	5	State of N	ew Je	rsey - Notifi	ication of Asbestos	Aba	teme	nt-\	r o	2 E	ППП	FF			
Ch 13946	1			house	2:0-7 and 12:120-7))					<u>U</u> <u>W</u>				
Date of Notification (1)					Name of Building Owne			ПП	SI	:P T 3	3 2018				
September 7, 2018 Agencies Notified		Natification	T		Archdiocese of Pa	tersor	n NJ					1			
Agencies Notified		Notification		fication	Street Address		F		ADDE	27000	ONTO	21.0			
X EPA		Amend			797 Valley Road				ASBE	STOS C	UNITE	儿农			
DCA					City, State, Zip Code	2	L	ten management	MENN FOR THE	F-1 4-5 (F-1 2)	TOTAL TRANSPORT	MENTON LEGIS			
x DOL		Emerge		cluding	Clifton, NJ 0701.	3		,							
X DEP			cation)		Name of Contact Dennis Rodano					Number					
x DOH		☐ Cance	illea			LI STATE OF THE ST		973	3.689.	4038					
Name of Facility Where Abate	oment is To	kina Dlaga (2)		FACILITY IN	FORMATION										
St. Clement Pope & I			holic (Church	Type of Facility (4) School (K-12)										
Street Address					Subchapter 8 (other that										
154 Mt. Pleasant Ave	nue				Other (i.e. private										
City (5)	County (6	1	County	/ Code (7)	Sq. Feet: # of Flo	oors:	2 Blag	. Age:	50 yea	ırs					
Dover	Morris	_		Use Only)	Current Use (prior if beir	na dem	nlishad	١٠							
					Ourrent ose (prior il bell	ig dem	ionsneu).							
Name of Monitoring Firm Hire	d by Bldg. (Owner (8)	ASCM	No.	Name of Contractor (9)										
EnviroVision Cons	ultants	inc.	0007												
					GREENWOOD ABATEMENT CONSULTANTS, INC.										
Street Address	. DI	0.55		Street Address											
20-21 Wagaraw Road	i, Blag #		511 MAIN STREET												
City, State, Zip Code					City State, ZipCode										
Fairlawn, NJ 07410	/				Butler, NJ 07405										
Project Manager for Monitorin		Telephone N	lumber		Telephone Number License Number										
Fred Larson		973-636													
Cahadulad Otad Data (10)					973-492-0477 00840										
Scheduled Start Date (10) September 18, 2018		Scheduled C			Name of OSHA Monitor										
September 10, 2016		Septemb	er 20,	2018	EMSL inc.										
Occupancy Status During A	batement (Check only o	ne)		Street Address										
Facility Closed/Vacate				ment											
Abatement Performed	d Outside o	f Normal Fac	ility Hour	·s -	1056 Stelton Road										
Describe					City, State, Zip Code										
Other - Describe:					Piscataway, NJ 08854										
					1.050004										
Source of Work (Check all tha	t analy)														
Source of Work (Check all tha	п арріу)					F .0	0								
≥ 3 sf or ≥ 3 lf	F			Renovation			Mini-En			gative Pro	essure				
□≥ 160 sf or ≥ 2				Demolition			wiini-⊑n ovebag								
:00 0:0: _ :				Demontion	1.0		-			n-Friable	Draner	lura			
							ap & Cu		and No	1-1 110010		uic			
Location of Asbestos-Containi		cation Normal			bestos Containing Material		Amoun	1.000000000	Abate	ment Typ	æ				
Material (ACM) in Facility (13)		ly by Maint./Cι ? (12)	istodiai	VAT, or other mis	nal systems insulation, surfac	ing,	(Specif	y SF	Remov	e Repair	Encan	Enclose			
	YES		NA	Visit, or other mis	ocii.)		or LF)		11011101			21101000			
Boiler Room			X	TSI	22 If 🗵										
NAC DESIGNATION OF PERSONS AND ADDRESS OF THE PERSON OF TH									_	İ	1				
Name of Reg. Waste Hauler		NJDEP Was		ID#	Cubic Yards of Waste:			Name	of Reg	istered La	andfill				
See Hauler Below # 1 & 2	2	See Below	1		2 Meadowfill Landfill										
**					G.R.O.W.S										
Hauler #1) Greenwood A			nts, Inc	. – Butler, NJ 07							State 2, Box 68				
NJ DEP # 12 Hauler #2) Newark Cartin	The same of the sa		14500 N	I DED # 10551	Coptomber 20,										
AMUICI #2) NEWARK CAPIII	ig, inc. – P	tewark, NJ	14309, P	19551 # 19551	9551 2018 and 304-842-2784										
Completed by (Print or Type)	T	itle			Signature Date										
Marin Graure		SENIOR PI	ROJEC	т	- Installation										
	Marin Grau	re		oeh	COMID	011,21	, 10								

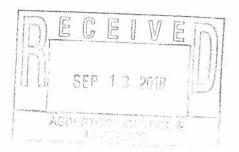
								P			P	rint
Ch 1308		NOTI	Pursuar	of 16 NJAC 8	Jersey STOS ABATI :60 and 12 1:	20)		B	E C	E		V I
Date of Notification (1) 9/6/2018			Name Mich	of Building C ael Pariett	wner/Operato	ρr (2)			SEF	1 ;	3 20	18
Agencies Notified Type Notification EPA DEP Initial Amended				Address State, Zip Cod	le				ASBEST	OS C	ONTI	ROL
X DOL Amendme Emergence justificatio Cancellati	cy (including n))	Name	of Contact ael Parietti				Telephon	e Numbe	er		
Name of Facility Where Abatement is Tal	king Place (3)	FAC	CILITY INFO	RMATION	TTV	pe of Facility	(4)			_	
Michael Parietti's Residential						П	School (K-					
Street Address City (5)						×	Subchapte	r 8 (Other than private & comr	n K-12) mercial b	uilding	s, hom	ies,
Haskell						Sq	luare Feet	# of Floors	S	Bldg.	Age	
County (6) Passaic				Code (7) USE ONLY)	<u></u>	Cu	irrent Use (Pr	ior if being den	nolished)			
Name of Monitoring Firm Hired by Buildin	g Owner (8))	ASC	M No.			batement Co operty Mai	ntractor (9) ntenance LI	LC			
Street Address			•		Street 105		lress 1 Riper Ave	enue				
City, State, Zip Code							, Zip Code NJ 07011					
Project Manager for Monitoring Firm			Telepho	one No.	Telepi 201-		No. 9-9008	Licen 0133	se No.			
Start Date (10) 9/24/2018	10/20/2	2018	mpletion	Date (11)			SHA Monitor					
Occupancy Status During Abatement (Che		-50			Street	Addı	ress					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of A	Abaten Hours	nent s		City, S	tate,	Zip Code					
Scope of Work (Check All That Apply)		<u> </u>							12000000			
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Constitution of the last of th	lenova emolit	271.7		×	l N	Mini-Enclosure Blovebag Prod					
		Locati					Ton Exemples	() and ivon-i	TIAUIC I'I	Abat	emeni ype	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intenar odial S (12)	ly by nce/	(i.e. the	Description Containing Mermal systems surfacing, VA ther miscellan	lateri insu T, or	ulation,	Amount (Specify SF or LF)	Remova	T	Encapsulate	Enclosure
	Yes	No	N/A		ther miscenari	cous	,		val	i ii	ulate	ure
Basement		Х		1	Pipe Insula	tion		SF	X			
Name of Registered Waste Hauler		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	JDEP W	888 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Cubic Yards f Waste			Registered Lan				
TBD City, State		1	BD	1	YD Disposal Date		110 Sar City, State	nd Company	/	- 111/1-		en le
Completed by	1 7							NY 11747				
Darko Raloski	Project	ct Ma	nager		Signature	11	1		Date 9/6/20	18		

State of New Jersey NOT FICATION OF ASBESTOS ABATEMENT Rersuant to NUAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 09/10/2018 Port Authority of New York & New Jerse Agencies Notified Type Notification Street Address 5080 McLester St SEP 1 3 2018 **EPA** Initial City, State, Zip Code X DEP Amendment # 2 Elizabeth, New Jersey 07201 X DOL Emergency (including justification) Telephone Number 1 8 201-595-4874 Name of Contact ☑ DOH Cancellation Slobodan Buljevic ☐ DCA **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) AQI Drivers Assistance Building at APM Terminal ☐ School (K-12) Street Address Subchapter 8 (Other than K-12) 5080 McLester St. Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age Elizabeth, New Jersey 07207 10,000 50+ County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) APM Terminal Drivers Assistance Bldg Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Brinkerhoff Lilich Corporation Street Address Street Address 1805 Atlantic Avenue 606 McBride Ave City, State, Zip Code City, State, Zip Code Manasquan, NJ 08736 Woodland Park, New Jersey Project Manager for Monitoring Firm Telephone No Telephone No. License No. Jason P. Hooper 732-223-2225 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09/13/2018 10/12/2018 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Union, NJ 07083 ☐ Other - Describe: Scope of Work (Check All That Apply) □ ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glove Bag Procedure / Limited Containment & Tent Non-Exempted (*) and Non-Friable Procedure Amount Abatement Is Location (Specify Type Normally Location of Description of SF of LF) Used Solely by Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Encapsulate Maintenance/ Enclosure TO BE ABATED (i.e. thermal systems insulation, Remova Custodial Staff? In Facility surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A Employee Break Room & Locker X 12x12 tan floor tile and associated 310 SF X Rm mastic Drivers Reception Window Area X 12x12 tan floor tile and associated 450 SF X mastic Old Bank Office Restroom X 12x12 tan floor tile and associated 90 SF X mastic Hallway along Restrooms & Utility 12x12 tan floor tile and associated X 72 SF X Rm AQI Office X 12x12 brown floor tile and X 330 SF associated mastic Main Hallway X 12x12 brown floor tile and 120 SF X associated mastic

Supply Closet		Х			2 brown floor tile	and	24 SF	X	
Telephone Closet		X			ated mastic		24.65	- V	-
relephone Closet		X			brown floor tile a ated mastic	nd	24 SF	X	
APM Manager's Office		X	+	AV STORMAN	brown floor tile a	nd	135 SF	X	
50000 Activides 500 to 00000000000000000000000000000000				associa	ated mastic				
Driver's Assistance Office		Х			brown floor tile a ated mastic	nd	530 SF	Х	
Throughout building			X	Black co	omposite window s	II	110 SF	Х	
Throughout building			X	Interior	window caulking		23	X	
Throughout building			X	Exterior	window glazing	23	X		
Main Roof Level;	Х			Rolled r	oofing felt		2,880 SF	X	
Overhang Roof level	Х			Rolled r	oofing felt		60 SF	Х	
Main Roof	Х			Flashing	g/sealant compound	d-roofing	400 SF	X	
Overhang Roof level				Flashing	g/sealant compound	d-roofing	50 SF	X	
	X								
Canopy Roof				Rolled r	oofing felt		1,800 SF	X	
	X								
Canopy Roof	x			Flashing	s/sealant compound	d-roofing	400 SF	X	
Name of Registered Waste Hauler		100	IJDEP '		Cubic Yards	Name of F	Registered Landfi	11	
Asbestos Transportation Co/DBA	ATC	1	lauler II 18724		of Waste 60	Minerva E	nterprise, LLC		
City, State Yaphank, New York					Disposal Date 10/12/2018	City, State Waynesh	urg, Ohio		
Completed by Adriana Olejarova	Title Pre	esiden	t		Signature			ate 09/10/201	8

ASB-41 (R-06-08)

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



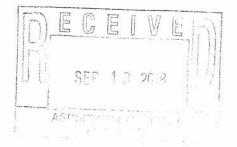
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

r-			1		IL TO MORC 6.60 at			-					
Date of Notification (1) 07/20/2018				Name Port A	of Building Owner/ Authority of New	Operator (York & N	2) lew Jersey/ APN	1 Terminals C	(Geck	Nel	1/2	3	
Agencies Notified Type	Notification				Address McLester St			K				A Particular of	
☐ EPA ☐ ☑ DEP ☑ ☑ DOL ☐	Initial Amendment Emergency (City, St Elizab	tate, Zip Code eth, New Jersey	07201		H LI SEP	-13 -	201	9_		
☑ DOH ☐ DCA	justification) Cancellation				of Contact dan Buljevic		de la companya de la	Telephone Nur 201-595-487	DEMEN	(G	OL.8	k	
				FAC	ILITY INFORMATI	ION		PARTA SELECTION SELECTION OF THE SELECTI	en (c.) 1		24.7.E		
Name of Facility Where Aba AQI Drivers Assistance E				,,,,		Type o	f Facility (4)			***************************************			
Street Address 5080 McLester St.				(□ Su	bchapter 8 (Other her (i.e. private & c	than K-12) commercial buildir	ngs, horr	ies, e	etc.)		
City (5) Elizabeth, New Jersey 07	7207					Square 10,000		# of Floors	Bld 50-	g. Ag	е		
County (6) Union					Code (7) USE ONLY)	Current	t Use (Prior if being APM T	g demolished) Ferminal Drivers	Assist	ance	Bld	lg	
Name of Monitoring Firm Hill Brinkerhoff	red by Building	Owner (8))	ASCI	M No.	Name o Lilich C	f Abatement Control Corporation	ractor (9)	1				
Street Address 1805 Atlantic Avenue					7	Street A 606 Mc	ddress Bride Ave						
City, State, Zip Code Manasquan, NJ 08736				ersey									
Project Manager for Monitor Jason P. Hooper			Telepho 732-22		Telepho 973-22		License No 01104).	***************************************				
Start Date (10) 07/23/2018 ON HOL	Schedul 08/07/2		mpletion	Date (11)		f OSHA Monitor rironmental Labo	oratories, LLC	Paragraphic Control of the Control o					
Occupancy Status During Al				140									
☐ Facility Closed/Vacated ☐ Abatement Performed C ☐ Other – Describe:						City, Sta Union,	ite, Zip Code NJ 07083						
Scope of Work (Check All TI	nat Apply)										-		
□ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	71.37		Renova Demoli				Mini-Enclosure	at with Negative P		ont 2	Tont		
						×	Non-Exempted (*	edure / <i>Limited Co</i> ') and Non-Friable			10111		
Location of			Local Norma	lly		Amount Abate					atement Type		
Asbestos-Containing Ma TO BE ABATE In Facility		Ma	ed Sole intens todial	ince/	Asbestos Co (i.e. therma	ntaining N	laterial (ACM) s insulation,		Rer	Re	Enca	Encl	
(13)			(12)			miscellan			Removal	Repair	Encapsulate	Enclosure	
Employee Break Roon	2 Locker	Yes	No X	N/A	12x12 tan floo	r tila an	d associated	310 SF	X	-	CD		
Rm	1 & LUCKEI			access de la pro-proprieta	mastic	i the an	a associated	310 31	^				
Drivers Reception Window Area X					12x12 tan floo mastic	r tile an	d associated	450 SF	Х				
Old Bank Office Restroom X					12x12 tan floo mastic	r tile an	d associated	90 SF	Х				
Hallway along Restrooms & Utility X Rm					12x12 tan floo mastic	r tile an	d associated	72 SF	Х				
AQI Office X					12x12 brown f		and	330 SF	Х				
Main Hallway	Х	411	12x12 brown f	loor tile	and	120 SF	Х						

Supply Closet		X		Separate description of the second	prown floor tile ar ed mastic	d	24 SF	X		
Telephone Closet		X		1	rown floor tile and ed mastic		24 SF	X	100000000000000000000000000000000000000	
APM Manager's Office		X			rown floor tile and ed mastic		135 SF	X		
Driver's Assistance Office		Х			rown floor tile and ed mastic	ı	530 SF	X		
Throughout building			X		nposite window sill		110 SF	X		
Throughout building			X	Interior v	vindow caulking		23	Х		
Throughout building			X	Exterior	window glazing		23	X		
Main Roof Level;	Х			Rolled ro	ofing felt		2,880 SF	X		
Overhang Roof level	X			Rolled ro	ofing felt		60 SF	X		
Main Roof	X			Flashing	/sealant compound	-roofing	400 SF	Х		
Overhang Roof level				Flashing,	/sealant compound	-roofing	50 SF	Х		
Canopy Roof	X	+		Rolled ro	oofing felt		1,800 SF	X		
Canopy Roof	X			Flashing	/sealant compound	-roofing	400 SF	X		
curiopy need	X									
Name of Registered Waste Hauler Asbestos Transportation Co/DBA A	тс			Waste ID No.	Cubic Yards of Waste 60	Minerva	Registered Land	fill	,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0	
City, State Yaphank, New York				<u> </u>	Disposal Date 08/07/2018	City, Sta Waynes	sburg, Ohio	Date	<u> </u>	
Completed by Adriana Olejarova	Title	e Presid	ent		Signature	2/ C	or asbestos licens	07/20/20		

ASB-41 (R-06-08)

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



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h1300		NOTIF	ICATIO	tate of Ne N OF ASE to NJAC	BESTOS !	ABATE	MEN	т	DE	<u>G</u> [\mathbb{W}_{-}	
Date of Notification (1) 9/7/2018				of Building Van Tu		perator	(2)		The state of the s	SEP	1 :	3 2	2018	
Agencies Notified Type Notification	n		Street A	Address					AS	BESTO	S (MOC	THO	L 8.
DEP Amended Amendmen		[ate, Zip C Ridge N		3			a contractivate of the con-	populari i	2000		20.00	12 th 12 th
X Emergency justification DCA Cancellation	1)			of Contact Van Tu					Telephone	e Numbe	r			
Name of Facility Magaza Abatamant in Talki	DI /	2)	FAC	ILITY INF	ORMATI	ON								
Name of Facility Where Abatement is Taki Erick Van Tuyl's Residential	ng Place (3)					Тур	e of Facility (4						
Street Address							×	Other (i.e. p	2) 8 (Other than rivate & comr	n K-12) mercial b	uild	ings,	home	es,
City (5) Glen Ridge							Squ	etc.) lare Feet	# of Floors	s	Ble	dg. A	ige	
County (6) Essex				Code (7) USE ONLY)	_	Curr	rent Use (Pric	or if being den	nolished)				
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.				patement Con operty Mair	25 50	LC	-23-3			
Street Address						Street 105		ess Riper Aver	nue					
City, State, Zip Code				· · · · · · · · · · · · · · · · · · ·				Zip Code J 07011						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 201-		No. -9008	Licen 013	ise No. 36				
Start Date (10) 9/8/2018	10/15/	2018	npletion	Date (11)		Name	of OS	SHA Monitor						
Occupancy Status During Abatement (Che	ck Only O	ne)				Street	Addre	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of mal Facility	Abaten y Hours	nent			City, S	tate, 2	Zip Code	A		5 <u></u>			
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolif				×	M Gl	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					
	Is	Locat	ion				1 140	on-Exempted	() and Non-	r nable r	-	30.11 TOV	ment	
Location of		Normal	ly		Des	cription	of			_	-	Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintena stodial s (12)	nce/		tos Conta thermal s surfac other m	systems ing, VA	s insul T, or	lation,	Amount (Specify SF or LF)	2		Repair	Encapsulate	Enclosure
Description	Yes	No	N/A								-		ate	Гe
Basement		X			C	eiling			SF	X	+			
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic	′ards		Name of F	Registered La	ndfill				
ГВD		H	lauler ID BD		of Wast				d Compan					
City, State					Disposa	al Date		City, State Melville,	NY 11747	7				
Completed by Darko Raloski	Title Proje	ect Ma	anager		Sig	gnature	7)2	·		Date 9/7/2	012	8		

Ch7001	ı	NOTIFI (Pi	CATION OF	of New Jer ASBESTO NJAC 8:60	SABATE	MENT 20)		B)-	<u> </u>	9 [$\underline{\mathbb{V}}$			
Date of Notification (1)			Name of Br	ilding Owne	r/Onerato	or (2)			- 00	D-1	-	2041			
9/10/18				tese Priva					SE	1 1	J	CUIC			
Agencies Notified Type Notification	on		Street Addr												
⊠ EPA ☑ Initial					Ī			A	SBES	TOS	COL	VTRO			
EPA Initial Amended			City, State,	Zin Code				W WITH STREET STREET ST		LIGE	AIR	IG			
□ Amendme □ Amendme	ent#			ach Town	ship N.	1 08008						THE PERSON NAMED IN			
☑ DOH ☐ Emergence justificatio	y (including	-	Name of Co		omp 140	7 00000	T.								
DCA Cancellati			Tom	indot			1 16	lephone N	umber	g.					
				Y INFORMA	TION										
Name of Facility Where Abatement is Tal	king Place (3	3)	TAGILIT	I IIII OKIIIA	TION	Type of Facility	(4)			0					
Tom Cortese Private Home						2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -									
Street Address						School (K-	-12) or 8 (Oth	er than K	12)						
1						Other (i.e.	private	& commer	cial bu	ildings	s, hor	nes.			
City (5)						etc.)				- 1					
Long Beach Towns NJ 08008						Square Feet 1000 +	1	f Floors		Bldg.	Age				
County (6)		10	ounty Cod	(7)			2			50+					
Ocean		(6	County Code	ONLY)		Current Use (Pr House	ior if be	or if being demolished)							
Name of Monitoring Firm Hired by Building	a Oumas (0)														
N/A	g Owner (8)		ASCM No			of Abatement Co	ntractor	tractor (9)							
Street Address					Perr	naco Inc		3074							
Street Address					Access to the second	Address									
C# 00 = 7 0 :					POI	Box 329									
City, State, Zip Code					1000000	tate, Zip Code									
					Wes	t Berlin NJ 08	091								
Project Manager for Monitoring Firm		T	elephone N	0.	Teleph	one No.		License	No.						
					856-	753-9800		00727							
Start Date (10)	Schedule	d Comp	letion Date	(11)	Name	of OSHA Monitor									
9/21/18	9/28/18				Sam	е									
Occupancy Status During Abatement (Che	eck Only One	e)			Street	Address									
Facility Closed/Vacated During Entire	Period of Al	bateme	nt												
Abatement Performed Outside of Nor Other – Describe:	mal Facility	Hours			City, S	tate, Zip Code				00550					
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf	Пп		APO De C			I									
≥160 sf or ≥260 lf	- Contracting	enovatio emolitio			<u> </u>	Full Containm Mini-Enclosure	ent with	Negative	Pressu	ıre					
						Glovebag Pro									
					X	Non-Exempte	d (*) and	Non-Frial	ble Pro	cedur	е				
	100	ocation							-		emen	t			
Location of		ormally Solely	hv	De	scription	of				Ту	ре				
Asbestos-Containing Material (ACM) TO BE ABATED		tenance		sbestos Con	taining M	aterial (ACM)		mount			т				
In Facility		dial Sta	ff?	(i.e. therma	systems cing, VA	Insulation,		pecify or LF)	Remova	Re	Encapsulate	Enclosure			
(13)		(12)			miscellane		01	OI LIT)	Vou	Repair	psu	losu			
	Yes	No	N/A						8	~	late	ire			
Exterior Bottom of the house			x	Exterior	Trancito	Panels	40	0.05	-			-			
	+ +	-	^	LXCHO	Tansile	raileis	40	0 SF	x						
									-						
	-	-	_						-						
Name of Registered Waste Hauler		NID	EP Waste	Cubia	Yards	No	Deci-1	- 41							
United Containers			ler ID No.	of Wa			v.0505000	ed Landfill							
		224	59	2	per 37.779.00	G.R.O.	W.S.		4						
City, State				Dispo	sal Date	City, State)								
Elm NJ				9/28/	18	Morrisv		1960							
Completed by	Title			8	Signature			Da	te						
Anthony T Perna	Presid	lent			/	1		1	H O /+ (2					

President

9/10/18

Ch 7000	44400	NOTIF	Pursuan	t to NJAC	8:60 and 12:12	0)		B	E (P	rint Fo
Date of Notification (1)					Owner/Operato	200		II L	35	7 1	0 0	2018
9/10/18			Jose	oh Pijano	wski Privat	e Ho	me					
Agencies Notified Type Notification			Street /	Address				-	ASBES	TOR	001	TOOL
☐ DEP ☐ Amended Amendment	#	3000 and	문자 전경을 통과하다 되었다.	ate, Zip Co	de NJ 08008					LICE		
□ Emergency (including	3		of Contact	140 00000			Telephone	e Numbe	r		
			FAC	ILITY INFO	DRMATION	-				=		
Name of Facility Where Abatement is Taking	g Place ((3)				Тур	e of Facility (4)					
Joseph Pijanowski Private Home			11				School (K-12)					
Street Address					i _y		Subchapter 8 (Other (i.e. priva etc.)	Other than ate & comr	r K-12) mercial b	uilding	s, hom	nes,
City (5)						Squ	uare Feet	# of Floors	s I	Bldg.	Age	
Haven Beach NJ 08008						1 885	+ 000	2		50+		
County (6)				Code (7) USE ONLY)			rent Use (Prior if		nolished)			
Ocean							ouse & Garag					
Name of Monitoring Firm Hired by Building C N/A	wner (8)	ASC	√l No.			patement Contra	ctor (9)				
					Peri	naco	Inc					
Street Address					Street							
City State Zin Code						Box						
City, State, Zip Code					7000		Zip Code erlin NJ 08091					
Project Manager for Monitoring Firm			Telepho	ne No.	Telepi	none			se No.			
Start Date (10) 9/21/18			npletion	Date (11)			SHA Monitor					_
- Value of the second of the s	9/28/1				Sam							
Occupancy Status During Abatement (Check		0.01.5.2			Street	Addre	ess					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of al Facilit	Abaten y Hours	nent		City, S	itate,	Zip Code					
Scope of Work (Check All That Apply)		1400										
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolit				M G	ull Containment vilini-Enclosure vilovebag Procedu on-Exempted (*)	ıre			re	
l		Locati Normal			227 12 10		()	414 110111	Tradic (Abat	emen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intena todial S (12)	ly by nce/	Asbesto (i.e. t	Description os Containing Naternal systems surfacing, VA other miscellar	tateria insu T, or	lation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						<u> </u>		ate	6
Exterior Siding House and garage			х		Exterior Sig	ling		2000 SF	x			
									_	-	_	
										-	-	
		IN	JDEP W	aste T	Cubic Yards		Name of Reg	istered Lar	odfill			
Name of Registered Waste Hauler		6500	auler ID	(*************************************	of Waste		1	Ldi	i dilili			
Name of Registered Waste Hauler United Containers		1 133	2459		4		G.R.O.W.	S.				
United Containers City, State		1 133			4 Disposal Date		G.R.O.W.S	S. 			Silver	
United Containers		1 133					A CONTRACTOR OF THE PARTY OF TH					

Date of Notification (1) 7 / 30 / 18 Agencies Notified □ EPA □ DOLWD □ DCA □ Name of Building Owner/Operator (2) □ Verizon Communications Street Address 51 Old Ledgewood Road □ City, State, Zip Code □ Flanders, NJ 07836 Name of Contact □ Mark Jenkins □ Cancellation Name of Facility Where Abatement is Taking Place (3) Name of Building Owner/Operator (2) □ SEP 13 Street Address 51 Old Ledgewood Road □ City, State, Zip Code □ Flanders, NJ 07836 □ Name of Contact □ Telephone Number □ 215-365-5870 Type of Facility (4)	NTROL
Agencies Notified Agencies Notified EPA DOLWD DOH DCA (NJAC 5:23-8) Mark Jenkins Agencies Notified Type Notification Street Address 51 Old Ledgewood Road ASBESTOS CO City, State, Zip Code Flanders, NJ 07836 Name of Contact Mark Jenkins FACILITY INFORMATION	NTROL
☑ EPA ☑ Initial ☐ ST Old Ledgewood Road ASBESTOS CO ☑ DOH ☑ Amended ☐ City, State, Zip Code ☐ DCA ☐ Emergency (including justification) ☐ Vame of Contact Telephone Number ☐ Cancellation Mark Jenkins 215-365-5870	
☑ EPA ☑ Initial ☐ ST Old Ledgewood Road ASBESTOS CO ☑ DOH ☑ Amended ☐ City, State, Zip Code ☐ DCA ☐ Emergency (including justification) ☐ Vame of Contact Telephone Number ☐ Cancellation Mark Jenkins 215-365-5870	
☑ DOLWD ☑ Amended Amended Amendment #3-9/10/18 ☑ DCA ☐ Emergency (including justification) ☐ Emergency (including justification) ☐ Cancellation Name of Contact Telephone Number Mark Jenkins 215-365-5870	
□ DCA □ Emergency (including justification) □ Cancellation	
(NJAC 5:23-8) justification) Name of Contact Telephone Number Mark Jenkins 215-365-5870 FACILITY INFORMATION	
Cancellation Mark Jenkins 215-365-5870 FACILITY INFORMATION	
FACILITY INFORMATION	
Name of Equility Where Abeternation Title Black	
Verizon Netcong C.O. ☐ School (K-12)	
Street Address Subchapter 8 (Other than K-12)	
51 Old Ledgewood Road Other (i.e., private and commercial building homes, etc.)	ngs,
City (5) Square Feet # of Floors Bldg.	Δαρ
Flanders, NJ 07836 +-10,000 1 +-5	
County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)	
Morris	
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)	
USA Environmental Management, Inc. BRISTOL ENVIRONMENTAL, INC.	
Street Address Street Address	
8436 Enterprise Ave 1123 BEAVER STREET	
City, State, Zip Code City, State, Zip Code	
Philadelphia, PA 19153 BRISTOL, PA 19007	
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.	
Mark Jenkins 215-365-5870 215-788-6040 00509	
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8/13/18	
Occupancy Status During Abatement (Check only one) Street Address	
Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET	
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/5:00PM-2:00AM	
BRISTOL, PA 19007	
Scope of Work (Check all that apply)	
□ ≥3 sf or ≥3 lf □ Renovation □ Mini-Enclosure □ ≥160 sf or ≥260 lf □ Demolition □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure	
Is Location Abater	nent Type
Location of Normally Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) Amount 0 0	
TO BE ABATED Maintenance/ (i.e., thermal systems insulation (Specify 3	Encapsulate
surfacing, VAI, or SF or LF) a	osul
(13) (12) other miscellaneous)	ate
Ice #7 Fios Room □ □ VAT/Mastic 350 SF □	
Fios Maintenance Room #6	Intr
SSADC Room #5	
CFO Office #2	ПГ
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill	
SERVICE TRANSPORT GROUP, INC. Hauler ID No. 20990 Waste MINERVA LANDFILL	
City, State Disposal Date City, State	
NEW CASTLE, DE TBD WAYNESBURG, OH	
Completed By (Print or Type) Title Dillan DeCaro Title Signature Or Caro Or Caro Or Caro	100

Pg. 2

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

Chutt 2 #3433

Date of Notification (1)				None	a of Decilation	- 0 - 10 - 1	(0)	Ch	260	cl		77	J (-	,,		
7 /	30 /	18				g Owner/Operator ommunications	(2)	In) [C			\mathbb{V}	E		
Agencies Notified ⊠ EPA ⊠ DOLWD	Type Notification ☐ Initial ☐ Amended			51	t Address Old Ledg State, Zip	gewood Road				SEP	1	3 1	2018			
☑ DOH ☐ DCA	Amendmen				nders, N				ĺ			-	.070	THE STATE OF THE S		
(NJAC 5:23-8)	☐ Emergency justification	(incluain i)	g		e of Contac			Telep	hohe	Numbe	TC (2011	T D C			
	Cancellation	n		Ma	rk Jenkir	ns		215	-365	-5870	EN	SIN!	1 mul	- čt		
				FA	CILITY IN	FORMATION				an amplication	rent acc	Construction	A Residence of the Control of the Co	other, Sta		
Name of Facility Where Al	batement is Tal	king Place	e (3)				Type of Facility (4)								
Verizon Netcong C.0	Ο.						School (K-12)	0.50								
Street Address							Subchapter 8				cial buildings,					
51 Old Ledgewood F	Road						homes, etc.)	ivale ar	ia cor	nmerci	ai bu	maing	JS,			
City (5)							Square Feet	# of l	Floors	3	Ble	dg. A	ge			
Flanders, NJ 07836							+-10,000	1 +-50								
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Prid	or if bei	ng de	molish	ed)					
Morris																
Name of Monitoring Firm H		-	(8)	ASCM	No.	Name of Abateme										
USA Environmental	Managemen	t, Inc.					VIRONMENTAL	., INC.								
Street Address						Street Address										
8436 Enterprise Ave						1123 BEAVE										
City, State, Zip Code	150					City, State, Zip Co										
Philadelphia, PA 191 Project Manager for Monito			1 = 1			BRISTOL, PA	19007									
Mark Jenkins	oring Firm		1	ephone		Telephone No.			ise No	0.						
Start Date (10)	Sch	neduled C	17/2	15-365		215-788-6040		00	509							
8 /13 _ /		10 /				Name of OSHA M	ionitor VIRONMENTAL	INIC								
Occupancy Status During					-10		VIKONIVIENTAL	, INC								
☐ Facility Closed/Vacated				ment		Street Address	OTDEET									
	Outside of Norm	nal Facilit	v Hou	rs - Des	cribe	1123 BEAVER										
Time of Abatement:	AM	PM/5:00	PM-2	:00AM		City, State, Zip Co BRISTOL, PA										
Scope of Work (Check all t	hat apply)					BRISTOL, FA	19007									
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re				☐ Mini-Encl	Procedure	egative Pressure on-Friable Procedure								
			Loca					0.117.0		- 1	Aba	atem	ent Ty	/pe		
Location o Asbestos-Containing M			Norma	illy ely by	A = h = -	Description of		-		t						
TO BE ABAT	ED	Ma	intena	ince/		stos Containing Mat ., thermal systems i			nount pecify		Removal	Repair	Encapsulate	Enclosure		
IN Facility (13)		Cus	(12)	Staff?		surfacing, VAT,			or LF		val	7	sula	sure		
(15)		Yes	No	N/A		other miscellaned	ous)			1			ate			
Room #1					VAT/Ma	stic		15	0 SF					\Box		
Construction PPM Roc	om #13			\boxtimes	VAT/Ma	stic		20	0 SF			П	П	П		
Hallway					VAT/Ma	stic			0 SF	-						
										П	П	П				
Name of Registered Waste Hauler NJDE					100000000000000000000000000000000000000	Cubic Yards of	Name of Registe					ш	\Box	믝		
SERVICE TRANSPOR	RT GROUP, II	NC.	H	20990		Waste	MINERVA L									
City, State	·			-		Disposal Date	City, State							\neg		
NEW CASTLE, DE						TBD	WAYNESBU	JRG, C	H							
Completed By (Print or Typ		itle				Signature		1 -		Date			Sec.			
Dillan DeCaro		Estimat	or			Dillana	Dolars	1 M	L	9-	10	-1	X			

Po	3		NOT	IFIC	MOITA	PEAS	ew Jersey BESTOS ABA C 8:60 and 5:1	TEMENT	chutt:	2 学-	345	33				
Date of Notification (1)					Name	of Buildin	g Owner/Operator ((2)	IN FR	F	1	W	ß			
7 /	30 /	18	3				mmunications			5		<u>U</u>	<u>L</u>			
Agencies Notified EPA DOLWD	Type Notif ☑ Initial ☑ Amend				51		gewood Road		TITE SEP	1 (3 21	018				
☑ DOH	Amend		3-9/10	/18	3.000	State, Zip (
☐ DCA	☐ Emerge	ency (ir				nders, N			ASSEST			ROL	8			
(NJAC 5:23-8)	justifica	28				of Contac			Telephone Number							
	Li Caricei	lation				rk Jenkir			215-365-5870)						
Name of Eacility Whore	Abatament is	Table	- Di	(2)	FA	CILITY IN	IFORMATION	T-	. (4)							
Name of Facility Where A Verizon Netcong C		s raking	g Place	(3)				(4)								
Street Address	.0.							School (K-12	2) 8 (Other than K-12)							
51 Old Ledgewood	Road							Other (i.e., p homes, etc.)	rivate and commer	cial bu	uildin	gs,				
City (5)	is.							Square Feet	# of Floors Bldg. Age							
Flanders, NJ 07836 County (6)):				10			+-10,000	1 +-50							
Morris					Cour	ity Code (/	()(STATE USE ONLY)	A CONTRACT OF THE PARTY OF THE	ior if being demolis	ned)						
Name of Monitoring Firm	Hired by Ru	ildina (Jwner	(8) T	ASCM	No	Name of Abatana	Verizon								
USA Environmenta	general and a such a Decoder and Contraction.			(0)	AGGIVI	INO.	Name of Abateme	VIRONMENTA								
Street Address				L	-		Street Address	VIICONNILIVIA	L, INC.							
8436 Enterprise Ave	е						1123 BEAVE	R STREET								
City, State, Zip Code				-			City, State, Zip Co			_			_			
Philadelphia, PA 19	153						BRISTOL, PA									
Project Manager for Moni	itoring Firm			Tele	phone	No.	Telephone No.		License No.							
Mark Jenkins				21	5-365	-5870	215-788-6040		00509							
Start Date (10)	2000-	1			tion Da		Name of OSHA M	lonitor								
8 /13 /	18	1	0 /	1	_ / _	18	BRISTOL EN	VIRONMENTA	L, INC							
Occupancy Status During							Street Address			700						
☐ Facility Closed/Vacate							1123 BEAVER	RSTREET								
Abatement Performed Time of Abatement:						cribe	City, State, Zip Co									
_			<u>0.00</u>		00/11/1		BRISTOL, PA	19007								
Scope of Work (Check all	that apply)						⊠ Full Cont	ainment with Nec	rative Pressure							
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf				novati molitio			 ⊠ Full Containment with Negative Pressure □ Mini-Enclosure □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure 									
			Locat						Ab	atem	ent T	ype				
Location Asbestos-Containing N TO BE ABA	Material (AC	M)	Use	Normal d Sole intena	ly by	Asbes	Description of stos Containing Mat	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enci			
IN Facilit				odial S		(1.6.	, thermal systems i surfacing, VAT,	or	(Specify SF or LF)	oval	¥	nsd	osure			
(13)			Voc	(12) No	NI/A		other miscellaned	ous)	5			late	0			
Room 12	-	Yes	140	N/A	\/A T/8#	-41-		100 5-								
the second second										Ш	Ш	L				
LP Storeroom						VAT/Ma	stic		180 SF							

ASB-41 DO 18060

NEW CASTLE, DE

Completed By (Print or Type)

City, State

Name of Registered Waste Hauler

SERVICE TRANSPORT GROUP, INC.

Cubic Yards of

Disposal Date

Signature

Waste

TBD

Date 9-10-18

Name of Registered Landfill

MINERVA LANDFILL

WAYNESBURG, OH

City, State

Title

Estimator

NJDEP Waste Hauler ID No.

20990

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

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

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			(P	ursua	nt to NJA	AC 8:60 and 5:1	6)	MEG	E	\sqrt{I}	7 (8	7 1		
Date of Notification (1)				Name	e of Buildin	g Owner/Operator (2)	11111-11-11		<u> </u>	L			
	30 /	18		Ve	rizon Coı	mmunications						-		
Agencies Notified	Type Notification	on		Stree	t Address			(U L) SEP	13	20	8			
⊠ EPA				51	Old Ledg	gewood Road		İ				t		
☑ DOH	Amended Amendmen	+ #2_0/5/	10	City,	State, Zip (Code		ASBEST	08.00	MITE	OLA	ę.		
□ DCA	☐ Emergency			Fla	nders, N	J 07836		Landanian de la company de la	ENS	NG	The same of			
(NJAC 5:23-8)	justification		9	Name	of Contac	t		Telephone Nun	ber					
	☐ Cancellation	n		Ma	rk Jenkir	ns		215-365-58	70					
				FA	CILITY IN	FORMATION		-1						
Name of Facility Where A		king Place	(3)				Type of Facility	(4)						
Verizon Netcong C.	0.						School (K-1)		.,					
Street Address						*	Other (i.e., p	8 (Other than K-12 rivate and comme	2) rcial bu	ildino	S.			
51 Old Ledgewood	Road						homes, etc.		oo balloo laba		-1			
City (5)							Square Feet	# of Floors		dg. A	ge			
Flanders, NJ 07836 County (6)				7.0		VOT. 125	+-10,000	t Use (Prior if being demolished)						
Morris				Cour	nty Code (/	()(STATE USE ONLY)		for if being demoli	shed)					
Name of Monitoring Firm	Hired by Buildin	a Owner	(0) [ASCM	No	Name of Abot	Verizon							
USA Environmental	15	-	(0)	ASCIVI	NO.	Name of Abateme	VIRONMENTA							
Street Address	managemen	ι, πο.				Street Address	VIKONIVIENTA	L, INC.						
8436 Enterprise Ave	•					1123 BEAVER	STREET							
City, State, Zip Code				-		City, State, Zip Co								
Philadelphia, PA 19	153					BRISTOL, PA								
Project Manager for Monit	oring Firm		Tele	phone	No.	Telephone No.		License No.		1				
Mark Jenkins			2	5-365	-5870	215-788-6040		00509	00509					
Start Date (10)		eduled C				Name of OSHA M	onitor							
8 /13 /	18 計畫	10/	1	_ / _	18	BRISTOL EN	/IRONMENTA	L, INC						
Occupancy Status During						Street Address								
☐ Facility Closed/Vacated						1123 BEAVER								
Abatement Performed Time of Abatement:					cribe	City, State, Zip Co								
		1 1011 0.00	1 101-2.	OUAIVI		BRISTOL, PA	19007							
Scope of Work (Check all	that apply)					M Full Cont	ainment with Neg	otivo December						
≥3 sf or ≥3 lf		⊠ Re				☐ Mini-Encl		jative Pressure						
≥160 sf or ≥260 lf		☐ De	molitic	n		☐ Glovebag	Procedure	n-Friable Procedu						
		Is	Locat	ion		□ NOII-EXE	inpled () and No	II-FIIable Procedu		-1-	- · T			
Location of		l N	lorma	lly		Description of				ateme				
Asbestos-Containing N TO BE ABAT		E-100 (A) (A)	d Sole intena			stos Containing Mat		Amount	Rem	Repair	nca	Encl		
IN Facility		Cust	odial	Staff?	(i.e.	 thermal systems is surfacing, VAT, 		(Specify SF or LF)	Remova	¥	Encapsulate	Enclosure		
(13)		Yes	(12) No	N/A		other miscellaned			-		late	е .		
Ice #7 Fios Room				⊠ ×	VAT/Ma	stic		350 SF						
Fios Maintenance Roo	om #6				VAT/Ma			300 SF				님		
SSADC Room #5					VAT/Ma									
CFO Office #2								250 SF						
	FO Office #2						Name of Regis	300 SF			Ш			
SERVICE TRANSPORT GROUP, INC. Hauler ID No.						Cubic Yards of Waste	MINERVA							
City, State						Disposal Date		-ANDIILL						
NEW CASTLE, DE						TBD	City, State WAYNESB	IIRG OH						
Completed By (Print or Tyr	itle		Signature	MATINESD		4-								
Dillan DeCaro		Estimat	or			0.00	DeCow	/ ·/ De	9/S	5/	0	-		
SB-41			20000			Lucian	~ Cow	1-90	1/0	1	0			

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

ACK ON SITE 9/5/18

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

				. uiot	10 11	JAC 8:60 and 5	. 10)			more more	1,11	-	
Date of Notification (1)	W 41925					ding Owner/Operato	or (2)	11111				_	
	30 /	18		1	erizon C	communications		IIII SEE	13	20	18		
Agencies Notified	Type Notification	n		Str	eet Addres	SS		led had				_	
	⊠ Initial			5	1 Old Le	dgewood Road		ACDEC		· · · · · · ·		100	
☑ DOH	Amended Amendment	#2-9/	5/12	City	, State, Zi	p Code		ASBEST	FOLKS		W.	()	
☐ DCA	☐ Emergency			F	landers,	NJ 07836		THE REPORT OF THE PERSON OF THE	Cathair Ing	7-12-4 11-		S.T	
(NJAC 5:23-8)	justification)			Nar	ne of Cont	tact		Telephone Nu	ımber			_	
	☐ Cancellation	Ê		IV	lark Jenk	kins		215-365-5					
				F	ACILITY	INFORMATION							
Name of Facility Where A		ing Pla	ce (3)				Type of Facility	(4)			1265	_	
Verizon Netcong C.	0.						School (K-1;	2)					
Street Address	_						Subchapter	8 (Other than K-	12)				
51 Old Ledgewood	Road						homes, etc.	rivate and comm	nercial t	ouildin	ıgs,		
City (5)							Square Feet	# of Floors	E	Bldg. A	\ae	-	
Flanders, NJ 07836							+-10,000	1		+-50			
County (6)				Co	unty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	lished)			-	
Morris							Verizon	J	,				
Name of Monitoring Firm			r (8)	ASCI	И No.	Name of Abaten	nent Contractor (9)					_	
USA Environmental	Management,	Inc.				BRISTOL EI	NVIRONMENTA	L, INC.					
Street Address						Street Address						-	
8436 Enterprise Ave						1123 BEAVE	R STREET						
City, State, Zip Code	4.50					City, State, Zip C						-	
Philadelphia, PA 19						BRISTOL, P.	A 19007						
Project Manager for Monit Mark Jenkins	oring Firm			lephon		Telephone No.						-	
tart Date (10)	10.				5-5870	215-788-604	Tour Hawar was a same	00509					
	18 Sche	duled	Comp	letion D	ate (11)	Name of OSHA							
8 /13 / _				/	18		IVIRONMENTAL	., INC					
Occupancy Status During	Abatement (Ched	k only	one)			Street Address						-	
Facility Closed/Vacated Abatement Performed	Outside of Norma	Facili	Abat	ement		1123 BEAVE	R STREET						
Time of Abatement:	AMP	M/5:0	DPM-2	2:00AN	Scribe	City, State, Zip C						-	
cope of Work (Check all t		-		_		BRISTOL, PA	A 19007						
	пат арріу)					⊠ Full Con	tainment with Neg	otive Deserve				_	
] ≥3 sf or ≥3 lf] ≥160 sf or ≥260 lf			enova				closure	ative Pressure					
1			emolit	ion	15	☐ Gloveba	g Procedure empted (*) and Nor	F: 5					
		l:	Loca	tion		LI NOII-EXE	impled () and Nor	I-Friable Procedi	1 2000			_	
Location o			Norma			Description of	of		Ab	ateme	ent T	-	
Asbestos-Containing M TO BE ABAT	aterial (ACM)		ea Sol	ely by ance/	Asbe	estos Containing Ma	iterial (ACM)	Amount	Rer	Repair	Enc		
IN Facility		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	todial	Staff?	(1.6	e., thermal systems surfacing, VAT	insulation,	(Specify SF or LF)	Removal	air	aps		
(13)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(12)	-	-	other miscellane	ous)	SI OI LF)	<u> =</u>		Encapsulate	ı	
		Yes	No	N/A	-						æ	-	
oom #1					VAT/Ma	astic		150 SF	\boxtimes			T	
onstruction PPM Roc	m #13				VAT/Ma	astic		200 SF				-	
allway			П	\boxtimes	VAT/Ma	actic					<u> </u>	-	
		_			VATAME	astic		320 SF					
me of Registered Waste	Haulos		Щ	1155								-	
				IJDEP I		Cubic Yards of Waste	Name of Registe					-	
SEKVICE IRANGOOD	TI GROUP, INC	٠.	1	20990			MINERVA L	ANDFILL					
SERVICE TRANSPOR			12-21	Ta 12 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Disposal Date	City, State						
y, State						1							
y, State NEW CASTLE, DE						TBD	WAYNESBU	IRG, OH					
y, State NEW CASTLE, DE mpleted By (Print or Type Dillan DeCaro	100	stima				TBD Signature	m De Can	/ Da	ate 9/5	,			

Pg. 1

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

	EG			W	EM
K			-		
	SEP	1	3	2018	

Date of Notification (1)				Nie	ma of D. II	1: 0 10	1.50		5EP	13	5	018
7 /	30 /	18				ding Owner/Operator ommunications	(2)					
Agencies Notified	Tree Marie		-					ASP	EST(70 0	CANT	
⊠ EPA	Type Notifica	ition			reet Address				Lit	d-111	INC.	1742
⊠ DOLWD					of Old Led	dgewood Road				100000 I	48 44	-11504
⊠ DOH	Amendme		/20/18	5	y, State, Zip							
☐ DCA	☐ Emergend	y (includ	dina	* F	landers,	NJ 07836						
(NJAC 5:23-8)	justificatio	n)		Na	me of Conta	act		Telephone Nu	mhor			
	☐ Cancellati	on		IN.	/lark Jenk	ins		215-365-58		2		
				F	ACILITY	INFORMATION			310			
Name of Facility Where Al	batement is Ta	aking Pla	ace (3)				Type of Facility (4	4)				
Verizon Netcong C.0	D.						School (K-12)					
Street Address							Subchapter 8	(Other than K-1	12)			
51 Old Ledgewood F	Road						Other (i.e., pri	vate and comm	ercial	buildi	ngs,	
City (5)							nomes, etc.)					
Flanders, NJ 07836							Square Feet	# of Floors		Bldg.	Age	
County (6)				Co	unty Code	(7)(STATE USE ONLY)	+-10,000	1		+-5	0	
Morris				100	unty Code ((1)(STATE USE ONLY)	Current Use (Prio	r if being demo	lished))		
Name of Monitoring Firm H	lired by Buildir	na Owne	er (8)	TASCI	M No.	Nome of the	Verizon					
USA Environmental I			,, (0)	730	VI INO.	Name of Abateme						
Street Address		11, 1110.	-	1			VIRONMENTAL,	INC.				
8436 Enterprise Ave						Street Address						
City, State, Zip Code						1123 BEAVE						
Philadelphia, PA 191	53					City, State, Zip Co						
Project Manager for Monito			T.			BRISTOL, PA	19007		90			
Mark Jenkins	ing i iiii			lephone		Telephone No.		License No.				
Start Date (10)	Cal	اد داریاد ما			5-5870	215-788-6040		00509				
8/13/	18			O U	ate (11)	Name of OSHA M						
	1 -		77	UU		BRISTOL EN	/IRONMENTAL,	INC				
Occupancy Status During A	Datement (Ch	eck only	one)			Street Address						
☐ Facility Closed/Vacated I ☐ Abatement Performed O	During Entire I	Period o	f Abate	ement		1123 BEAVER	STREET					
Time of Abatement:	AM-	PM/5:0	NPM-2	Irs - De	scribe I	City, State, Zip Co	de				_	
			<u> </u>			BRISTOL, PA	19007					
Scope of Work (Check all the	at apply)											_
≥3 sf or ≥3 lf		⊠R	enovat	ion			inment with Negati	ve Pressure				
≥160 sf or ≥260 lf			emoliti	on		☐ Glovebag	Procedure					
						☐ Non-Exem	npted (*) and Non-F	riable Procedu	re			
Location of			s Loca Norma						At	ateme	ent T	vne
Asbestos-Containing Mat	erial (ACM)		ed Sol		Ashas	Description of tos Containing Mate				1		_
TO BE ABATE	D ` ´		aintena todial		(i.e.	, thermal systems in	sulation.	Amount (Specify	em	Repair	nce	Enclosure
IN Facility (13)		Cus	(12)			surfacing, VAT, o	or	SF or LF)	Removal	=	Encapsulate	nso
()		Yes	No	N/A		other miscellaneou	ıs)		-		ılate	Te.
ce #7 Fios Room		-						200			(D	
ios Maintenance Room	40	10			VAT/Mas			350 SF				
	#6				VAT/Mas	stic		300 SF				
SADC Room #5					VAT/Mas	stic		250 SF				
FO Office #2					VAT/Mas	stic		300 SF		П	П	
ame of Registered Waste H			11/1/20	JDEP V		Cubic Yards of	Name of Registere				Ц	Ш
SERVICE TRANSPORT	GROUP, IN	C.		auler ID 20990		Waste	MINERVA LAN					
ty, State						Disposal Date	City, State					
NEW CASTLE, DE						TBD	WAYNESBUR	G OH				
empleted By (Print or Type)	Titl	e				Signature	LODOK					20 10
Dillan DeCaro	E	stimat	or				no Panal	On/ Date	e		, ,	2
3-41						Nuclan	De Caro/	AL 8	2-2	0-	18	

Pg. 2

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

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SEP	13	2018	Martine philosophia a missi	

Date of Notification (1)						,	III SFI	P 1:	3 25	118	
					ding Owner/Operato	r (2)				1 0.00	
	18	_		Verizon C	communications		Lucien	traces region			
Agencies Notified Type Not	ification		St	reet Addres	SS .		ASBEST			ROL	. &
☐ EPA ☐ Initial ☐ Amen	l C		1	51 Old Le	dgewood Road		l	KH M			recent corr.
EX MITCH		10014	0:4	y, State, Zi							
	dment # <u>1-8</u> jency (inclu	3/20/1	0 1		NJ 07836						
(NJAC 5:23-8) justific	ation)	iding		me of Cont			1=:				
☐ Cance	llation		1	lark Jenk	ins		Telephone N				
							215-365-5	870			
Name of Facility Where Abatement i	s Taking P	lace (3	1	ACILITY	INFORMATION	1=					
Verizon Netcong C.O.		00 (0	/			Type of Facility					
Street Address						School (K-1	2) 8 (Other than K-				
51 Old Ledgewood Road						Other (i.e.,	private and comp	12) nercial	huildi	nac	
City (5)						nomes, etc	.)	iciolai	buildi	ngs,	
Flanders, NJ 07836						Square Feet	# of Floors	T	Bldg.	Age	
County (6)			10			+-10,000	1		+-5		
Morris			Co	unty Code	(7)(STATE USE ONLY)		rior if being demo	olished)		
Name of Monitoring Firm Hired by Bu	111 0					Verizon			31		
USA Environmental Managen			ASC	M No.		ent Contractor (9					
Street Address	nent, Inc.				BRISTOL EN	IVIRONMENTA	L, INC.				
10.0000 - 0.					Street Address						
8436 Enterprise Ave					1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip C	ode		-275-2		-	
Philadelphia, PA 19153					BRISTOL, PA	19007					
Project Manager for Monitoring Firm		1	elephon		Telephone No.		License No.				
Mark Jenkins				5-5870	215-788-6040)	00509				
Start Date (10)	Scheduled	Comp	letion D	ate (11)	Name of OSHA M	lonitor		1			
8 /13 /18	ON	1 1	101	0	BRISTOL EN	VIRONMENTA	L. INC				
Occupancy Status During Abatement	(Check only	y one)			Street Address		•				
Facility Closed/Vacated During Ent	ire Period o	of Abat	ement		1123 BEAVER	R STREET					
Abatement Performed Outside of N	lormal Faci	lity Ho	urs - De	scribe	City, State, Zip Co						
Time of Abatement:AM	PIVI/5:0	IUPIN-	2:00AN	l.	BRISTOL, PA						
Scope of Work (Check all that apply)											
≥3 sf or ≥3 lf	M	enova	tion			ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf		emolit			☐ Mini-Encl ☐ Glovebag	Osure					
					☐ Non-Exer	npted (*) and Nor	n-Friable Procedu	ITO			
V		s Loca				T	100000	_		~	
Location of Asbestos-Containing Material (ACM	n Us	Norma ed Sol			Description of	1			pateme		7
TO BE ABATED	M	aintena	ance/	Asbe	stos Containing Mat , thermal systems in	erial (ACM)	Amount	Removal	Repair	Enc	Enclosure
IN Facility (13)	Cu	stodial (12)	Staff?	(surfacing, VAT,	or	(Specify SF or LF)	NOV	air	aps	losu
(13)	Yes	T	1	-	other miscellaneo	us)	Of Of Lift	1 =		Encapsulate	ire
Room #1	Tes	No	N/A							e	
			\boxtimes	VAT/Ma	stic		150 SF	×		\Box	
Construction PPM Room #13			\boxtimes	VAT/Mas	stic			-			
Hallway		In	-				200 SF				
•		-		VAT/Mas	Stic		320 SF				
lone of David											
Name of Registered Waste Hauler		10000	JDEP V		Cubic Yards of	Name of Registe	ered Landfill				ш
SERVICE TRANSPORT GROUP	, INC.	H	auler ID 20990	2020030000	Waste	MINERVA L					
City, State					Disposal Date	City, State					
NEW CASTLE, DE					TBD	WAYNESBU	RG OL				
ompleted By (Print or Type)	Title				Signature						
Dillan DeCaro	Estima	tor				De Caro	/ Or Dat		72	10	
B-41					Wellen	IN WW	4/2 8	-2	0-	18	

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

nluh# 34/4

Date of Notification (1)					T				-					
	30 /	18	_				ng Owner/Operator mmunications	(2))[[C E	5		
Agencies Notified EPA 4395	Type Notif				1	et Address Old Led	gewood Road			SF	EP '	13	20	18
DOLWD 9319	Amend				_	State, Zip			led 1	F2: OF	-1	. 0	1_0	
□ DOH \$206	☐ Emerge	ment #_	luding			anders, N			-					
(NJAC 5:23-8)	justifica	ation)	luuliig			e of Contac			ITe	ASBES	STOS	3.00	DINTE	OL
	☐ Cancell	lation			Ma	ark Jenkii	ns		170-20-20-20-20-20-20-20-20-20-20-20-20-20	215-365-	THE RESERVE AND ADDRESS OF THE PARTY OF THE	-		THE WE
					F/	CILITY	NFORMATION			-10-000-	3070	1/4		
Name of Facility Where	Abatement is	Taking	Place (3)		.01211111	II OMMATION	Type of Facility	, (4)				,	
Verizon Netcong C				: 6 -				School (K-1	2002					
Street Address								☐ Subchapter	8 (Ot	her than K	(-12)			
51 Old Ledgewood	Road						5 9	Other (i.e.,	private	e and com	merci	ial br	uildin	gs,
City (5)								homes, etc	2	-f F1		1=		
Flanders, NJ 07836	j							+-10,000	#	of Floors		- 10	ldg. A	200
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Committee of the commit	rian if i	1			+-50	
Morris						my code (/	MOTATE OSE ONET)	Current Use (P Verizon	TIOT IT	being dem	nolishe	ed)		
Name of Monitoring Firm	Hired by Bui	ilding Ow	mer (8)	1	ASCM	No	Name of Abatem		· ·					
USA Environmenta		- 57		1	TOON	NO.	E.	5.5	7.5					
Street Address		ione, mi	··		-			VIRONMENTA	L, IN	iC.				
8436 Enterprise Ave	е						Street Address 1123 BEAVE	DOTDEET						
City, State, Zip Code														
Philadelphia, PA 19	153						City, State, Zip C							
Project Manager for Moni				Tolor	hone	No	BRISTOL, PA	19007						
Mark Jenkins	tolling I mili					5-5870	Telephone No.			cense No.	•			
Start Date (10)	— т	Schedule	ad Con				215-788-6040			00509				
8 /13 /						18	Name of OSHA N	ionitor VIRONMENTA	1 181	_				
Occupancy Status During							Street Address	VIKORWENTA	L, IN	C				
☐ Facility Closed/Vacate					ent		1123 BEAVE	CTDEET						
Abatement Performed	Outside of N	lormal Fa	cility H	ours	- Des	cribe								
Time of Abatement:	AM	PM/ <u>5</u>	:00PN	1- <u>2:0</u>	<u>0</u> AM		City, State, Zip Co BRISTOL, PA							
Scope of Work (Check all	that apply)													
≥3 sf or >3 If				/atio	n		Full Cont	ainment with Neg	ative	Pressure				
		∇	Keno						100	i icosuic				
≥160 sf or ≥260 lf			Renov	lition			☐ Mini-Enc ☐ Glovebag	Procedure						
≥160 sf or ≥260 lf			Demo				☐ Glovebag				dure			
50 000			Demo	catio	n		☐ Glovebag	Procedure mpted (*) and No				Aba	ıteme	nt Ty
Location of			Is Lo Non Used S	catio mally tolely	n , by	Ashes	Glovebag Non-Exe	Procedure mpted (*) and No	n-Fria	ble Proced			ateme	- T
Location of Asbestos-Containing M	faterial (ACM FED	1)	Is Lo Non Used S Mainte	catio mally solely	n by	Asbes (i.e.,	Description of tos Containing Marthermal systems i	Procedure mpted (*) and No ferial (ACM) nsulation,	n-Fria	ble Proced				- T
Location of Asbestos-Containing N TO BE ABAT IN Facility	faterial (ACM FED	1)	Is Lo Non Used S Mainte	catio mally solely nanc	n by	Asbes (i.e.,	Description of tos Containing Marthermal systems in surfacing, VAT,	Procedure inpted (*) and No ferial (ACM) insulation, or	n-Fria	ble Proced		Ab Removal	ateme Repair	- T
Location of Asbestos-Containing M	faterial (ACM FED	1)	Is Lo Non Used S Mainte Custodi (1	catio mally colely nanc al Sta 2)	n by be/ aff?	Asbes (i.e.,	Description of tos Containing Marthermal systems i	Procedure inpted (*) and No ferial (ACM) insulation, or	n-Fria	ble Proced Amount (Specify				t Encapsulate
Location of Asbestos-Containing N TO BE ABAT IN Facility	faterial (ACM FED	(1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	Is Lo Non Used S Mainte Custodi (1	catio mally folely nancal Sta 2)	n / by ce/ aff?	Asbes (i.e.,	Description o tos Containing Mar thermal systems i surfacing, VAT, other miscellaneo	Procedure inpted (*) and No ferial (ACM) insulation, or	n-Frial	Amount (Specify F or LF)		Removal		- T
Location of Asbestos-Containing M TO BE ABAT IN Facility (13)	flaterial (ACM FED /	1)	Is Lo Non Used S Mainte Custodi (1	catio mally lolely nancal Sta 2)	by ce/ aff?	(i.e.,	Description of tos Containing Marthermal systems in surfacing, VAT, other miscellaneous tic	Procedure inpted (*) and No ferial (ACM) insulation, or	n-Fria	Amount (Specify SF or LF)	0	Removal		- T
Location of Asbestos-Containing N TO BE ABAT IN Facility (13)	flaterial (ACM FED /	(1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	Is Lo Non Used S Mainte Custodi (1 es N	catio mally folely nancal Sta 2)	by ce/ aff?	VAT/Mas	Description of tos Containing Marthermal systems in surfacing, VAT, other miscellaned	Procedure inpted (*) and No ferial (ACM) insulation, or	n-Fria	Amount (Specify SF or LF) 350 SF	0	Removal X X		- T
Location of Asbestos-Containing M TO BE ABAT IN Facility (13) se #7 Fios Room ios Maintenance Roo SADC Room #5	flaterial (ACM FED /	(1) Y	Is Lo Non Used S Mainte Custodi (1 es N	catio mally solely enance al St. 2)	n / by ce/ aff?	VAT/Mas VAT/Mas VAT/Mas	Description of tos Containing Marthermal systems is surfacing, VAT, other miscellaned stic	Procedure inpted (*) and No ferial (ACM) insulation, or	n-Frial	Amount (Specify F or LF) 350 SF 800 SF		Removal X X		- T
Location of Asbestos-Containing M TO BE ABAT IN Facility (13) se #7 Fios Room ios Maintenance Roo SADC Room #5 FO Office #2	fed (ACM	1) (Is Lo Non Used S Mainte Custodi (1 es N	catio mally colely nano al Str 2)	by ce/ aff?	VAT/Mas VAT/Mas VAT/Mas	Description of tos Containing Marthermal systems in surfacing, VAT, other miscellaned stic stic stic	Procedure inpted (*) and No ferial (ACM) insulation, or ous)	n-Frial	Amount (Specify SF or LF) 350 SF 300 SF 250 SF		Removal X		- T
Location of Asbestos-Containing M TO BE ABAT IN Facility (13) se #7 Fios Room ios Maintenance Roo SADC Room #5 FO Office #2 ame of Registered Waste	faterial (ACM FED / om #6	Y (Is Lo Non Used S Mainte Custodi (1 es N	catio mally colely colely nance al St. 2)	by ce/aff? N/A DEP Wiler ID	VAT/Mas VAT/Mas VAT/Mas VAT/Mas	Description of tos Containing Marthermal systems is surfacing, VAT, other miscellaned stic	Procedure inpted (*) and No ferial (ACM) insulation, or ous) Name of Regist	n-Frial (S	Amount (Specify SF or LF) 350 SF 300 SF 300 SF 250 SF		Removal X X		- T
Location of Asbestos-Containing M TO BE ABAT IN Facility (13) se #7 Fios Room ios Maintenance Roo SADC Room #5 FO Office #2 ame of Registered Waste SERVICE TRANSPOR	faterial (ACM FED / om #6	Y (Is Lo Non Used S Mainte Custodi (1 es N	catio mally colely colely nance al St. 2)	by ce/aff?	VAT/Mas VAT/Mas VAT/Mas VAT/Mas VAT/Mas	Description of tos Containing Marthermal systems is surfacing, VAT, other miscellaned stic stic stic stic stic stic stic stic	Procedure inpted (*) and No ferial (ACM) insulation, or or or or institution i	n-Frial (S	Amount (Specify SF or LF) 350 SF 300 SF 300 SF 250 SF		Removal X X		- T
Location of Asbestos-Containing M TO BE ABAT IN Facility (13) see #7 Fios Room ios Maintenance Roo SADC Room #5 FO Office #2 ame of Registered Waste SERVICE TRANSPOR	faterial (ACM FED / om #6	Y (Is Lo Non Used S Mainte Custodi (1 es N	catio mally colely colely nance al St. 2)	by ce/aff? N/A DEP Wiler ID	VAT/Mas VAT/Mas VAT/Mas VAT/Mas VAT/Mas	Description of tos Containing Marthermal systems in surfacing, VAT, other miscellaned stic stic stic cubic Yards of Waste Disposal Date	Procedure inpted (*) and No ferial (ACM) insulation, or ous) Name of Regist MINERVA L City, State	n-Fria	Amount (Specify For LF) 350 SF 300 SF 250 SF 250 SF Landfill		Removal X X		- T
Location of Asbestos-Containing N TO BE ABAT IN Facility (13) ce #7 Fios Room ios Maintenance Roo SADC Room #5 FO Office #2 ame of Registered Waste SERVICE TRANSPORT ty, State NEW CASTLE, DE	Material (ACM FED / om #6 Hauler RT GROUP	y, INC.	Is Lo Non Used S Mainte Custodi (1 es N	catio mally colely colely nance al St. 2)	by ce/aff? N/A DEP Wiler ID	VAT/Mas VAT/Mas VAT/Mas VAT/Mas VAT/Mas	Description of tos Containing Marthermal systems in surfacing, VAT, other miscellaned stic stic stic stic Cubic Yards of Waste Disposal Date TBD	Procedure inpted (*) and No ferial (ACM) insulation, or or or or institution i	n-Fria	Amount (Specify For LF) 350 SF 300 SF 250 SF 250 SF Landfill		Removal X X		- T
Location of Asbestos-Containing M TO BE ABAT IN Facility (13) se #7 Fios Room ios Maintenance Roo SADC Room #5 FO Office #2 ame of Registered Waste SERVICE TRANSPOR	Material (ACM FED / om #6 Hauler RT GROUP	Y (Is Lo Non Used S Mainte Custodi (1	catio mally colely colely nance al St. 2)	by ce/aff? N/A DEP Wiler ID	VAT/Mas VAT/Mas VAT/Mas VAT/Mas VAT/Mas	Description of tos Containing Marthermal systems in surfacing, VAT, other miscellaned stic stic stic cubic Yards of Waste Disposal Date	Procedure inpted (*) and No ferial (ACM) insulation, or ous) Name of Regist MINERVA L City, State WAYNESBU	3 3 2 3 dered L AND	Amount (Specify SF or LF) 350 SF 300 SF 250 SF 250 SF Landfill FILL	© © © © Oate	Removal X X		Encapsulate

D	\sim				State of	New Jersey		.	1			
rage	'd .	. N	OTIF	CATIO	ON OF AS	SBESTOS ABA	TEMENT	Chit	7			
U	•			Pursu	ant to NJ	AC 8:60 and 5:	16)	1344	1	- 17	D G	Party Company
Date of Notification (1)				Na	me of Buildi	ng Owner/Operator	(2)	HALE U		1	W	I E
7 /	30 /	18		- 1		mmunications	(-)	115			****	The second
Agencies Notified	Type Notifica	ation	•						200 00 000			
⊠ EPA	☐ Initial	ation		100000000	eet Address			ILL U SEP	, . [3 6	2018	11/18
☑ DOLWD	☐ Amended	d				gewood Road		_[
☑ DOH	Amendme	ent #		100000000000000000000000000000000000000	, State, Zip			ASBEST	ce,	· · · · ·	TEXA	-
DCA	☐ Emergen		ding		landers, N						1116	is
(NJAC 5:23-8)	justification Cancellat	50			ne of Conta	53		Telephone Nun	nber			
	Li Caricellat	1011		IV	ark Jenki	ns		215-365-58	70			
				F	ACILITY II	NFORMATION						
Name of Facility Where A		aking Pl	ace (3)				Type of Facility	(4)				
Verizon Netcong C.	0.						School (K-1	2)				
Street Address							Subchapter	8 (Other than K-1:	2)			
51 Old Ledgewood	Road						homes, etc.	private and comme	rcial	buildi	ngs,	
City (5)							Square Feet	# of Floors	1	3ldg.	۸۵۵	
Flanders, NJ 07836							+-10,000	1	1	+-5		
County (6)				Cor	unty Code (7	7)(STATE USE ONLY)	7.5	rior if being demoli	abod)		0	
Morris					5 4		Verizon	nor it being demois	sileu)			
Name of Monitoring Firm I	Hired by Buildi	ing Own	er (8)	ASCN	A No.	Name of Abateme	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1				
USA Environmental	Managemen	nt, Inc.					VIRONMENTA					
Street Address						Street Address	· · · · · · · · · · · · · · · · · · ·	L, INC.				
8436 Enterprise Ave	6					1123 BEAVER	STREET					
City, State, Zip Code						City, State, Zip Co						
Philadelphia, PA 191	153					BRISTOL, PA						
Project Manager for Monito	oring Firm		Te	ephone	. No	Telephone No.	13007	11: 1				
Mark Jenkins			1		5-5870	215-788-6040		License No.				
Start Date (10)	Sc	cheduled				Name of OSHA M	onitor	00509				
_8 / _13 /		8		1 /								
Occupancy Status During						BRISTOL EN	TRONWENTA	L, INC				
☐ Facility Closed/Vacated				mont		Street Address	222					
Abatement Performed (Outside of Non	mal Faci	lity Hor	re - De	ccribe	1123 BEAVER						
Time of Abatement:	AM	_PM/5:0	0PM-2	:00AM	Scribe	City, State, Zip Co						
Scope of Work (Check all t			-			BRISTOL, PA	19007					
	пасарріу)					M Full Conta	inmont with No-					
☐ ≥3 sf or ≥3 lf		⊠ F	enovat	ion		☐ Mini-Enclo	ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			emoliti	on		Glovebag	Procedure					
			s Loca	tion		☐ Non-Exen	npted (*) and No	n-Friable Procedur	9			
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TO BE ABATE IN Facility	ED		aintena stodial		(i.e.,	thermal systems in	sulation.	(Specify	Removal	Repair	ncal	TClo
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Construction PPM Roo	m #13							150 SF				
Hallway	// 10				VAT/Mas			200 SF	\boxtimes			
		\perp	1		VAT/Mas	tic		320 SF	\boxtimes			

ASB-41 DD 18060

Dillan DeCaro

NEW CASTLE, DE

Completed By (Print or Type)

City, State

Name of Registered Waste Hauler

SERVICE TRANSPORT GROUP, INC.

Cubic Yards of

Disposal Date

Signature

Waste

TBD

Name of Registered Landfill

MINERVA LANDFILL

WAYNESBURG, OH

City, State

NJDEP Waste

Hauler ID No.

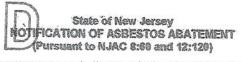
20990

Title

Estimator

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





Ch# 4373

Date of Notification (1)	8/18		e of Building Owner		(2) LC []	EGEI	\mathbb{W}	E	<u></u>
Agencies Notified Type N	Iotification	ACCRECATE THE PERSON NAMED IN	E REALT	7 -	HU				HH
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D DEP D A	ítiaí mended		State, Zip Code			SEP-1-3-	2018	-	
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IS DOH IN	mergency (including stification)	Name	e of Contact			AS ET Elephone NO	mber	B.JC	
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Name of racilly vinere Abaieme	neis taking Piace (3)				Type of Facility	5.45.00 S			
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County (6)			ly Code (7)		Current Use (Pr	ior if being demolis	hed)		-
riddles			EUSEONLY)		7	HOUSE		***********	Orango kanapaya
Name of Monitoring Firm Hired by	Building Owner (8)	AS	CM No.	1	of Abatement Co				
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Street Address					Address Box 8	i Vi			
City, State, Zip Code					tate, Zip Code	17		·····	
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Project Manager for Monitoring Fir	m	Telepi	hone No.		one No.	License N	o.		3
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Start Date (10)	Scheduled (Name	of OSHA Monitor				
9/17/18	9	30	18		WATECO	INC.			
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Facility Closed/Vacated Durin Abatement Performed Outsid	g Entire Period of Abar	tement		1,0), (3 cx	418			
Other — Describe:	e or ivormal racinty mo	urs		1	ate, Zip Code	CL NO.	1.5	190	1
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State of New Jersey

Check # 16369

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) Wendy and Joseph Macca 9/10/2018 Agencies Notified Type Notification Street Address []EPA [X] Initial Notification City, State, Zip Code []DEP []Amended Short Hills, NJ,07078 [X]DOL ASBESTOS CONTROL & Notification [X] DOH Name of Contact Telephone Number []EMERGENCY Wendy and Joseph Macca []DCA []Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Wendy and Joseph Macca []School (K-12) []Subchapter 8 (Other than K-12) Street Addres [X]Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5 County Code (7) County (6) (STATE USE ONLY) Current Use (Prior if being demolished) Short Hills Essex Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) Owner (8) N/A AZTECH MANAGEMENT, Inc. Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 License Number Project Manager for Monitoring Firm Telephone Number Telephone Number 00371 N/A (973)744-8800Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) 10 3 18 10 5 N/A 18 Month Day Day Year Year Month Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period of Abatement []Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» []other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) []Full Containment with Negative Pressure [X]Mini-Enclosure [X]>3 sf or >3 lf [X] Renovation [X] Glovebag Procedure []>160 sf or >260 lf []Demolition []Non-Friable Procedure Abatement Location Location of Description of Normally NCAPS NCHOSU REMOV Asbestos-Containing Asbestos-Containing Amount R E P Used Solely Material (ACM) (Specify Material (ACM) By Main SF or TO BE ABATED (i.e., thermal systems tenance/ In Facility insulation, surfacing, VAT, LF) Custodial Staff (12) or other miscellaneous) (13)R Yes No N/A Duct insulation 150 LF Garage X Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards Hauler ID No. 17040 of Waste 1.5 Tri - State AZTECH MANAGEMENT, INC. Disposal Date City, State City, State 10/6/18 Bronx, NY, 10474 Montclair, NJ 07042 Completed By (Print or Type) Title Signature Date 9/10/2018 Constantine Vivian President

Date of Notification (1)	NC	(Pur	Suamt to	F ASBEST NAO 3:60	OS ABA and 12 e/Opera	tor (2)		DE	C E		\mathbb{V}			
Agencies Notified Type Notification EPA		Sf 2	treet Add 41 Erie	hority of Miress Street, F							2018			
X DOL Amendment #_	uding	_ J		City, NJ 0	7310			ASBE:	LICE	COV	ITRO G	L&		
DOH justification) DCA Cancellation		1888	lday M					(201) 595-48						
11			FACILI	TY INFORM	MATION	_								
Name of Facility Where Abatement is Taking Pl Marine Operations Building	ace (3)					Type of I	Facility (4)							
Street Address APM Terminals		5				Sub Sub	er (i.e. pri	(Other than K-12) rate & commercia		ngs, h	omes,			
City (5) Elizabeth						Square F		# of Floors 2	Bld	g. Age	9			
County (6) Union			ounty Co	ode (7) SE ONLY) _		Current offices		if being demolishe	ed)					
Name of Monitoring Firm Hired by Building Own T&M Associates	ner (8)		ASCM 00145			me of Abaten ow/R/Save		actor (9))					
Street Address 11 Tindall Road					1	eet Address 5 Somerse	t Place							
City, State, Zip Code Middleton, NJ 07748						y, State, Zip (lifton, NJ 0								
Project Manager for Monitoring Firm Kevin Burns		41.00	elephon 732) 6	e No. 71-6400		lephone No. 173) 470-02	200	License No 00357).					
7/23/18	28/18	-	9/29	rate (11)	Na	ame of OSHA	Monitor							
Occupancy Status During Abatement (Check C			7-0,-	9/28/18	St	reet Address								
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	iod of A Facility	bateme Hours	ent	9	Ci	ty, State, Zip	Code							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if		enovat emoliti				Mini- Glove	Enclosure ebag Proc		Pressure					
Location of		Locatio	5,00011		Deseri	ption of	Exemples	() and Non-i had	le rio	Abate Ty	ment			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solei intenar odial S (12)	nce/	(i.e. th	s Contain ermal sy surfacin	ing Material (stems insulati g, VAT, or cellaneous)		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
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1st & 2nd floors			×	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Il composit		6,125 sf 310 sf	x	-				
boiler room			×	-		n and pack		120 sf +1/2 cy		-	-			
roof						erial & flash		4,100 sf	x	-				
Name of Registered Waste Hauler		VJDEP V	Vaste	Cubic Y		_	Registered Landf							
Waste Mangement	1.53	Hauler ID N-901	No.	of Waste	9	Grows								
City, State Newark, NJ)		Disposa	Il Date	City, Sta Morris	te ville, PA						
Completed by Sharon Hendee	Title	sident			Sig	nature	1/ /	1	ato 1	1-is	1	/		

adding 250 LF non-friable transite piping in extessor trench at adding 1.000 5 F mastic on East Roup parapet - non-friable

CK# 4622

NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NIAC 8:60 and 12:7120)

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	SEP	1	3	2018	•	

											7.00					
Date of Notification (1)	8-18			Nar	ne of Build	ing Owner/Operator	ECH CO	NTRASPETTS	g CE	NTI	ROL	8				
Agencies Notified	Type Notificati	on		Stre	eet Address	ISS RT	- 50	1.1.		NOT THE REAL PROPERTY.	Nisenano, 13	the office				
D PA	X Initial Amended			_			30			-		=				
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	☐ Emergency	(includir	ng			RELIMFIE	LO ML				1. 1	_				
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□ DCA	☐ Caricellation				GR	UCE										
				F	ACILITY IN	FORMATION										
Name of Facility Where			e (3)				Type of Facility	to the control to								
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	CAM C	174					2000		- _	50) +					
County (6)				County Code (7) (STATE Current Use (Prior if being demolished)												
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Name of Monitoring Firm	Hired by Building	Owner		ASCA	A No.	Name of Abatem	ent Contractor (9	9)								
(8)	JIA	3 					I GOM	NC								
Street Address						Street Address	o -	2								
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City, State, Zip Code						City, State, Zip C					,					
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Project Manager for Moni	toring Firm		Tele	phone	No.	Telephone No.	0 01122	License No.	י רי							
						A Committee of the Comm	9-0472	1_015	11	_	_	=				
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Facility Closed/Vacate				nent												
Abatement Performed						City, State, Zip Co	ode									
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Scope of Work (Check all	nar ahhis)						tainment with Ne	gative Pressure								
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Name of Registered Waste	Hauler			DEP V	0.70.0	of Waste	rame of Regis		ıA							
KLEMCO	INC		- 11	790	54		(W	I.C. M.U-	A			=				
City, State		2.00.01				Disposal Date	City, State	5 J								
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Project Manager for Monitoring	; Firm		Tel	ephon	e No.	Telephone No. 856 719	7-0472	License	No.	3	7 1		
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City, State MAPLE SHAM	0[W.	, T	*27-147		Disposal Date	City, State	OBINI		V.	T		
Completed By	Title		22.0			Signature (0,07	l. Da	9-1	8.	-18	5	
MICHAEL KLIME	u I	SUF	LK			- True	w/ll			/_	-17	-	_

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Date of Notification (1)			Na	me of Build	ng Owner/Operato						3
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DOH justification ☐ DCA ☐ Cancellation			Nar	ne of Conta			Telephone Num	ber			
			<u> </u>	MIK			1				_
Name of Facility Where Abatement is Tal	rina Dio	20 (2)	F.	ACILITY IN	FORMATION	Time of Facility	(4)				
RESIDEN		ce (3)		21		Type of Facility School (K-1	3.5				
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Name of Monitoring Firm Hired by Building	g Owner		ASCA	A No.		ent Contractor (9					
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Sileet Address						S. Spri	cr Aus				
City, State, Zip Code		===	-		City, State, Zip C		CE MOE	_			=
					MAPLE	SHADO	E N.J C	080	52		_
Project Manager for Monitoring Firm		Tele	ephone	No.	Telephone No.		License No.	2	,		
		<u></u>			856-779			21	1.		=
Start Date (10) Sch	eduled (7 1	-15	ate (11)	Name of OSHA N	N I A					
Occupancy Status During Abatement (Ch	eck only	(one)	-10		Street Address	id pa.				-	=
☑ Facility Closed/Vacated During Entire P			ment								
Abatement Performed Outside of Norma	al Facili	ty Hou	rs	1	City, State, Zip Co	ode					
Other - Describe:											_
Scope of Work (Check all that apply)					Full Con	tainment with Ned	ative Pressure				
≥3 sf or ≥3 lf		enovati			Mini-Enc	losure	,				
≥160 sf or ≥260 lf	⊠ D€	emolitio	n		Non-Exe	g Procedure mpted (*) and No	n-Friable Procedur	е			
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Location of	1	ormally Solely			Description of	1			Тут	e -	_
Asbestos-Containing Material (ACM) TO BE ABATED		ntenano			os Containing Mate thermal systems in		Amount (Specify	_		Ē	ш
IN Facility	1 5	Staff?		(1.6.,	surfacing, VAT,	or	SF or LF)	Remova	Repair	caps	Enclosure
(13)		(12)			other miscellaneou	us)		oval	air	Encapsulate	sure
	Yes	No	N/A							Ф	
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Name of Registered Waste Hauler			IDEP V		Cubic Yards of Waste	Name of Regis	VV 1990 199 4 199		A		
KLEMCO INC.			79	04		C.N	1. C. M.	U.	H		
City, State		7			Disposal Date-	City, State	0.00			15,175.	
MAPLE SHADE	M.	7_			I Signatura	_w00	DRINE			_	=
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no Ch		ICATION	ate of Nev OF ASB to NJAC	ESTOS	ABATE		г	54		G			W. C.	E	
Date of Notification (1) 08/27/2018				Building vich Res					U	L	SEI	+	J 1	2016	an on a distance
Agencies Notified Type Notification EPA I Initial			Street A	ddress Germa	ntown	Pike, S	Suite	120	1	ASE	BEST	OS CEN	CON	TRO	L. &
DEP Amended Amendment		_ [te, Zip Co uth Mee		A 194	62		Louisianing				-		***
				Contact iore, Jr.						ephone 0-277-					
			FACI	LITY INFO	DRMAT	ION									
Name of Facility Where Abatement is Takin Farm at intersection of Kings Hwy Street Address	and Asbu			Rd				e of Facility (4 School (K-12 Subchapter 8 Other (i.e. pr	!) 3 (Oth			huild	linas	home	20
Intersection of Kings Hwy and Asb	ury Statio	nĸ	a				×	etc.)			Croidi				
City (5) Woolwich, NJ							Squ	are Feet	#0	f Floors		В	ldg. A	ge	
County (6) Glaucester			County (Code (7) USE ONLY	7-11-12-11			rent Use (Prio cant	r if be	ing dem	olishe	d)			
Name of Monitoring Firm Hired by Building of Indoor Environment Concepts	Owner (8)		ASCM	No.		(- 10° - 10		atement Cont Environmer				vest.			
Street Address 286 Sunset Road						Street 150		ess wood Drive)						
City, State, Zip Code Barrington, NJ 08007-1439								Zip Code ton Crossin	g, P	A 1897	7				
Project Manager for Monitoring Firm Mike Menz		Telephor (609) 5	ne No. 502 - 221:	3	Teleph 267-		No. 8365		Licens 0122						
Start Date (10) 09/17/2018	irt Date (10) Scheduled							SHA Monitor							
Occupancy Status During Abatement (Chec				-		Street	Addr	ess						-	
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Aba	aten				City, S	tate,	Zip Code							
Scope of Work (Check All That Apply)											200101010				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova				×	N G	ull Containmel lini-Enclosure lovebag Proce on-Exempted	edure	J				9	
	Is Lo	ocati	on										Abate	ment	
Location of Asbestos-Containing Material (ACM)	Used :		ly by	Ashesi		scription		al (ACM)	Δ	mount	ŀ		Ту		
TO BE ABATED In Facility (13)	Maint Custod				thermal surfa	systems cing, VA niscellar	s insu T, or	lation,	(5	Specify or LF)		Remova	Repair	Encapsulate	Enclosure
	No	N/A											te		
Name of Basistan 114/ast 114		1.0	I I		0.11			1			1511				
Name of Registered Waste Hauler Service Transport Group	H	IJDEP W lauler ID W2117	No.	of Was	Yards ste		Name of R Minerva	925							
City, State New Castle, DE					Dispos TBD	sal Date		City, State Waynes		ОН		111111111111111111111111111111111111111			
Completed by Elizabeth Gosek	ent			S	Signature	1	110	7		Date		018		(I	

Worker House #3	Worker House #3	Fire-damaged Structure	Garden Fruit Building	Farm House #3	Farm House #3	Farm House #3	Worker House #1	Small Barn	Farm House	Parm House		Assbsstos-Containing Material (ACM) TO BE ABATED In Facility	1 3 CC Location of	2018 NTBOL &
											Yes	Mai Custo	z <u>s</u>	
						-					No	Used Solely by Maintenance/ Custodial Staff? (12)	ls Location Normally	
×	×	×	×	×	×	×	×	×	×	×	N/A	y by ce/ taff?	~ 5	
Transite	Window glazing	Transite exterior	Window caulk	Wall transite exterior	Pipe insulation and debris	Window glazing	Window glazing	Roof shingles	Pipe insulation	Flue packing		Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Description of	
1,200 SF	11 windows	600 SF	3 windows	2,600 SF	90 LF	45 windows	10 windows	30,415 SF	1 LF	2 SF		Amount (Specify SF or LF)		
×	×	×	×	×	×	×	×	×	×	×	- 1	Removs		
												Repair	Abate Ty	
											əte	Encapsula	Abatement Type	
											9.	Enclosur		

	Modes	-		600 mm-							Pr	int F
Jh 3049		D)	neyant	tate of New Je N OF ASBEST to NJAC 8:60	OS ABATE and 12:12	0)			E C			[
Date of Notification (1) 09/07/18 Check # 3249				of Building Owr ary (A Star i			Child Care	Genter)	SEP	13	2018	3
Agencies Notified Type Notification EPA INITIAL			Street A 21-31	Address New Milford	d Ave			AS	SBESTO	18.00	NITO	
DEP Amended Amendment				ate, Zip Code ont, NJ, 0762	28			- Name and Address of the Party	LIC	ENSI	AG	M. Co
DOH justification) DCA Cancellatior		,		of Contact				Telephone		r		
BCA Cancellation				ILITY INFORM	IATION			201-000	J-32 44			4000
Name of Facility Where Abatement is Takir A Star is Rising Early Child Care (3)					of Facility (4)					
Street Address 21-31 New Milford Ave						R	School (K-12) Subchapter 8 Other (i.e. pri	(Other than	n K-12) mercial b	uildings	s, hom	es,
City (5) Dumont							etc.) re Feet 00+	# of Floors	s	Bldg. 50+	Age	
County (6) Bergen				Code (7) USE ONLY)			ent Use (Prior	if being den	nolished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8))	ASCN N/A	M No.		of Aba Service	tement Contr es	actor (9)				
Street Address N/A					100000000000000000000000000000000000000	Addres 69th s	333					
City, State, Zip Code N/A							ip Code g, NJ, 0709	93				
Project Manager for Monitoring Firm N/A			Telepho N/A	ne No.		hone No 295-1		Licer 0107	nse No. 74			
Start Date (10) 09/17/18	Schedul 09/18/		npletion	Date (11)	Name N/A	of OSH	HA Monitor					
Occupancy Status During Abatement (Chec	k Only O	ne)				Addres	SS					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: 9am	Period of and Facility	Abaten y Hours	nent		N/A City, S N/A	State, Zi	ip Code				-	
Scope of Work (Check All That Apply)					14/74							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				Mir Glo	I Containmen ni-Enclosure ovebag Proce	dure				
		Locati Normal			22-02 00 00	1101	n-Exempted (") and Non-	Friable P	Aba	tement ype	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintena todial s (12)	ly by nce/	(i.e. ther	Description Containing Manual systems urfacing, VA per miscellar	//aterial s insula T, or		Amount (Specify SF or LF)	2	Repair	Encapsulate	Enclosure
Pailor Pages	Yes							0			ate	e)
Boiler Room	Boiler Room						n	3 LF		X		
Name of Registered Waste Hauler ri-State Transfer Associates	H	I IJDEP W lauler ID 9551		ibic Yards Waste BD		Name of Re	egistered La Entreprise					
City, State Bronx, NY							City, State Waynesb	ourg, OH				
Completed by Aichael Fajardo	Title Offic	e Emi	olovee		Signature	Y	VA-/-		Date 09/07	7/18		



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NUAC 8:60 and 5:16)

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		SĘP	1	3	2018	7	
	ASB	FST	4	201	/ ?	S 14	<u> </u>

Date of Notification (1)	10 /	18				of Building e Star Se	g Owner/Ope rvices	erator (2	2)		SEP.	1	8 7	110	-
	Type Notifica ☑ Initial	ation				Address oles Way	,			ASE	BESTO LIC		ONT SING	ROL	&
	☐ Amended					State, Zip C				D Visite Holly and Date State	Dirigina storm	and the last	embers of green	with all the training	Magazinet et al.
⊠ DOH	Amendme						NJ 08701								
DCA (NJAC 5:23-8)	☐ Emergend justification		aing			of Contac				Telephone I	Numbe	r			-
	☐ Cancellat				Yeh	uda Bra	un			917-318					
					FΔ	CII ITY IN	FORMATION)N				_			
Name of Facility Where Ab	atement is T	aking P	lace (3)	170	JILIT III	ORMATIC	J14	Type of Facility ((4)	-				
Residence				,					School (K-12						
Street Address)	9		Subchapter 8 Other (i.e., pr	Other than ivate and con		al bu	ilding	s,	
City (5)		- >>===							homes, etc.) Square Feet	# of Floors		DI/	dg. Ag	70	
Lakewood									1000 sf	1	NO.		39. A	30	
County (6)					Coun	ity Code (7)(STATE USE (ONLA	Current Use (Pri		moliehe		-		
Ocean					Journ	ity oodo (i	MOTATE GOE	JAL 1)	Residence	or il beilig del	HOHSHE	u)			
Name of Monitoring Firm F	lired by Build	lina Ow	ner (8	Т	ASCM	No	Name of Al	hateme	ent Contractor (9)						
N/A	ou by Build	mig On	101 (0		, iooiii	140.			ntracting, Inc.						
Street Address							Street Addr	WAY TALL - 200 CORN	intracting, inc.				7112011		_
									, Unit 61						
City, State, Zip Code							City, State,								
- 13/1 - 1311-1 2000									New Jersey 087	755					
Project Manager for Monito	orina Firm			Tele	phone	No	Telephone		tew deracy der	License N	0				
, , , , , , , , , , , , , , , , , , , ,	J				p		732-349			00624	0.				
Start Date (10)	S	chedule	ed Cor	nole	tion Da	te (11)	Name of O			00027		_			-
09 / _20 /						18	E.M.S.L								
Occupancy Status During	Abatement (0						Street Addr				-				-
					ment		1056 St								
☐ Abatement Performed (Outside of No	rmal Fa	cility I	Hour	s - Des		City, State,	X-118-X-14	ode			-			
Time of Abatement:	AM	PM/_		PM-		AM		8 58 http:	New Jersey 088	354					
Scope of Work (Check all t	that apply)								ainment with Neg	A-0.1	re				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Rend Dem				☐ GI		losure g Procedure mpted (*) and Nor	n-Friable Prod	cedure				
			ls L	ocat	ion							Ab	atem	ent Ty	уре
Location o Asbestos-Containing M TO BE ABAT IN Facility (13)	laterial (ACM <u>ED</u>		Used Main Custo	tena dial ((12)	ely by nce/ Staff?		Descri stos Contain , thermal sys surfacing other misc	ing Ma stems i g, VAT,	terial (ACM) insulation, or	Amount (Specify SF or LF	/	Removal	Repair	Encapsulate	Enclosure
)	'es	No	N/A										
exterior]	\boxtimes		asbesto	os siding			1000 s	f				
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Name of Registered Waste	Hauler				JDEP \	Vaste Vaste	Cubic Yard	s of	Name of Regist	tered Landfill				_]
Guardian Contractin				15515	auler II	O No.	Waste		T.R.R.F.						
City, State					20223)	3 Disposal Da	ate	City, State						
Toms River, New Jer	sey						09/21/18		Tullytown,	Pennsylva	nia				
Completed By (Print or Typ		Title		-			Signat		1	//	Date	1			
Nicholas Fernicola	,	2000000	ject N	lana	ager		Joignat	1	1	1	Pale	1	0/1	18	

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Ch348	79	NOT		47JON	OF AS	BESTOS ABAT C 8:60 and 5:1		DEGI	<u> </u>	\mathbb{V}	E	
Date of Notification (1)			Book	4.	J 65 1			SEP	13	2016	Q	Щ
09 /	10 /	18		1.		g Owner/Operator (al Government A		: 3	1/8	57	9	1
Agencies Notified	Type Notification	on			Address			ASBESTOS	S CO	VTR(DL &	<u></u>
⊠ EPA				909	Belmon	t Avenue	L	LICE	ENSI	IG.	TO STORY OF THE PARTY OF THE PA	Planton
⊠ DOLWD	Amended Amendment	ш		City, S	State, Zip (Code						
☑ DOH ☐ DCA	☐ Emergency		-	No	rth Haled	lon, NJ 08508						
(NJAC 5:23-8)	justification)	(molaam	g	Name	of Contac	t		Telephone Numb	oer			
	☐ Cancellation	1		Fra	nk Catar	nia		973-445-737	3			
				FA	CILITY IN	FORMATION						
Name of Facility Where	Abatement is Tak	ing Place	e (3)				Type of Facility (4)				
Residence							School (K-12					
Street Address	_							(Other than K-12) ivate and commer		ممناطنه		
							homes, etc.)	ivate and commen	Ciai Di	munig	J S,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Toms River							1000 sf	1		80		
County (6)				Cour	ity Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			-
Ocean							Residence					
Name of Monitoring Firm	Hired by Building	g Owner	(8)	ASCM	No.	Name of Abateme						
N/A						Guardian Co	ntracting, Inc.					
Street Address						Street Address						
0''. 0'. 1 7' 0 1						1889 Route 9						
City, State, Zip Code						City, State, Zip Co				- Warran		
Desired Message 6 14							New Jersey 08	755				
Project Manager for Mon	itoring Firm		Tele	phone	No.	Telephone No.		License No.				
Ctod Data (40)						732-349-9932		00624				
Start Date (10) 09 /21 /		eduled C				Name of OSHA M						
		09/		_ / _	18	E.M.S.L. Ana	lytical					
Occupancy Status During						Street Address						
 ☐ Facility Closed/Vacate ☐ Abatement Performed 					cribo	1056 Stelton	XI					
Time of Abatement:	2020	PM/_			AM	City, State, Zip Co						
Scope of Work (Check al	I that apply)				002-08	Piscataway, I	New Jersey 088	354				
	гинас арргуу		enovati emolitio			☐ Mini-Enc ☐ Glovebac	Procedure	ative Pressure	e			
		1	Locat						1	ateme	ent T	ype
Location			Norma ed Sole			Description o			-	_		
Asbestos-Containing TO BE ABA			aintena			stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facili	ty	Cus	todial ((12)	Staff?		surfacing, VAT,	or	SF or LF)	val	=	usc	Sure
(13)		Yes	No.	N/A		other miscellane	ous)				ate	1
exterior		П	×		ashesto	os siding		1000 sf				-
					200000			1000 51				
				in the								-
									1			<u>_</u>
Name of Registered Was	te Haules			IDEB	Monte	Cubic Vards of	Name of Decid	.,			Ш	L

Completed By (Print or Type) Nicholas Fernicola

City, State

ASB-41 JAN 13

Guardian Contracting, Inc.

Toms River, New Jersey

Waste

3

Disposal Date

09/24/18

Signature

T.R.R.F.

Tullytown, Pennsylvania

Date

City, State

Hauler ID No.

20223

Title

Project Manager

0	h7002	J	NOTIF (P	S ICATION Tursuant	ate of Nev I OF ASB to NJAC	w Versey ESTOS ABA 8:60 and 12	TE	MENT		Di	E	C	E		ש	int Fo
Date	of Notification (1)		Т	Name o	of Building	Owner/Opera	ator	(2)			11	SEP	1	3	2018	
	0/18					rivate Hon		(2)								-
	ncies Notified Type Notification			Street A							ASE	BESTO		CON)L. &.
X	EPA DEP DOL Initial Amended Amendment		_		ate, Zip Co City NJ 0					AT A TOTAL PROPERTY OF		1010	-		<u></u>	
X	DOH justification) DCA Cancellation				of Contact		•			Tele	nhone	Numbe	r			
				FAC	ILITY INFO	DRMATION										
	ne of Facility Where Abatement is Taking	g Place (3)					Type	of Facility (4))						
	ra Harry Private Home								School (K-12)						
Stre	et Address							X	Subchapter 8 Other (i.e. pri etc.)	(Other vate &	r than I comm	K-12) ercial b	uild	ings,	home	es,
City	(5) rf City NJ 08008					***************************************		Squa 100	re Feet 0 +	# of I	Floors			dg. A 0+	ge	
5-00	nty (6) ean				Code (7) USE ONLY)				ent Use (Prior use & Gara		g demo	olished))			
Nan N/	ne of Monitoring Firm Hired by Building (Owner (8)		ASC	M No.			of Aba	nc	ractor (9)					
Stre	et Address							Addres							E4	
City	State, Zip Code								ip Code Iin NJ 0809	91						
Proj	ect Manager for Monitoring Firm		Telepho	ne No.			one N 753-9		- 1	Licens 0072						
	t Date (10) 21/18	Schedul 9/28/1		npletion	Date (11)		me d		HA Monitor			**********				
Occ	upancy Status During Abatement (Chec	k Only Or	ne)			Str	eet /	Addres	ss				_			
X	Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:					City	y, St	ate, Z	ip Code							*
Scor	pe of Work (Check All That Apply)															
	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	E-market and a second	Renova Demolit				X	Mir Glo	Il Containmer ni-Enclosure ovebag Proce	dure						
			Locati						n-Exempted (and	NON-F	nable P			ment	
,	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intena todial ((12)	nce/	Asbest (i.e.	Description Containing thermal system surfacing, other misce	ng M ems VAT	aterial insula F, or	ation,	(Sp	ount ecify or LF)	Normova	Domaio	Repair	Encapsulate	Enclosure
		Yes	No	. N/A				100							ate	œ .
EX	terior Siding House and garage			X		Exterior	Sid	ing		200	0 SF	х	+	-		\vdash
Nam	e of Registered Waste Hauler		IN	JDEP W	/aste	Cubic Yard	ls		Name of Re	egistere	ed Lan	dfill	_			
	ted Containers		H	lauler ID 2459		of Waste			G.R.O.W			ennt.				
- 500	State					Disposal Da	ate		City, State							
Elm						9/28/18			Morrisvil	le PA	1960)				
	pleted by nony T Perna	9/28/18 Morrisville PA 1960 Title Signature Date President 9/10/18														

State of NJ

B& 107: 12018-167	M	Tim				s Abatement and 12:120-7	1/2	¥i			
J. J. J. J. J. J. J. J. J. J. J. J. J. J		K-X-	*	** NEW ST	ART [DATE ***	Check	# 9181			_
Date of Notification (1)	IIN	Jame of Bu	ilding Own	er/Operator (2)				7 7	ПЕ	
10 19 1/10 17 1/11 18	11.		155	lall S&S, LL				EGE			in
Agencies Notified Type Notifica	tion	treet Addre		iali 300, LL	.0						4
X EPA			ooper Av	onuo				crn 1 a	20.	10.	
DEP Initial	_ -	ity, State,		enue				SEP 13	201	10	1
X DOL X Amend			River, NJ	08753				CDECTOC O	74177		
₩ DOH	N	ame of Co	ntact					SBESTOS CO ne Numbre NS		(01.)	-
☐ DCA ☐ Cancell	ation	Tara M	elodick				732-2	44-8201	toutotherenage	- Company	Leader Co. C.
			FAC	ILITY INFORM	IOITAI	1					
Name of facility where abatement	is taking pla	ace (3)					Type of Facility				
Ocean County Mall, Sears	Buildina	& Auto (Center	(NON Sub	8)			ol (K - 12)	6		
Street Address				(120000	apter 8 (Other (Private/Comm			
1201 Hooper Avenue								/Homes, etc.	siciai	V-0.42	
							Square Feet	# of Floors	В	ldg. A	ige
City (5)	Cour	nty (6)				nty Code (7) te use only)				1)	
Toms River	Oc	ean			(Sta	tie use only)	Current Use (P Vacant build		nolisn	ea)	
Name of Monitoring Firm Hired by	Bldg. Owne	er (8)	7	ASCM No.		Name of Abatement (ing			
Pennoni Associates, Inc.			- 1			B & G Restorati	on, Inc.				
Street Address						Street Address	950				
515 Grove Street, Suite 1	IB					105 Ryerson R	oad				
City, State, Zip Code Haddon Heights, NJ 0803	35					City, State, Zip Code Lincoln Park, N	N.I 07035				
Project Manager for Monitoring Firm	n	I Ph	one Numb	er	-	Telephone Number	10 07 000	License Num	ber	_	
Alan Lloyd	Ö.		6-547-05			(973)696-6869	9	00378			
Scheduled Start Date (40)	Sched	. Completic	on Date (11	1)	_	Name of OSHA Monit	DEC. 100				
09/10/2018		31/2018				B & G Restorati	on, Inc.				
Occupancy Status During Abateme					-	Street Address 105 Ryerson Ro	and				
Facility closed/vacated during	15		ment.			City, State, Zip Code					
Abatement performed outside						City, State, Zip Code					
Describe: Work shift	7:00 am	- 3:30 pr	n ·		_	LincolnPark, NJ	07035				
Scope of Work (check all that appl	y)										A 4
➤ Demolition	Renovatio	n			F	ull Containment w/neg	ative pressure	Glovebag p	roced	ure	
>3 sf or >3 if	≥160 sf or	≥260 If				/lini-enclosure	1	X Non-friable	ргосе	dure	
Location of			used solely	/				R	R	E	TE
asbestos-containing	by mainte staff(12)	enance/cus	todial	Descripti	on of a	sbestos-containing	Amount	e m	e p	n	E n
material to be abated in facility (13)	-		T	material	(ACM)		(Specify S	10	a	a	C
abates in rasint, (10)	Yes	No	N/A					v e	ľ	p	
Exterior			X	roofing ma	ateria		110,000 sf				
throughout building			X	white floo			55,000 sf	X		口	
auto center			X	transite ex	STATE OF THE PERSON	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO	80 lf	X	Ш	닏	14
Penthouse			X	fittings wit	h enc	I cap mastic on ins	sul 80 fittings	X	닏	닏	鞰
				Varia of	Manha	TN (D. data)	150	L			
Registered Waste Hauler B & G Restoration, Inc.		EP Hauler I 19563	D# C	ubic Yards of 250 cy	vvaste	Name of Registered Tullytown I	Landfill Resource & Re	ecovery Cer	ter		
City, State Lincoln Park, NJ			Disposal D		/18	City, State Tullytown, I					
	Tiv-		- 03/10	Signature		L	/1	Date			
Completed by (Print or Type)	Title	ru/Tropei	ıror	Oignatale	(Gordana Luna		09/07/20	12		

State of NJ

Notification of Asbestos Abatement 2018-167 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: *** ON HOLD *** Check # N/A Date of Notification (1) Name of Building Owner/Operator (2) 10 |8 |/ |3 |1 |/ |1 |8 | Ocean County Mall S&S. LLC Agencies Notified Type Notification Street Address X EPA 1201 Hooper Avenue Initial ☐ DEP City, State, Zip Code ASBESTOS CONTROL & X DOL Amendment Toms River, NJ 08753 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Tara Melodick 732-244-8201 **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Ocean County Mall, Sears Building & Auto Center (NON Sub 8) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 1201 Hooper Avenue Bldg. Age Square Feet # of Floors County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Toms River Ocean Vacant building Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) Pennoni Associates, Inc. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 515 Grove Street, Suite 1B City, State, Zip Code City, State, Zip Code Haddon Heights, NJ 08035 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Alan Llovd 856-547-0505 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 09/04/2018 12/31/2018 Street Address 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-LincolnPark, NJ 07035 X Other-Describe: Work shift 7:00 am - 3:30 pm Scope of Work (check all that apply) ▼ Demolition Renovation ☐ Full Containment w/negative pressure Glovebag procedure >3 sf or >3 lf Mini-enclosure Non-friable procedure X >160 sf or >260 lf Is location normally used solely Location of Ε by maintenance/custodial e е n asbestos-containing Amount Description of asbestos-containing n m staff(12) p C material to be (Specify SF or material (ACM) 0 C a а abated in facility (13) Yes N/A No V D Exterior roofing material 110,000 sf X throughout building X 55,000 sf X white floor tile & mastic X auto center transite exhaust pipe 80 If M Penthouse fittings with end cap mastic on insul 80 fittings X X Cubic Yards of Waste | Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# B & G Restoration, Inc. 19563 250 cv Tullytown Resource & Recovery Center Disposal Date City, State Lincoln Park, NJ 09/04/18 - 12/31/18 Tullytown, PA Signature Completed by (Print or Type) Date Gordana Luna Gordana Luna Secretary/Treasurer 08/31/2018

2018-167

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

B & G proj. #: Non Sub 8 Check # 9162 Date of Notification (1) Name of Building Owner/Operator (2) 10 | 8 | / 12 | 0 | / 11 | 8 | Jeffrey M Brown Associates, LLC Agencies Notified Type Notification Street Address X EPA X Initial 2337 Filmont Avenue SEP 13 2018 T DEP City, State, Zip Code X DOL Amendment Huntington Valley, PA 19006 ASBESTOS CONTROL & X DOH Name of Contact Telephone Number Cancellation ☐ DCA Chuck O'Connell 215-938-5000 FACILITY INFORMATION Name of facility where abatement is taking place (3) Type of Facility (4) Ocean County Mall, Sears Building & Auto Center (NON Sub 8) School (K - 12) Subchapter 8 (Other than K-12) Street Address Cther (Private/Commercial 1201 Hooper Avenue Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Toms River Ocean Vacant building Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. Pennoni Associates, Inc. B & G Restoration, Inc. Street Address Street Address 515 Grove Street, Suite 1B 105 Ryerson Road City, State, Zip Code City, State, Zip Code Haddon Heights, NJ 08035 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number Alan Lloyd (973)696-6869 856-547-0505 00378 Scheduled Start Date (10) Name of OSHA Monitor Sched. Completion Date (11) B & G Restoration, Inc. 09/04/2018 12/31/2018 Street Address 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-Other-Describe: Work shift 7:00 am - 3:30 pm LincolnPark, NJ 07035 Scope of Work (check all that apply) ▼ Demolition Renovation Full Containment w/negative pressure Glovebag procedure >3 sf or >3 lf ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure is location normally used solely Location of by maintenance/custodial asbestos-containing e e Amount Description of asbestos-containing n staff(12) material to be m n p material (ACM) C (Specify SF or abated in facility (13) 0 Yes No NA LF) 2 D Exterior roofing material 110.000 sf X throughout building × white floor tile & mastic 55,000 sf X auto center transite exhaust pipe 80 lf X Penthouse fittings with end cap mastic on insul 80 fittings X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 250 cy Tullytown Resource & Recovery Center City, State Disposal Date Lincoln Park, NJ 09/04/18 - 12/31/18 Tullytown, PA Completed by (Print or Type) Signature Title Gordana Luna Secretary/Treasurer

08/20/2018

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☑ DHSS	Amendme		udina		Pat	erson, N	J 07505						
☐ DCA (NJAC 5:23-8)	justification		uding		Name	of Contac	t		Telephone Num	ber			
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Street Address							Street Address						\dashv
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Parsippany, NJ 070	54						West Caldwe						
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No.				
Vijay Patel	5			(9	73) 56	0-4900	(973) 808-16	16	00411				
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Completed By (Print or Ty	vpe)	Title					Signature	- 1 / -1		ate			
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Project Manager for Monits			Tak	eneng	Ma	West Caldwa	II, NJ 01	100					Į
Vijay Patel			1	50	10-490D	Telephone No. (973) 505-161	60		License No),			
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Nick Petrovski	Pi	'eslde	nt			-	16		Ens.	7-	20	1-/	2
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X DEP X DOL	Amended Amendment #		City, S Sout	tate, Zip Co h Plainfie	ode eld,NJ,	07080							
DOH DCA	Emergency (inc justification) Cancellation	luaing		of Contact nas Wigg	jins				Telephon 908-21	e Numbe 7-2394	r		
Name of Facility Manager Alex			FAC	ILITY INFO	ORMAT	ION							_
Name of Facility Where Abates Middle School	ment is Taking P	ace (3)						Facility (4)					
Street Address 2201 Plainfield Ave							Su	ner (i.e. priv	(Other than		uildings	, hom	ies,
City (5) South Plainfield							Square N/A		# of Floor N/A	s	Bldg. N/A	Age	
County (6) Middlesex				Code (7) USE ONLY)		Current	Use (Prior i	if being der	molished)			
Name of Monitoring Firm Hired Omega Environmental	by Building Own	ner (8)	ASC	M No.		Name EHW	of Abaten V ABATI	nent Contra	actor (9) LC				
Street Address 208 Huyler Street							Address ranklin	Street				7,000	
City, State, Zip Code South Hackensack						City, S Pate	tate, Zip (rson, NJ	Code 1,07524					
Project Manager for Monitoring Geiser Fajardo	Firm		Telepho 201-7	one No. 24-8124			one No. 333-514	14	Licer 012	nse No. 74			
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Agencies Notified Type Notification EPA Initial		Street /	Address				AS		OS C CENS	-	1.1.6.175.7
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Name of Facility Where Abatement is Takin Private House	g Place (3)	FAC	ILITY INFOR	MATION	Туре	of Facility (4)	*******		_	
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County (6) Sussex			Code (7) USE ONLY)		Curre	nt Use (Prior	I if being demolis JSE				
Name of Monitoring Firm Hired by Building (Owner (8)	ASCI	M No.		of Aba	tement Cont	ractor (9)				
Street Address					Addres	ss n Street			-		
City, State, Zip Code		~		City, S	State, Z	ip Code NJ,07524					
Project Manager for Monitoring Firm		Telepho	one No. '24-8124	Teleph	one No	D.	License N 01274	lo.		-	
Start Date (10) 09/17/2018	Scheduled 0	Completion		Name	of OSH	A Monitor TEMENT					
Occupancy Status During Abatement (Chec					Addres					-	_
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Abar al Facility Ho	tement		City, S	tate, Zi	n Street p Code NJ,07524					
Scope of Work (Check All That Apply)				· · · · · · ·	713011,	140,07524					-
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City, State PATERSON,NJ,07524				isposal Date BD		City, State BRONX,	NY,				\neg
Completed by Victor Espíritu	Title Project	Manager		Signature	0/	is Mi	Da Da	te 9/07/2	2018		\dashv

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Project Manager	Address State, Zip Code t Manager for Monitoring Firm Date (10)								es Abatem		(-)					
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City, State, Zip Code	t Manager for Monitoring Firm Pate (10) Sch								lidland Ave	€.						
B S N SNCSSESWAY	W ON SECOND								Zip Code Brook, NJ (7663						
Project Manager for Monitoring	Firm			Telepho	one No.		Teleph			,, 000	_	nse N	No.		-	
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9/11/18		Schedu 9/14/1		npletion	Date (11)		Name o	of OS	SHA Monitor							
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cope of Work (Check All That A	Apply)									-						
≥3 sf or ≥3 If ≥160 sf or ≥260 If		×	Renova Demolit	ition ion			×	Mi	ull Containme ini-Enclosure ovebag Proc on-Exempted	edure						
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Check # 25682

Print Form

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Date of Notification (1) 9/4/2018			Name	of Building Owner		r (2) Lindsay		Ur		9		9 /	
Agencies Notified Type Notificati	ion		Street	Address			_		01	n	1 0	20	40
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DEP Amended Amended			City, S	tate, Zip Code	Highs	town, NJ 0852	0			ABINO 1	-		mara resa
□ Emergen iustification	cy (including]	Name	of Contact	riigilo	10001, 140 0002	100	lenhon	ASBES				ROL
DCA Cancellat				Michael Linds	ay		1000				7.0	oranhuwing.	
Name of Facility Where Abatement is Ta	king Place (3)	FAC	ILITY INFORMA	TION	Type of Facility	(4)						
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Street Address						Subchapte Other (i.e. etc.)	r 8 (Oth	ner than & comr	n K-12) mercial	build	ings,	hom	es,
City (5) Highstown, NJ 0	8520					Square Feet 3500	# 0	of Floors	S	BI	dg. A		
County (6) Mercer				Code (7) USE ONLY)		Current Use (Pri	or if be	774	nolishe	d)	30	- /-	
Name of Monitoring Firm Hired by Buildir	ng Owner (8)		M No.	Name	of Abatement Cor	ntractor	- (0)					
MECS					Stev	ens Environme	ental S	Servic	es, In	C.			
Street Address PO Box 341						Address							
City, State, Zip Code						Box 322 State, Zip Code			-				
Chesterfield, NJ 08515						itown, NJ 0850)1						
Project Manager for Monitoring Firm Bill Weisgarber			Telepho	one No. 298-4070		none No. 259-9688			se No.)			
Start Date (10)	Schedul	ed Cor		Date (11)	1 3325	of OSHA Monitor		0049	93				
9/20/2018		9/28	/2018		MEC								
Occupancy Status During Abatement (Ch						Address Box 341							
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Scope of Work (Check All That Apply)					Onice	stornoid, 140 00	010						
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Name of Registered Waste Hauler Stevens Environmental Services		1.000	JDEP W auler ID 18292	No. of Wa	Yards ste 2 cu	Name of F Fairless			ndfill				
City, State Allentown, NJ 08501			.0202	Dispo	sal Date 28/18	City, State		<u> </u>	V. 12-12				
Completed by Mahlon E. Stevens	Title	rojec	t Mana	S	Signature	/ 4 /	7	·	Date 9/	11/1	8		_

Date of Notification (1)					St	tate of Ne	w Jerse	v				D)-	E (int¶o
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City, State, Zip Code Name of Facility Where Abatement is Taking Place (3) Street Address Asamander Hired by Building Owner (8) Asc No. Name of Abatement 15 (17) (18) (19) (19) (19) (19) (19) (19) (19) (19							t					A:	SBES	TOS	CON	VTRO IG
Substitution Cancellation Name of Contact Benjamin Olagadeyo Size Telephone Number Size S	× EPA × X	Amended			City, Sta	ate, Zip Co	ode					The second secon		-	a-Main actar	The Child Common
Manne of Facility Where Abatement is Taking Place (3) Student Center		Emergency	(including	_			7102				T-1	h N				
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	(* € 0000 €		Yes	No	N/A				,				a	7	late	Ire
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SMAC Corp. Hauler ID No. 18590 of Waste 3 Grows Landfill	SMAC Corp.			100		No.	100000000000000000000000000000000000000	ste		Grows La	andfill					-
City, State Disposal Date City, State Saddle Brook, NJ 07663 Disposal Date Morrisville, PA										1	e, PA					
Completed by Borce Gjorsoski Title President Signature Boxue Gprusuf 09/11/2018			10000000	ident	<u> </u>					Gran	en	0 III 32376		2018		

B & G proj. #: 2018-182

State of NJ Notification of Aspestds Abatement (Pursuant to NAC 8 60-7 and 12:120-7)

B / ///				<u> </u>		Ц		Chec	k # 9185	5			_
Date of Notification (1)		Nam	ne of Bui	ilding Ow	ner/Operator (2	2)			-	2 1	77.77		putnus
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□ DCA □ C		<u>M</u>	laralyn	Ward						unonges	TOTAL MARK		
				FAC	CILITY INFORM	1ATIC	N	1					
Name of facility where abate	ement is tak	ing place	(3)					Type of Facility					
Maralyn West								1 =	ol (K - 12	9)			
Street Address									hapter 8 (Private/0				
								Bldgs	./Homes,	etc.	Ciciai		
City (5)	- I	County (6	6)			Co	ounty Code (7)	Square Feet	# of Floo	ors	E	Bldg. A	.ge
East Orange		Essex					rate use only)	Current Use (F	Prior if bei	na der	nolist	red)	
Name of Monitoring Firm Hir	red by Rida					L.,		Residential					
reame or Monitoring 1 mm Fin	ed by blug.	Owner (8))		ASCM No.		Name of Abatement						
Street Address					- 11/a	_	B & G Restora	tion, Inc.					
September 1990 Septem							105 Ryerson F	Road					
City, State, Zip Code						-	City, State, Zip Code		- Real Property lies	-			
5							Lincoln Park,	NJ 07035					
Project Manager for Monitorin	ig Firm		Pho	ne Numb	er		Telephone Number (973)696-686	20	License		oer		
Scheduled Start Date (10)	16	Sahad Ca		D-1- //			Name of OSHA Mon		10	378			
09/21/2018		Sched. Cor		Date (1	1)		B & G Restora						
Occupancy Status During Aba	tomont (Ch	09/22/2					Street Address						
Facility closed/vacated of				ent			105 Ryerson R						10
Abatement performed or	utside of no	rmal facilit	y hours-				City, State, Zip Code						
Describe:						-	LincolnPark, N.	J 07035					
Scope of Work (check all that	t apply)			With the second								-5	-
Demolition	X Reno	ovation				□ F	full Containment w/neg	gative pressure	 Glovei	aa pr	ocedi	ıre	
	≥160	sf or <u>≥</u> 260	lf			X	Mini-enclosure]	☐ Non-fr				
Location of		cation norr								R	R	E	Γ_
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Registered Waste Hauler													
B & G Restoration, Inc.		NJDEP Ha 1956:			ibic Yards of W 1/2	aste	Name of Registered Grand Cer	Landfill htral Landfill					
City, State Lincoln Park, NJ			Dis	sposal Da 09/22	ate 2/2018		City, State Pen Argyle						
Completed by (Print or Type)	Title			T	Signature	_	1	, . / \	Date			¥	
Gordana Luna	Secr	etary/Tre	easure	r			Gordana Luna		09/11	/201	3		

mille		N	L	CATION	TO ASEE	Jerse STOS	ABATEN	MENT		Dr					
011191			(Pi	ursuant 1	to NJAC 8	:60 and	d 12:120)				377 - 776		10	
Date of Notification (1)	118			Name of	Building (Owner/C VAR	Operator E	(2) :QU	ITIE			1 0	20	10	
Agencies Notified				Street Ad	idress 49	49	74	STRE	567	15.	ASBESTO	SCC	ONTE	ROL 8	À
EPA DEP			r	City Sta	te Zin Co	de							110		
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Name of Facility Where	Abatement is Taking	Place (3)	FAGI	LITY INFO	RMATI	ION	Type	of Facility (4)			-		-
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Street Address	76 570	EFT		led transcript					Subchapter	8 (Othe			lings,	home	s,
City (5)				-			\dashv	Squar	e Feet		Floors	В	-	_	
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Notification (F) Date of Notification (F) Personant to MAIAGE 809 and 121:20) Name of Building Owner/Operator (2) STAL WART EQUITIES Agencies Notification Street Address Told Amended Amendment 5 Amended Amendment 5 DOH Cancellation Cancellation FACILITY INFORMATION Name of Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment is Taking Pisco (3) A by Maria (Facility Where Absterment Control (4) Street Address To County (6) BE County (7) BE County (8) Schoolapter (6) Street Address St															
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Date of Notification (P) Security To Baseles of the Safet Safe Safet															
Date of Notification (P) W Name of Building Owner(Operator (2) Check # ### Pursuant to NIAD & 809 and 12:1200															
Date of Notification (P) Proper Manager for Monitoring Film Hired by Sulfding Owner (B) Name of Facility (A) Name of Monitoring Film Hired by Sulfding Owner (B) Name of Monitoring Film Telephone No. Name of OshA Monitor Owner (B) Non-Examples in Monitoring Film Protocolistics Sulfired (B) Non-Examples in Monitoring Film Non-Examples (C) and Non-Fabble Procedure Owner (B) Non-Examples in Monitoring Film Non-Examples in Monitoring Film Non-Examples in Monitoring Film Non-Example															
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		Pres	ident				1/2	11/2	for lit			9/1	0/1	18	E

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to AUAC 8 60 and 5:16)

Chr# 3434

Date of Notification (1)				NI		MIN	(6)							
	18					ng Owner/ Opera tor of de Nemours	(2)		7	E C			V	7 [
Agencies Notified	fication			Stree	t Address	equake Road								10
—	117-157				State, Zip					_SE	3	13	20	19
	/				rlin, NJ 0				i					
		uding			of Contac			Teler	honeA	RRES	TO	3 00	MILE	301.
					hol Rein	W 1000		73:	2-613-	2400	JOE	ENSI	NG	
				FA	CILITY IN	NFORMATION								
Name of Facility Where Abatement	s Taking F	Place	(3)				Type of Facility (4	4)				-	-70.00	
DuPont Parlin Facility - Cyre	l Area						School (K-12)	2.5						
Street Address							Subchapter 8	(Other	than K	(-12)				
250 Cheesequake Road							Other (i.e., pri homes, etc.)	ivate a	na com	mercia	I bu	ilaing	S,	
City (5)	gencies Notified EPA		03100				Square Feet	# of	Floors		Blo	dg. Ag	38	
Parlin														
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if be	ing den	nolisher	d)			
Middlesex														
	uilding Ow	ner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)	2024024						
						BRISTOL EN	VIRONMENTAL	., INC						
						Street Address								
						1123 BEAVE	R STREET							
						City, State, Zip Co								
						BRISTOL, PA	19007							
			1000	phone		Telephone No.		1000000	nse No	*				
	Ta				-8800	215-788-6040		00)509					
December of State and Stat			50			Name of OSHA M								
				_ / .	10		VIRONMENTAL	., INC.	9					
Land 19 19 19 19 19 19 19 19						Street Address								
					cribe	1123 BEAVE								
Time of Abatement: 7:00AM-3:3	0PM/	PN	Λ- <u></u>	AM	scribe	City, State, Zip Co								
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 ≥3 sf or ≥3 if ≥160 sf or ≥260 if 			novati			☐ Full Cont☐ Mini-Enc☐ Gloveba	tainment with Nega losure	ative P	ressure					
						☐ Non-Exe	mpted (*) and Non	-Friabl	e Proce	edure				
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TO BE ABATED	- A		ntena			e., thermal systems	insulation,	1000	pecify	2	Remova	Repair	Encapsulate	Enclosure
		Custo	odial ((12)	stan?		surfacing, VAT, other miscellane		SF	or LF)	2	0	,	sula	sure
(10)	Y	r'es	No	N/A		other miscellane	ous)						ite	
Cyrel Area		5	\boxtimes		Pipe In:	sulation		3	0 LF	[X	\Box	П	П
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News of Dealth 1147						L								
The state of the s			7528	JDEP \ auler II		Cubic Yards of Waste	Name of Registe		andfill			202707	***	
			.,	18706		1 Cu Yd	Fairless Lar	ndfill						
City, State						Disposal Date	City, State		25					
Bristol, PA						9/24/18	Fairless Hill	ls, PA	19047	7				
Completed By (Print or Type)	Title					Signature	0 .	10	T	Date	No.			
Gino Pizzigoni	Esti	mate	or			Duna	Pinnami	10	m	01.	-1.	1 1	0	

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Date of Notification (1)	10 /	18	,	- Co		e of Buildi I. duPont		ner/Operator	r (2)	Tr	n E	C	E	П	$\overline{\mathbb{W}}$	PI
								vemours	-0.0		111	リー	<u> </u>	<u>L</u>	U	\mathbb{V}	
Agencies Notified EPA	Type Notific	cation				et Address O Chees		ke Road	///			7)					
□ DOLWD	☐ Amende	d				State, Zip				- War	111	LI.	SEP	1	3 21	018	
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DCA			rcludin	g	_	e of Conta		,			T	ASE	15577	100	ONIT	DOI	
(NOAC 3.25-0)	The state of the s				355.622.022	chol Reir	-1000-01	E			16	lephone 732=613	Numi	ENS	ING	HUL	St.
									-			32-013	5-240	- AND SHARE	THE PERSON		
Name of Facility Where A	hatement is	Takin	a Place	2 (2)		CILITY	INFOR	RMATION	1.	T	7.11						
I .			-	= (3)					1.8	Type of Facility							
	rty - Admin	Dun	unig							☐ School (K-12 ☐ Subchapter		her than	K-12)				
250 Cheesequake R	Road								Ì	Other (i.e., p homes, etc.)	rivate	e and co	mmer	cial b	uildin	gs,	
City (5)		10-10-10-10-							1	Square Feet	#	of Floor	s	BI	dg. A	ge	
37 37 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5																	
County (6) Middlesex				1111-111	Cou	inty Code ((7)(STA	TE USE ONLY,) (Current Use (Pr	ior if	being de	emolis	ned)			
Name of Monitoring Firm	Hired by Buil	ding (Owner	(8)	ASCN	l No.	Nar	me of Abaten	nen	nt Contractor (9)							
Cardno ATC							E	BRISTOL EI	NV	IRONMENTA	L, IN	IC.					
Street Address							Stre	eet Address									
3 Terri Lane							1	123 BEAVE	ER	STREET							
City, State, Zip Code			Menseem				City	, State, Zip (Cod	le							
							В	BRISTOL, P	A 1	19007							
	toring Firm			Te	ephone	No.	Tele	ephone No.			Li	icense N	lo.				
						6-8800	2	15-788-604	10			00509					
						ate (11)	Nar	me of OSHA	Mo	nitor							
					6_ /	18	В	RISTOL EN	NVI	IRONMENTA	L, IN	C.					
	gencies Notified ☐ EPA ☐ DOLWD ☐ Amended ☐ Amended ☐ Amended ☐ Amended ☐ Amended ☐ Amended ☐ Cancellation ☐ C						Stre	eet Address									
☐ Facility Closed/Vacated	d During Enti	re Pe	riod of	Abate	ement		1	123 BEAVE	ΞR	STREET							
Time of Abatement: 7:	Outside of N	ormal PM/	Facilit	у Ноι М₌	ırs - De ΔΜ	scribe	City	, State, Zip C	Cod	e							
							В	RISTOL, P.	A 1	19007							
			-							inment with Neg	ative	Pressu	re				
△ ≥3 st or ≥3 if □ ≥160 sf or >260 if			⊠ Re	nova				☐ Mini-En ☐ Gloveba									
					011			☐ Non-Ex	em	pted (*) and No	n-Fria	able Pro	cedure)			
V (4)	19.5	100		Loca										1	atem	ent T	vpe
		# \		Norma	ally ely by		20 63	Description		1				-			
		1)	Ma	inten	ance/	Asbe	estos (e. the	Containing M rmal systems	late	rial (ACM)		Amount (Specify		Remova	Repair	nca	nclc
	У		Cus		Staff?	\	S	urfacing, VA7	T, o	r		SF or LF		oval	=	Encapsulate	Enclosure
(13)			Yes	(12) No	N/A	-	oth	ner miscellane	eou	ıs)						late	Ф
Basement Secured Ar	ea	-	l es	No	IN/A	Pipe In	sulat	ion				180 LF			П	П	П
			П] [
	eet Address B Terri Lane y, State, Zip Code Burlington, NJ 08016 Dject Manager for Monitoring Firm John Lutz Int Date (10) 9 / 25 / 18 Cupancy Status During Abatement (CI Facility Closed/Vacated During Entire Abatement Performed Outside of Non Time of Abatement: 7:00AM-3:30PM Dippe of Work (Check all that apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Sement Secured Area The of Registered Waste Hauler ristol Environmental Inc. State ristol, PA Inpleted By (Print or Type)			_	+	-			_						Ш	Ц	Ш
	y, State, Zip Code Burlington, NJ 08016 Diject Manager for Monitoring Firm John Lutz Int Date (10) 9 / 25 / 18 Cupancy Status During Abatement (Chescility Closed/Vacated During Entire Abatement Performed Outside of Norr Time of Abatement: 7:00AM-3:30PM Ope of Work (Check all that apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Sement Secured Area The of Registered Waste Hauler ristol Environmental Inc. State ristol, PA Inpleted By (Print or Type)		Ц														
	Burlington, NJ 08016 Dect Manager for Monitoring Firm John Lutz Int Date (10) 9 / 25 / 18 Decipancy Status During Abatement (CF Facility Closed/Vacated During Entire Abatement Performed Outside of Non Time of Abatement: 7:00AM-3:30PM Depe of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Sement Secured Area The of Registered Waste Hauler ristol Environmental Inc. State Fistol, PA Inpleted By (Print or Type)																
				1000	NJDEP :		1977	ic Yards of		Name of Regist	tered	Landfill					
Bristol Environment	DOLWD DOLWD			1	1870		Was	ste Cu Yd		Fairless La	ndfi	II					
City, State		77.0479	70-				-	osal Date		City, State							
Bristol, PA							9/	26/18		Fairless Hil	lls, F	A 1904	17				
Completed By (Print or Typ	oe)	Title					1	Signature			- XX		Date				
Gino Pizzigoni		Es	stimat	or					P	unggen	:/	gr			1-1	8	

CK 13D	Notification (1) 09 / 10 / 18 es Notified			FICA (Pu	IIION rsuar	nt to NJA	C 8	160 and 5:1	6)		E C	***	E 1	30	7
	10 /	10						mer/Operator (heal bank	UL		. 0	LU	10
						7	Urb	an Renewal	, LLC	-	TO BE O		-	77 - 7 3 - 7 4	-
Agencies Notified EPA		ation				Address				AC	BES	rus ICF	NSI	NIF	OL.
⊠ DOLWD	The state of the s	d						Suite 400		personal entrancement of the second	er encer-		10 F . 15-		MANAGEM TO
⊠ DOH		700				State, Zip C									
☐ DCA			uding		100000	omfield,		07003							
(NJAC 5:23-8)						of Contac				Telephone N					
	L Caricenal	uon			-2-00	rren Spra				908-670-	5711				
Name of English Where A	hatamant in 7	F-1-1- F	21	(0)	FA	CILITY IN	FOF	RMATION							
	batement is i	aking F	lace	(3)					Type of Facility						
Street Address									School (K-12 Subchapter 8		-12\				
	a politica	•							Other (i.e., pr	ivate and com	mercia	l bu	ilding	s,	
City (5)	a- Bullaing	ь							homes, etc.)						
Plainfield		. ,							Square Feet	# of Floors		Blo	ig. A	ge	
County (6)					Cour	nty Code (7)(STA	TE USE ONLY)	Current Use (Pri	or if being dem	nolishe	d)			
Union															
		ding Ow	mer (8	3) /	ASCM	No.	Nar	me of Abateme	ent Contractor (9)						
Bio Terra Solutions							A	LL PRO MA	NAGEMENT LI	LC					
Street Address							Stre	eet Address							
P.O. Box 1224							2	7 Outwater	Lane						
City, State, Zip Code							City	, State, Zip Co	ode						
Union, NJ				500			G	Sarfield, NJ	07026						
	toring Firm			Tele	ohone	No.	Tele	ephone No.		License No					
Rick Eustaquio						-3762	9	73-928-4888		1188					
Start Date (10)						Control of the Contro	Nar	me of OSHA M	onitor						
					_ / -	18	A	LL PRO MA	NAGEMENT LI	_C					
					9/1		Stre	eet Address							
							100	7 Outwater I							
Time of Abatement:	AM-	ormai Fa PM/	acility	PM-	s - Des	Cribe AM		, State, Zip Co							
				-· ··· ·			G	arfield, NJ	07026						
Scope of Work (Check all	that apply)							□ Full Conf	ainment with Neg	ativo Droceuro					
$\boxtimes \ge 3$ sf or ≥ 3 If $\Box \ge 160$ sf or ≥ 260 If		-		novatio nolitio			45	☐ Mini-Enc☒ Glovebag	losure						
			ls	Locati	on			_ HOH-LAG	p.cod () and Noi	. 1 Habie Flock	Judie	Δh	tom	ent T	mc
	5270			ormal				Description o			-				-
		1)		i Sole				Containing Ma mal systems		Amount		em	Repair	nca	ncl
			Custo	odial S	Staff?	(1.6		urfacing, VAT,		(Specify SF or LF)		Remova	¥i	Encapsulate	Enclosure
(13)		-	Von T	(12)	NIA	-		her miscellane		5		_		ilate	e.
1 st Floor		_	Yes	No	N/A	Pipe Ins	sulat	tion- Wrap a	nd Cut	150 LF		\boxtimes			П
		_	5								_				
		_									_			Ш	П
		1													
Name of Registered Wast	e Hauler			1000	JDEP 1		100000000000000000000000000000000000000	oic Yards of	Name of Regis			20			
ATC/ Century Waste	, LLC			S	auler II W-243	O No. 10/32797	Wa:	ste s Needed	Minerva Enter		NS No	rth	Land	till/	
City, State								posal Date	City, State						
Shirley, NY/ Elizabet	th, NJ						Т	BD	Waynesbu	rg, OH/ Morr	isvill	e, P	Α		
Completed By (Print or Ty	rpe)	Title						Signature	1 2	\$2.	Date	-			
Allen Monchik		Pro	ject	Mana	ger				Monchik				0		
		0001000			S			1 cour	innume		9/1	U/T	Q		

D&S Proj. Date of Notification 0 9 / 0 7 Agencies Notified EPA DEP		State of NJ Otification of Asbestos Abatement (Pursuant to NJAO 8:60 and 12:120) Name of Building Owner/Operator (2) tom and laura carroll Street Address						SEP 13 2018 ASBESTOS CONTROL &							
☑ DOL	Amendment # Emergency (including	$-\ $	City, State, Zip Code Upper Montclair, NJ 07043 Name of Contact						1						
☐ DCA	justification) [[rmoll		Telephor	ne Numbe	er.						
	☐ Cancellatio	n	tom and laura carroll FACILITY INFORMATION												
Name of facility wh	nere ahatement	ie takina n	lace (3)	FAC	JILITY INFORM	IATIO	N	_	Type of Easility	(A)					
		is taking p	piace (3)						Type of Facility (4) School (K - 12)						
Street Address								Subchapter 8 (Other than K-12) Other (Private/Commercial							
oli oct / tauloss							Other Bldgs	(Private/C /Homes,	etc.	rcial					
City (5)	I Cou	County (6)					-	Square Feet	# of Floo	ors	Bl	dg. Ag	ge		
S.I, (6)							unty Code (7) ate use only)		Current Use (Prior if being demolished)						
Upper Montela		essex									104111010				
Name of Monitoring	g Firm Hirea by	Blag. Owr	ner (8)		ASCM No.		Name of Abatem								
Street Address						-	D & S RESTORATION, INC. Street Address								
							20 California Ave.								
City, State, Zip Code							City, State, Zip Code								
Project Manager for Monitoring Firm Phone Number						_	Paterson, NJ 07503								
r roject Manager for	1	Phone Number				Telephone Number									
Start Date (10)	Sche	hed. Completion Date (11)				Name of OSHA Monitor									
09/19/18						_D & S Restoration, Inc.									
Occupancy Status D		/08/18 ck only one)				Street Address 20 California Avenue									
	of normal	period of abatement. nal facility hours-				City, State, Zip Co	ode								
Scope of Work (che									ull Containment w	/negative	press	ure			
$\ge 3 \text{ sf or } > 3 \text{ lf}$ $ \ge 160 \text{ sf or } \ge 26 $	Renovati Demolitio					Mini-enclosure Glovebag procedure Non-Exempted (*) and Non-friable procedure									
Location of asbestos-continuaterial (acm			on normally enance/cus		Description		of asbestos-containing		Amount		Rem	R e p	E n	E n	
abated in facil		Yes	No	N/A	material ((ACM)			(Specify S LF)	or or	o v	a i	a p	L	
BASEMENT					PIPE INSU	LAT	ION		151 ft		e				
					1						井	井	井		
Registered Waste Ha		NJD	EP Hauler I	D# C	Lubic Yards of V	Vaste	Name of Registe	red L	andfill		. 니	Ш	Ш	Ш	
D & S RESTORA		506		l yd		TULLYTOWN, RESOURCE RECOVERY									
City, State PATERSON, NJ			Disposal D 09/19/1			City, State TULLYTOWN, PA									
Completed by (Print BOGDAN JOLD	Title PRESID	DENT		Signature	1	, 1		Date 09/07/	/2018						