKES AND AND AND AND			015	-	-			
Red Bank		Monmouth	County	Code	e (1)	140,000 Current Use		14	omolished)	1960				
Red Dalik		MOUNTOUTH				Apartment		1 TO THE R. P. LEWIS CO., LANSING, MICH.	emonsnea)					
Name of Monitoring	Firm Hirad h	y Building Own	or (8)	IAG	SCM No.				tor (0)					
Criterion Labora		y building Owi	iei (o)	A	SCIVI INO.	<ul> <li>State of Control of State of Control of Co</li></ul>			rices, Corp.					
Street Address	101100					Street Address		ia oci i	rices, corp.	-			_	
3370 Progress D	rive, Suite	J				3859 Sylon				93				
City, State & Zip Co					100	City, State &		le			-	-		
Bensalem, PA					2 10 1	Hainesport	, NJ 08	036		7				
Project Manager for		irm	Telephor			Telephone N			License	Num	ber			
Mike Panapresso			215-244		NAME OF TAXABLE PARTY.	609-702-04				0	086	2		
Scheduled Start Da		Scheduled Con	npletion D	ate (1	11)	Name of OSI		itor						
9/11/12		9/12/12				EMSL Anal								
Occupancy Status I		ment (Check or During Entire P		hoton	nont	Street Addres								
1900		utside of Norma		Daten	Herit	City, State &		10						
	Possibly 2		ai nouis				11.0			1				
Isolated Are		Sillit .				Westmont,	NJ UO	100						
Scope of Work (Che		anly)												
Coope of Tronk (on	ook an that ap	op.))						Full Cor	tainment with	Nega	ative	Pres	sure	
≥3 sf or ≥3 l	lf		⊠ Re	enova	ation			Mini-End						
≥160 sf ≥26	60 If		De	emolit	tion		$\boxtimes$	Glove B	ag Procedure	s				
									empted and N					
	ocation of		Is Loc			Description		X2-28-2	Amount		Aba	teme	nt T	уре
	tos-Containin terial (ACM)	ig	Normally Solely		d	Asbestos-Con Material (A			(Specify SF or LF					100
	BE ABATED		Maintena		or	(i.e., thermal s			SF OI LF	1	Re	70	nc	Ē
	n Facility		Custodia			insulation, surface		ΛT.			Removal	Repair	sqe	Enclsoure
	(13)		(12			or other miscell	laneous	)			<u>a</u>	₹.	Encapsulate	ure
4			Yes No	o N/									(D	
C&C Project Offi	ice				Elbo	ws/Fittings &	assoc.	pipe	40 LF					
		MILT STATE			1									
								X						
						* 12-11-11-1								
						1					Ц	Ш	Ш	
Name (D. )	1101-11-11				0.000	lo 1: 1/	162				Ш	Ш		
Name of Registered	o vvaste Haul	er	100		P Waste r ID No.	Cubic Yards of Waste	Name	of Regi	istered Landfi	1 884	7.0			
Horizon Disposa	ıl.				2612	6	GRO	ws						
City, State				-		Disposal Date	City, S	and the same of	100		213			
Trenton, NJ						9/12/12		sville,	PA					
Completed By (Prin	t or Type)		Т	Γitle	7	Signature o		3.1110,	1 1 1 1	In	ate		( ) - h	-
Kim Trumbett				Adm	in /	17, 0	11 658 15				/10	112		
					(	MAL		1				. 4		

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Job #: 1208-1673-1 Check #: 2836

Date of Notification 9/10/12	(1)						Owner / Operaton		14.		11-1	l			3 =
Agencies Notified EPA	Type Notific	cation	S	Street	t Addre	ess	cer Drive		2012 S	EP 13 A	1 3:	24			
DEP DOL DOH DCA	☐ Eme	al ended ergency cellation	0	Shic: Name	State 8 ago, I of Co	L 606 ntact	06		458E &	STOS CO LICENSI	NTR NGT	OL elephor	ne Nı	ımbe	er
	Our			10(2) 2, (2) 333			NAA		-			150-1			
Name of Facility W Willowbrook Ma Street Address	II Space #2		Place (3		CILIT	Y INF	Type of Facil School (	K-12)	Other th	nan K-12)					
1400 Willowbroo	k Mall						Other (i. Square Feet		ate & co	mmercial bu		s, home	La Cillada	(c.)	
City (5) Wayne		County (6) Passaic	Cou	unty (	Code (	(7)	1520000 Current Use Vacant Spa	(Prior	2		44				
Name of Monitoring Criterion Labora		by Building Ow	ner (8)		ASC	CM No		temer			р.				
Street Address 3370 Progress D City, State & Zip Co Bensalem, PA 19	ode	J					Street Addre 3859 Sylon City, State & Hainesport	ss <b>Blvd</b> Zip Co	ode						
Project Manager fo Mike Panapress	r Monitoring o		215-2	244-	Numb 1300 :	x26	Telephone N 609-702-04	umbei 00		Licer	ise Nu	umber 0086	2		
Scheduled Start Da 9/24/12 Occupancy Status		Scheduled Co 9/26/12			ite (11)	)	Name of OSI EMSL Anal Street Addre	ytical							
Facility Clo Abatement Describe: Isolated Are Scope of Work (Ch	sed/Vacated Performed ( ea eck all that a	During Entire I Outside of Norm	Period o	of Ab	novatio	on	107 Haddo City, State & Westmont,	n Ave	B108 Full Co	ontainment w	Enclo	-	Pres	sure	
≥160 sf ≥26	50 If			Der	molitio	n		Н		Bag Procedu kempted and		.Friahle	Pro	uhar	re
Asbes Ma TO	ocation of stos-Containi terial (ACM) BE ABATED in Facility (13)		Norm So Maint	olely tenar	Used		Descriptio Asbestos-Cor Material (A (i.e., thermal s insulation, surfa or other miscel	ntaining CM) system cing, \	g s /AT	Amou (Spec SF or	int			nt T Encapsulate	
			Yes	No	N/A					1				6	
Stock Room & R	Restroom					FIOO	r Tile & Black	Mast	IC	560 SF					
Name of Registere Horizon Disposa		ıler				O No.	Cubic Yards of Waste		e of Reg	L gistered Lan	dfill				
City, State Trenton, NJ			1		4.1.8		Disposal Date 9/26/12	City,	State risville	, PA					
Completed By (Prinkin Trumbet)				A	lle dmin	ı. <sub>O</sub>	Signature					Date 9/10	12		

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

2012-170 B & G proj. #: Check # 5472 - 1 2012 SEP 13 AM 3: 23 Date of Notification (1) Name of Building Owner/Operator (2) 0 9 / 1 0 / 1 2 A Molly Co. ASHESTOS CONTROL & LICENSING Agencies Notified Type Notification Street Address ☐ EPA Initial P.O. Box 243 DEP City, State, Zip Code Amendment DOL. South Orange, NJ 07079 Telephone Number Name of Contact DOH. Cancellation ☐ DCA Gary Toriello FACILITY INFORMATION : Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) A Molly Co. Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 15 Brook Avenue County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) residential Bergen Montvale, NJ Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. Street Address 9/20/12 9/20/2012 Occupancy Status During Abatement (Check only one) 105 Ryerson Road ☑ Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Full Containment w/negative pressure Renovation ☐ Demolition Non-friable procedure Mini-enclosure \_\_\_ ≥160 sf or ≥260 lf >3 sf or >3 If E Is location normally used solely E Location of by maintenance/custodial Amount Description of asbestos-containing m asbestos-containing C (Specify SF or staff(12) material to be material (ACM) a a abated in facility (13) p Yes No N/A 18 lf pipe insulation basement Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# Tullytown Resource & Recovery Center 19563 B & G Restoration, Inc. 1/2 yard Disposal Date City, State City, State 9/21/2012 Tullytown, PA Lincoln Park, NJ 07035 Date Signature Gordana Luna Completed by (Print or Type) Title 9/10/2012 Treasurer Gordana Luna

### State of NJ Notification of Asbestos Abatement

B & G proj. #: 2012-169

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

B & G proj. #:	2012-169	-	()	Pursuan	t to NJAC 8	3:60-7	and 12:120-7)	RE Check #	5473				
Date of Notification	(1)	Na	me of Buil	ding Owne	er/Operator (2)			012 SEP 13 A	H 3: 1	52	43.54		
0 19 1/1 10	1/112	II N	like Zaw	risa				UIZ SLI IS H	11 0. 6	. ~			
Agencies Notified	Type Notification		et Addres				7	SHESTOS CI	DTLIC	ΩI	all comme		
☐ EPA	✓ Initial			R65cV.				& LICENS		UL.			
☐ DEP	M IIIIIai	11	y, State, Z	lan Avent	16			& LIULIA	ilvu		-		
☑ DOL	☐ Amendm	ent		87	10								
	a to strong		ne of Con	n, NJ 074	-10			Telephone	Numbe	r	_	-	
☑ DOH	Cancellat		ne or con	laci			*	Telephone	idiibo	•			
☐ DCA	Canonia		Mike Zav	wisa									
*				FACI	LITY INFORM	ATION							
Name of facility wh	nere abatement is	taking place	e (3)					Type of Facility (4	) (K - 12)				
Mike Zawisa						1 (4		☐ Subcha	pter 8 (C	Other t	han K	(-12)	
Street Address							In we offer a con-	Other (F					
			y- 1.7			w.	- 116 ft.*		lomes, e				
5-08 Berdan A	venue						loca i di di	Square Feet	of Floo	rs	В	ldg. A	ge
City (5)		County	y (6)			0.000	nty Code (7)						
7						(Stat	e use only)	Current Use (Pri	or if beir	ig den	nolish	ed)	
Fair Lawn, NJ Name of Monitorin		Berge			ACCMANA	1	Name of Abatement					-	
Name of Monitorin	g rim nired by b	lag. Owner	(0)		ASCM No.			and the second section					
n/a						_	B & G Restoration	on, Inc.					
Street Address													
							105 Ryerson Ro			-		-	-
City, State, Zip Cod	e						City, State, Zip Code		100				
-							Lincoln Park, N	J 07035					
Project Manager for	r Monitoring Firm		Ph	one Numb	er		Telephone Number		License	Numi	oer		
							973-696-6869		0378				
Scheduled Start Da	ite (10)	Sched.	Completio	n Date (11	)		Name of OSHA Mor						
9/21/2012		9/21/2	012				B & G Restorati	on, mc.				-	
Occupancy Status I	During Abatemen	t (Check on	ly one)				105 Ryerson Ro	ad					
☐ Facility closed	d/vacated during erformed outside	entire period	d of abate				City, State, Zip Code						
Describe:						_	Lincoln Park, N	1.07025	10 PH 10				9,000
Other-Descri						-	Lincoln Park, N	3 0 / 0 3 3					
Scope of Work (ch						_	100						
Demolition	$\boxtimes$	Renovation				∐F	ull Containment w/ne	gative pressure	Glove				
$\ge 3$ sf or $>3$ If		≥160 sf or ≥	260 lf			M	lini-enclosure	na rous Po	Non-f	riable	proce	dure	
Location of	****	Is location							1 - 3	R	R	E	E
asbestos-cor	CONTRACTOR OF THE PARTY OF THE	by mainten staff(12)	ance/cust	odial			spestos-containing	Amount		e m	e p	n	n
material to be abated in fac					material	(ACM)		(Specify SI	or or	0	a	a	C
abated in rac	11.11	Yes	No	N/A				- 7		V e	i r	p	-
basement	S 12 - 4 10			X	pipe insula	tion		63 lf		M			
basement		HE ST.		IX	pipe insular	tion		20 lf	Part Control			X	
CONTRACTOR OF THE PARTY OF THE													
						No care							
Registered Waste F			P Hauler II	D# C	ubic Yards of	Waste	Name of Registered		1 177 7	-	514.37	Pages	100
B & G Restorati	on, Inc.	1956			yard	(42)	Committee of the Commit	urce & Recovery	Center			Little	200
City, State		******	100	Disposal D			City, State					7	ī
Lincoln Park, N			11.345	9/22/20			Tullytown, PA			-			- 3
Completed by (Prin		Title			Signature	(	Gordana Luna		Date 9/10/2	012			
r rordana i lina		Treasurer							3/10//	111/			

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

Date of Notification (1)				Name of	Building	Owner/Operat	or (2)		20.	Nag f	7 10	11	
Septer	mber 12, 2012			Jacobus	Pharm	aceutical C	О.	The Arthurson	2012 SEP	-		444.	
Agencies Notified	Type Notification			Street A	ddress				4 SEP 4 SIJESTI LICI Telephone	13 AM	1 2		
EPA EPA	Initial		(	County	Road 68	33	115		"SHEST		J:	65	
DEP	Amended			City, Sta	te, Zip Co	de			2/10	SCON	7- /-		
DOL	Amendment Emergency (		-	Plainsbo	oro Tow	nship, NJ			-101	MSING	KL	1/	
DOH	justification)	including		Name of	Contact				Telephone	Number G			
DCA	Cancellation			Tom Sa	ntoli								
		DI /0		FACI	LITY INFO	ORMATION	T	o of Facility (4	·				
Name of Facility Where		g Place (3	•)				Typ	oe of Facility (4	Diame.				
Jacobus Pharmaceu	itical Co.						-  $-$	School (K-12		( 12)			
Street Address									8 (Other than I rivate & comm		dings	home	es,
County Road 683	-							etc.)					
City (5)							Squ	uare Feet	# of Floors	B	ldg. A	\ge	
Plainsboro Township	o, NJ												
County (6)				County (	Code (7) JNE ONLY)		Cu	rrent Use (Prio		0,000 000			
Middlesex									Pharmace	utical			
Name of Monitoring Fire	n Hired by Building (	Owner (8)		ASCM	No.			batement Cont	And the second second second				
Sabre Health						The second secon		K Group, LL	.C			1	
Street Address							et Add	(1000)					
1015 Zucksville Roa	ıd		11-11				-	gs HWY N,	STE 209				
City, State, Zip Code								, Zip Code					
Easton, PA 18040								II, NJ 08034					
Project Manager for Mo	nitoring Firm			Telepho	ne No.	10000000	phone		Licens				
Brent Altemose, CIF	I, CSP			366.734			,	- 5000	00781				
Start Date (10)		Schedul	ed Co	mpletion I	Date (11)			SHA Monitor					
9/26/1				10/26/1	2	100000000000000000000000000000000000000		K Group, Ll	_C.				
Occupancy Status Durin	ng Abatement (Chec	k Only Or	ne)			1 7 3 7 7	et Add						
Facility Closed/Vac	cated During Entire I							gs HWY N,	STE 209				
Abatement Perform Other - Describe:	ned Outside of Norm	al Facility	/ Hour	S				, Zip Code					
						Che	rry Hi	II, NJ 08034					
Scope of Work (Check /	All That Apply)						57			100			
≥3 sf or ≥3 lf		Common of the	Renov				400	Full Containme	nt with Negati	ve Pressu	re		
≥160 sf or ≥260 lf			Demol	ition			- Promotion of	Mini-Enclosure Glovebag Proc	edure	3. 10			
				20-10-10	100			Non-Exempted		able Proce	dure		
		Is	Loca	tion								emen	t
Locatio	n of	100000000000000000000000000000000000000	Norma			Descript	ion of	COLUMN TO A STATE		-	Τ-	ype	1
Asbestos-Containing		- P. COSTON	intena	ely by ance/		tos Containing			Amount			m	m
TO BE AE		The second second	todial	Staff?	(i.e.	thermal systematic surfacing,			(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		1.	(12)			other misce			And the state of	NOU	pai	sula	Sur
				1						<u>a</u>	-	te	0
		Yes	No	N/A					000 (			-	-
Maintenan	ce Shop		-	13	а	sbestos tile	e & ma	astic	900sf	$- \Diamond$	-	1	-
Bathro	om		X		- 12	_"-			500sf	X			
Vestib	ule		X						50sf	X			
			/		1.7.	Sept. Sept. 1			Lite January			-	
Name of Registered Wa	ete Hauler	1		NJ DEP W	laster	Cubic Yards	S	Name of F	Registered Lan	dfill	L		1
	iste Hauler			Hauler ID		of Waste		wante of f	- A A	State of State		P10 14	
Newark Carting / Ro		· Contraction		450	09	14.5	5	Cumberla	and County	Landfill			
City, State	Property North	Carlos Carlos		11.79	GE AND	Disposal Da	ate	City, State		C. William			NEW T
Newark / Riverdale,	NJ	de la		Singer.	de like.	10/26	/12	Newburg	, PA	Service Control	¥I.	way in	Q-12
Completed by		Title	13.		y and y	Signat	tre/	7/2		Date			10 27 1
Mike Cooper		Presid	dent			Man	7//		41 - 415	9/12/12	4.00		

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

COCO.								1	4	- 111	THE PL	
Date of Notification (1) 09/11/12					Name of Build E.I. DuPont D		3	2012	SED I	2 11/		
Agencies Notified		Notification	Type		Street Addres	ss				3 AM	3: 50	
			1100		Rt 130			6.5BE		10000	0.00	3
(X)EPA		() Initial No	otification					<b>MOBE</b>	STA	i non	1.75	
(X)DOL		(X) Amen	ded Certific	ation	City, State, Z	ip Code		2	TICE	्प्राच	TROI	7
(X)DOH		( ) Cancell	ed		Deepwater, N				LICE	MOIN	G	
()DCA											T.	
					Name of Con			Tel. N	lumber			
					Richard Clark	(e		A TOTAL OF	FIRM			
				FACILITY I	NFORMATION							
Name of Facility Where Ab	atement is 1	Faking Place	(3)		Type of Facili							
Dupont Chambers Works					( ) School (K		05 878899550					
01 1011					( ) Subchapte							
Street Address Route 130					(X) Other (i.e	e. private &	commercial b	oldgs., ho	mes, et	C.		
Route 130					Sa Foot 200	10	# of Elo	000				
City (5)	County (6)		Country	2 ada (7)	Sq. Feet 300	10	# of Flo	oors <u>z</u>				
	Salem			Code (7) se Only)	Bldg. Age 52							
Deepwater	Salem		(State U	se Only)			g demolished)	) Chem	ical Ma	oufactur	er	
Name of Monitoring Firm H	ired by Bldo	Owner (8)	ASCM	lo.	T GOLL COO (	prior ir ooiii	Name of Co			Taractar	01	
Harvard Environmental, In	nc	. Owner (o)	AUGINIT	10.			NCM Demo			diation	I P	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							INCIVI Dellic	JILIOH an	u rteine	diation,	LI	
Street Address					Street Addres	ss						
760 Pulaski Highway					395 Turner In		IV					
						.00000000000000000000000000000000000000			1			
City, State, Zip Code					City State, Zip	Code	100					
New Castle, DE 19720					Aston, PA 190	014						
										and the same of th		
Project Manager for Monito	ring Firm	Telephone			Telephone Nu	ımber		Licens	se Numi	oer	7.00	
Wesley Morrison		302-326-23	33		484-480-8931			01006	5			
									1			
Scheduled Start Date (10)		Scheduled	Completion	Date (11)	Name of OSH							
09/17/12		12/21/12			EMSL Analyti	cal						
Occupancy Status During A	hatamant (	Charless			01 1 1 1 1			-97 /				
(X) Facility Closed/Vacate	d During En	tire Period of	Abataman		Street Addres	S						
( ) Abatement Performed C					107 Haddon A	)vo						
( ) restament enormed e	diolec of 14	omity	1 louis		City, State, Zi				_			
Describe					Westmont, N.					ā		
					VVCSuriorit, 140	00100						
Other - Describe												
Source of Work (Check all t	hat apply)											
Acceptance of Control of Control		and the common of the										
( ) Demolition ( X ) Rend	ovation											
(X) Large Proj. (>160 SF of	or >260 LF A	ACM) ( )M Pro	oj. (>25<16				oj. (<25 SF or	<10 LF	ACM)			
(X) Full Containment with	Negative P	ressure ()	() Mini-En		) Glovebag Proc		William State of the State of t			Z.	#	
Location of Asbestos-	Is Loca	ation Normally		Description of		Amount	(Specify SF or	·LF)	Abate	ement Ty	/pe	
Containing Material (ACM) i Facility (13)		by Maint./Cu:	stodial		ms insulation,	1 3 - 1			1			
racinty (13)	Staff?		NIA	surfacing, VA	i, or other				Rem.	Rep.	Encan	Enclose
Thru Out Facility	YES X	NO	NA I	miscell.) Mastics		6484 SF				Тер.		
Thru Out Facility	X			Thermal Insul	ation	1015 SF	Control Street, Street		X	+	+	+
Thru Out Facility	X			Pipe Insulatio	The state of the s	482 LF	14 . 2		X	10 11/1	-	-
Thru Out Facility	X			VAT/Mastic	H .	608 SF	Opening (a)		X	-	-	-
Thru Out Facility	X			Galbestos			***		+	-	-	
Thru Out Facility	x		NAME OF THE OWNER OWNER OF THE OWNER	Gaskets		1579 SF 814 SF			X			
Name of Reg. Waste Hauler		NJDEP Was	te Hauler		Cubic Yards o		Metal Committee H	Name	of Pac	Landfill	4	
DuPont Company		INJUEP Was	ste inauler	10# <u></u>	Cubic Tards 0	vvaste		Dup	on Reg.	Landfill mbers W	lorka	
City, State					1	A service rise	Disp. Date	DuPo				
Deepwater, NJ				1			12/21/12			City, Sta Deepwa		
2 3 0 p 11 d 10 1 1 1 0							12/21/12			Seepwa	ter, INJ	
Completed by (Print or Type	2)	Title			Signature		The same of the sa	Date				10000
Mark Griffin			roject Mana	ager	) see	0		09/11/	2012			
					MAR	W					1 1 34	
					1.11	T W-		1				

RECEIL.

X. Description of Planne	difficit of Kellovation	(continued)	2-	
Jesemphon or riallie	olition or Renovation	THE RESERVE OF THE PARTY OF THE PARTY.	to be Used: XI	Removal of VAT mastic an
thermal systems insulati	on. Regulated work area, neg	ative air containn	nents alovehaa	procedures hena filtration
equipment, wet material,	and double bag.		A Sar	717 J. 3c
			33	05 00
			æ [/	TOS CONTROL
XI. Description of Engine	eering Controls and Work Prac	ctices to be Used	to Control Emn	nisions of Asbestos at the
Demolition or Renovation methods, HEPA filtration	n Site: Regulated work area equipment, wet material and	7	ntainments, glov	rebag procedures, wet remov
XII. Waste Transporter#1	DuPont Company	NAMES OF THE OWNER OWNER OF THE OWNER OWNER.		
	Duront Company			
Address:	0			7: 09000
City: Deepwater	County: Salem		State: NJ	Zip: 08069
Contact:	Company #4		Telephone:	
Waste Transporter#2	Same as #1	(#. \$4.00 B) (B) (B) (B)		
Address				
City	County		State	Zip
Contact		Marine San	Telephone	
	DuPont Chambers Works		EPA Certifica	tion Number: P0104984
Address:	To be a second of the second o		V-20-2 (02/1/10)	
City: Deepwater	County: Salem		State: NJ	Zip: 08069
Contact:			Telephone:	
XIV. If the Demolition was	s Ordered by a Government A	gency, Please Id	entify the Agenc	y Below:
Name		Title		
Authority				Marie Service Annual Control of the
Authority				
		Date Ord	ered to Begin (MM/DD	IYY)
Date of Order (MM/DD/YY)	ovations:	Date Ord	ered to Begin (MM/DD	I/YY)
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: (	MM/DD/YY)	Date Ord	ered to Begin (MM/DD	/YY)
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: (	MM/DD/YY)		ered to Begin (MM/DD	/YY)
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: (	MM/DD/YY)		ered to Begin (MM/DD	vYY)
Date of Order (MM/DD/YY)	MM/DD/YY)		ered to Begin (MM/DD	·YY)
	MM/DD/YY)		ered to Begin (MM/DD	iYY)
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE	MM/DD/YY)	(HH:MM)		·YY)
Date of Order (MM/DD/YY)  XV. For Emergency Rence  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE	MM/DD/YY) CTED EVENT	(HH:MM)		·YY)
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE	MM/DD/YY) CTED EVENT used unsafe conditions, or a serious dis	(HH:MM)	perations	
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce	MM/DD/YY) CTED EVENT used unsafe conditions, or a serious dis	(HH:MM)  Truption of industrial of the continuation of the continu	perations ected Asbestos i	s Found, or that Previously
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce  Fiable Asbestos Material	MM/DD/YY) CTED EVENT used unsafe conditions, or a serious dis	(HH:MM)  Truption of industrial of the continuation of the continu	perations ected Asbestos i	s Found, or that Previously
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce	MM/DD/YY) CTED EVENT used unsafe conditions, or a serious dis	(HH:MM)  Truption of industrial of the continuation of the continu	perations ected Asbestos i	s Found, or that Previously
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce  Fiable Asbestos Material	MM/DD/YY) CTED EVENT used unsafe conditions, or a serious dis	(HH:MM)  Truption of industrial of the continuation of the continu	perations ected Asbestos i	s Found, or that Previously
Date of Order (MM/DD/YY)  XV. For Emergency Reno  DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce  Fiable Asbestos Material	MM/DD/YY) CTED EVENT used unsafe conditions, or a serious dis	(HH:MM)  Truption of industrial of the continuation of the continu	perations ected Asbestos i	s Found, or that Previously
Date of Order (MM/DD/YY)  XV. For Emergency Rence DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce Fiable Asbestos Material alert generator	MM/DD/YY) CTED EVENT used unsafe conditions, or a serious dis	(HH:MM)  Fruption of industrial of the content that Unexpected to the content that the cont	ected Asbestos i Powder Segre	is Found, or that Previously gate area, wet matrials, post si
Date of Order (MM/DD/YY)  XV. For Emergency Rence DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolition	MM/DD/YY) CTED EVENT  sed unsafe conditions, or a serious discedures to Be Followed in the E Becomes Crumbled, Pulverize  vidual, Trained in the Provision or Renovation, and that Evi	(HH:MM)  Fruption of industrial of that Unexpended or Reduced to the control of this Regulations of this Regulations of the Reduced that the Regulations of the Regul	ected Asbestos in Powder Segregation (40CFR, Page	is Found, or that Previously gate area, wet matrials, post si art 61, Subpart M) Will be On has Been Accomplished by
Date of Order (MM/DD/YY)  XV. For Emergency Rence DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVII. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolition	MM/DD/YY) CTED EVENT  used unsafe conditions, or a serious discedures to Be Followed in the E Becomes Crumbled, Pulverize	(HH:MM)  Fruption of industrial of that Unexpended or Reduced to the control of this Regulations of this Regulations of the Reduced that the Regulations of the Regul	ected Asbestos in Powder Segregation (40CFR, Page	is Found, or that Previously gate area, wet matrials, post si art 61, Subpart M) Will be On has Been Accomplished by
Date of Order (MM/DD/YY)  XV. For Emergency Rence DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVII. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolition	MM/DD/YY) CTED EVENT  sed unsafe conditions, or a serious discedures to Be Followed in the E Becomes Crumbled, Pulverize  vidual, Trained in the Provision or Renovation, and that Evi	(HH:MM)  Fruption of industrial of that Unexpended or Reduced to the control of this Regulations of this Regulations of the Reduced that the Regulations of the Regul	ected Asbestos in Powder Segregation (40CFR, Page	is Found, or that Previously gate area, wet matrials, post si art 61, Subpart M) Will be On has Been Accomplished by
Date of Order (MM/DD/YY)  XV. For Emergency Rence DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVII. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolition	MM/DD/YY) CTED EVENT  sed unsafe conditions, or a serious discedures to Be Followed in the E Becomes Crumbled, Pulverize  vidual, Trained in the Provision or Renovation, and that Evi	(HH:MM)  Fruption of industrial of that Unexpended or Reduced to the control of this Regulations of this Regulations of the Reduced that the Regulations of the Regul	perations  ected Asbestos is Powder Segregation (40CFR, Peration of the Powder Training of the Powder Seguired Training Owner Seguired Trainin	is Found, or that Previously gate area, wet matrials, post si art 61, Subpart M) Will be On has Been Accomplished by
Date of Order (MM/DD/YY)  XV. For Emergency Reno DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolitio this Person will be Availa	MM/DD/YY) CTED EVENT  used unsafe conditions, or a serious discourse to Be Followed in the E Becomes Crumbled, Pulverize  vidual, Trained in the Provision or Renovation, and that Eviluable for Inspection During Nor	event that Unexpeed or Reduced to	perations  ected Asbestos is Powder Segregation (40CFR, Peration of the Powder Training of the Powder Seguired Training Owner Seguired Trainin	is Found, or that Previously gate area, wet matrials, post single area, wet area, wet area, we matrials, post single area, we will be only a single area, we will be only a single area, we will be only area, after promulgation)
Date of Order (MM/DD/YY)  XV. For Emergency Reno DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolitio this Person will be Availa	MM/DD/YY) CTED EVENT  used unsafe conditions, or a serious discedures to Be Followed in the E Becomes Crumbled, Pulverize  vidual, Trained in the Provision or Renovation, and that Evi	event that Unexpeed or Reduced to	perations  ected Asbestos is Powder Segregation (40CFR, Peration of the Powder Training of the Powder Seguired Training Owner Seguired Trainin	is Found, or that Previously gate area, wet matrials, post single area, wet area, wet area, we matrials, post single area, we will be only a single area, we will be only a single area, we will be only area, after promulgation)
Date of Order (MM/DD/YY)  XV. For Emergency Reno DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolitio this Person will be Availa	MM/DD/YY) CTED EVENT  used unsafe conditions, or a serious discurse to Be Followed in the E Becomes Crumbled, Pulverize  vidual, Trained in the Provision or Renovation, and that Evicable for Inspection During Nor	event that Unexpeed or Reduced to	perations  ected Asbestos is Powder Segregation (40CFR, Peration of the Powder Training of the Powder Seguired Training Owner Seguired Trainin	is Found, or that Previously gate area, wet matrials, post single area, wet area, wet area, we matrials, post single area, we will be only a single area, we will be only a single area, we will be only area, after promulgation)
Date of Order (MM/DD/YY)  XV. For Emergency Rence DATE and HOUR of Emergency: ( Description of SUDDEN, UNEXPE  Explanation of how the Event cau  XVI. Description of Proce Fiable Asbestos Material alert generator  XVII. I Certify that an Indi Site During the Demolitio this Person will be Availated	MM/DD/YY) CTED EVENT  used unsafe conditions, or a serious discourse to Be Followed in the E Becomes Crumbled, Pulverize  vidual, Trained in the Provision or Renovation, and that Eviluable for Inspection During Nor	event that Unexpeed or Reduced to	perations  ected Asbestos is Powder Segregation (40CFR, Peration of the Powder Training of the Powder Seguired Training Owner Seguired Trainin	is Found, or that Previously gate area, wet matrials, post single area, wet area, wet area, we matrials, post single area, we will be only a single area, we will be only a single area, we will be only area, after promulgation)