Date of Notification (1)					Name	of Buildin	a Ow	ner/Operator (2)	E CO E	43		17	
9 / _	19 /	16			27.000000000	y of Cam	200		" (D),	E G E I	11_1			
Agencies Notified EPA	Type Notifica	ation				Address	20			SEP 1 2	016		الل	
□ DOLWD	☐ Amended	d			100	State, Zip C	5769			7,710				1
□ DOH	Amendm					mden, NJ		01			ITD/	71 8		
DCA	⊠ Emergen	cy (incl	uding			of Contac	(20)	01		ASBESTOS CON	0 1 LV) L U		1
(NJAC 5:23-8)	justificati				THE P. P. LEWIS CO., LANSING, MICH.	nn Bond	ı			Telephone Numb	er			
					FA	CILITY IN	IFOF	RMATION						
Name of Facility Where A	Abatement is 7	Taking I	Place	(3)					Type of Facility	/ (4)				
WILLIAMS STREET	RESIDENC	E							School (K-1					
Street Address		200								8 (Other than K-12)				
									homes, etc	private and commerc	ial bu	ilding	JS,	
City (5)				-					Square Feet	# of Floors	BI	dg. A	ae	
Camden									varies	varies		50+	90	
County (6)					Cour	nty Code (7	VSTA	TE USE ONLY)		Prior if being demolish	W.			
CAMDEN					Oour	ity code (i	ДОТА	TE OOL ONET		DEEMED UNSAF				
Name of Monitoring Firm	Hired by Ruile	dina Ov	vner (8)	ASCM	No	Mar	me of Abatama	ent Contractor (9					
Health and Safety S		anig Ov	viici (i	0,	117	140.			nvironmental	,				
Street Address	oci vices				111		-	eet Address	ilvironnentai	Systems				
PO Box 365							100000		laham Dika (2				
			-016						lehem Pike - S	Suite 60				
City, State, Zip Code					100000	, State, Zip Co								
Berlin, NJ 08009		1				pring House	e, PA 194//	Take to the						
Project Manager for Moni	toring Firm			0.000	phone		100	ephone No.		License No.				
Jim Proctor	12			100		39-2432	100	15 542 7000		00847				
Start Date (10)					tion Da			me of OSHA M	Ionitor					
_9 / _20 /					1_/	16_	C	ES		- 2				
Occupancy Status During			970				Stre	eet Address						
☐ Facility Closed/Vacate							1	121 N Bethle	ehem Pike -Si	uite 60				
Abatement Performed Time of Abatement: 7						cribe	City	, State, Zip Co	ode					
		101/					S	pring House	e, PA 19477					
Scope of Work (Check all	that apply)							П г.// C/						
≥3 sf or ≥3 lf		Г	7 Rer	novat	ion			☐ Mini-Enc		egative Pressure				
≥160 sf or ≥260 lf		D	☑ Der					☐ Glovebag	g Procedure					
									mpted (*) and N	on-Friable Procedure	-			
1				Loca lorma							Ab	atem	ent T	ype
Location Asbestos-Containing N		n			ely by	Ashe	etne (Description o Containing Ma		Amount	Re	Re	En	En
TO BE ABA	TED	,			ince/	(i.e	., the	rmal systems	insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facilit (13)	У		Cust	odiai (12)	Staff?			urfacing, VAT, ner miscellane		SF or LF)	/al		Encapsulate	ure
(13)			Yes	No	N/A		OU	ier miscellane	ous)				ite	
SEE ATTACHED			SEE AT	TAC	HED		200 YD per res		П	П				
												П	П	
		1	7											П
			5											
Name of Registered Wast	e Hauler	- 1	_		JDEP V	Naste	Cub	oic Yards of	Name of Reg	l istered Landfill			ш	
Waste Management				10000	lauler II 17273	O No.	Was		GROWS	Stored Earlann				
City, State					1121	,		oosal Date	City, State				-	
Fairless Hills, PA							100000000000000000000000000000000000000	2/31/16	Tullytown	PA				
Completed By (Print or Type) Title								Signature	1	Dat	е	1	1	
Patricia Visco Office Man								yatu	cro V.	aco	9/	(9	1/10	Š

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)		Name of Building Owner/Operator (2)												
9 / 19 /	16	_		Cit	y of Cam	den							end ha	
Agencies Notified Type Notific	ation			Stree	t Address		*		MEG	E		V	E	
				PO	Box 951	20				Lin	- U	-	!	
☑ DOLWD ☐ Amended				City,	State, Zip (Code			10					
□ DOH Amendm □ DCA □ Emerger		udina		Ca	mden, NJ	08	101		III AS	9	17	018	i i	
(NJAC 5:23-8) justificati		uuing		Name	of Contac	t			Telephone Numb	per			1	
☐ Cancella	tion			Jol	nn Bond				ASBESI		101	ITBO)L &	
				FA	CILITY IN	IFOI	RMATION		ASRES	ICE	ISIN	G_		
Name of Facility Where Abatement is	Taking I	Place	(3)					Type of Facility	(4)	AND AND ASSESSED.				
CEDAR RESIDENCES								School (K-12						
Street Address									3 (Other than K-12) rivate and commer		uilding	js,		
City (5)					7.			Square Feet	# of Floors	В	ldg. A	ae		
Camden								varies	varies		50+	3		
County (6)				Cou	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pri	or if being demolis	hed)				
CAMDEN					- COMPANIES (12.000 - CO-C)				EEMED UNSAF					
Name of Monitoring Firm Hired by Build	ding Ov	vner (8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
Health and Safety Services				117		(Controlled Er	nvironmental S	Systems					
Street Address						Str	eet Address							
PO Box 365						1	121 N. Bethl	ehem Pike - S	uite 60					
City, State, Zip Code						Cit	y, State, Zip Co	ode			_			
Berlin, NJ 08009						5	Spring House	use, PA 19477						
Project Manager for Monitoring Firm			Tel	ephone	No.	Tel	lephone No.		License No.					
Jim Proctor			C	609-8	39-2432	2	215 542 7000		00847					
	Schedul	led Co	mple	etion Da	ite (11)	Na	me of OSHA M	lonitor						
9 / 20 / 16	12	_ /	_3	1_/	16	C	CES							
Occupancy Status During Abatement (Str	eet Address							
☐ Facility Closed/Vacated During Enti						1	121 N Bethle	ehem Pike -Sui	ite 60					
☐ Abatement Performed Outside of No. Time of Abatement: 7:00AM-5:00F					scribe	City	y, State, Zip Co	ode						
	141/		_			S	Spring House							
Scope of Work (Check all that apply)							□ Full Cont	ainment with Neg	ativo Proseuro					
≥3 sf or ≥3 lf		Rer					☐ Mini-Encl	losure	alive Pressure					
≥160 sf or ≥260 lf		☑ Der	noliti	on				Procedure	E					
		le.	Loca	tion	T		⊠ Non-Exer	mpted (*) and No	n-Friable Procedur		ver out of the con-			
Location of			orma				Description of	f		-	atem	_		
Asbestos-Containing Material (ACN	1)			ely by			Containing Mat	terial (ACM)	Amount	Ren	Repair	Enc	Enc	
TO BE ABATED IN Facility				ance/ Staff?	(i.e		ermal systems i surfacing, VAT,		(Specify SF or LF)	Remova	a:	aps	Enclosure	
(13)			(12))			her miscellane		SF OF LF)	<u>m</u>		Encapsulate	ire	
	,	Yes	No	N/A								Ф		
SEE ATTACHED				SEE AT	TAC	CHED		200 YD per res						
	[
	[
	1	7	П	П						П		П	П	
Name of Registered Waste Hauler				NJDEP '	Waste	Cut	oic Yards of	Name of Regis	tered Landfill		1			
Waste Management of NJ			100	17273	O No.	Wa	ste	GROWS						
City, State				1/2/	,		00/residenc posal Date	City, State						
Fairless Hills, PA						12/31/16 Tullytown PA								
Completed By (Print or Type)	Title						Signature			e				
Patricia Visco		ice N	lana	ger			Vature	en Mac	Maco 9/19/16					

Date of Notification (1)		Name of Building Owner/Operator (2) Hackensack University Medical Center															
09/19/2016									ter 🖳		-			-			
Agencies Notified	Type Notification	1		Street A	Address				The same of the sa	0.000		200 115-011					
□ EPA	☑ Initial				ospect .		ıe			SEF	2	0 20	116	1.			
□ DEP	☐ Amended				ate, Zip Co									1			
₫ DOL	Amendmen ☐ Emergency			Hack	ensack,	Ne	w Jerse	ey 0760	1	ASREST	790	ONIT	POI				
Ď DOH	justification			Name o	f Contact					lephone Nu	*	190	1. 1	1			
□ DCA	☐ Cancellatio	n		John L	abrosse	3								PURCE			
Name of Facility Where	Abatament in Taki	na Diana (2)	FACI	ILITY INFO	ORMAT	ION	T 6 F 11th	- (4)								
Conklin Building	Abatement is Taki	ng Place (3)					Type of Facility	/ (4)								
Street Address								☐ School (K☐ Subchapt		ner than K-1	21						
								Other (i.e.				ldings	, home	es,			
30 Prospect Avenu	16							etc.)				55%					
Hackensack								Square Feet	# 0	of Floors		Bldg. A	Age				
County (6)				County	Code (7)			68,657 Current Use (F	rior if ho	ina domolio		1953					
Bergen					USE ONLY)				(1)	nea)						
Name of Monitoring Firm	Hired by Building	Owner (8	\	ASCN	A No	× 2	Namo	of Abatement C	re & Buiness								
	SAN METARIKAN TAHUN METARI	CENTRALING AND	,	7001	1110		2007										
Omega Environme Street Address	ental services						Degn	nor Environ. Address	<u>menta</u>	Services	; LL(٠					
280 Huyler Street								Canal Street									
City, State, Zip Code							City. S	tate, Zip Code		1130							
So. Hackensack,	New Jersey	07606						York, NY	10013								
Project Manager for Mon				Telepho	ne No.		Teleph	none No.		License N	lo.						
Getser Fajardo				(201)4	189-870	0	(212)	431-0696		01314							
Start Date (10)		Schedu	ed Co		Date (11)		7 - 10 - 10	of OSHA Monito	r	101311							
09/28/2016		08/28/	2017	6			EM	SL Analytica	al, Inc.								
Occupancy Status During	Abatement (Che	ck Only O	ne)				Street	Address	dress								
☐ Facility Closed/Vaca	ated During Entire	Period of	Abate	ment				West 38th St	reet								
Abatement Perform Other – Describe:	ed Outside of Norr	nal Facilit	y Hour	rs .			City, S	tate, Zip Code		China China							
		JU AIVI				T 2	New	York, NY 1	0018								
Scope of Work (Check A	I That Apply)																
□ X ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		=======================================	Renov	2000					ainment with Negative Pressure								
LI 2100 \$101 2200 II		ш	Demol	ιτιοπ				Mini-Enclosu Glovebag Pr									
		-									le Pro	cedur	е				
		15	Loca	tion						79			ement	:			
Location			Norma			De	scription	of			-	1 13	ре Г	-			
Asbestos-Containing TO BE ABA			intena					laterial (ACM) s insulation,	100	mount Specify	71		En	Е			
In Facili		Cus		Staff?	(1.0.		cing, VA		4	F or LF)	Remova	Repair	cap	nclo			
(13)			(12)			other r	niscellan	leous)			oval	a i	Encapsulate	Enclosure			
		Yes	No	N/A									te	LD.			
St. John's Bldg - Gr	ound Floor		X		ACPI				50 LI	C C	X	1					
v. joins blug - Or	ound 11001				ACII				130 L	L	1						
		_		+					-		-			\vdash			
wa											-						
Name of Barrier																	
Name of Registered Was				NJDEP W Hauler ID		Cubic of Was		Name o	t Registe	ered Landfill							
Newark CArting I	HC.		15.	04509		6		Waste	Mana	gement	Gran	idce	ntral				
City, State							sal Date	City, Sta		J							
Newark, New Jersey 07105						TBD Pen Argyl, PA 18072											
Completed by		Title			Signature												
Teresa Borowiec		Seni	or Pr	Project Manager Teresa Dorow.					Will	DIEC 09/19/2016							

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

B & G proj. #:

2016-136

Check # 8011

						CHOCK	# 0011		-		-		
Date of Notification (1)	I I Name	e of Building Own	ner/Operator (2))									
0 19 1/1 16 1/11 16 1		omas Nakaga		5.	Finne	MEC	IS I W	T F	3 1000				
Agencies Notified Type Notificat		t Address		-					- 1				
EPA X Initial					e e e e e e e e e e e e e e e e e e e	15				100			
□ DEP □	City,	State, Zip Code			1	II II SEF	2 0 20	6	1-	7			
■ DOL		nort Hills, NJ (07078		To a second	food ferri							
₩ DOH	Name	of Contact				Felephon	e Number T	ROL	8				
☐ DCA ☐ Cancell	ation T	homas Nakag	ami		L		CENICINIO				i		
			ILITY INFORM	ACION	J								
N	is taking place		JETT IN ORW	IXTION		Type of Facility ((4)						
Name of facility where abatement	is taking place ((3)					I (K - 12)						
Thomas Nakagami							apter 8 (Othe			2)			
Street Address		i//					Private/Com/ Homes, etc.	merc	ial				
							# of Floors	T	Bldg	g. Ag	je		
City (5)	County (6)		Cou	inty Code (7)			_ _					
Short Hills, NJ 07078	Essex			(Sta	ite use only)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by			ASCM No.		Name of Abatement Co	residential			_	_			
Name of Monitoring Fifth niled by	blug. Owner (o)	n/a										
Street Address				-	B & G Restoratio	n, inc.		_		-	_		
Street Address					105 Ryerson Ro	ad							
City, State, Zip Code				_	City, State, Zip Code								
					Lincoln Park, N	J 07035							
Project Manager for Monitoring Firm	1	Phone Numb	per		Telephone Number (973)696-6869		License Nu						
					Name of OSHA Monito	-	0037	0	_	_			
Scheduled Start Date (10)	Sched. Co	empletion Date (1	1)		B & G Restoratio								
09/27/2016	09/28/2	2016			Street Address								
Occupancy Status During Abatemen	nt (Check only	one)			105 Ryerson Roa	ad							
Facility closed/vacated during					City, State, Zip Code								
Abatement performed outside Describe:	of normal facil	ity nours-		_	LincolnPark, NJ	07035							
Other-Describe:				_	- LINCOINF ark, NO	07033					-		
Scope of Work (check all that apply									V-11-#100-04-0				
☐ Demolition 🔀	Renovation			174-27	full Containment w/nega	tive pressure [Glovebag	-					
	≥160 sf or ≥26			X N	Mini-enclosure		Non-friab		R		_		
Location of asbestos-containing	by maintenan	rmally used solelice/custodial			-btt-i-i	Amount	е		e	E n	E		
material to be	staff(12)		material i		sbestos-containing	(Specify S	F or o		o a	c a	С		
abated in facility (13)	Yes	No N/A	***			LF)	v e			p	L		
storage / laundry room area		X	pipe insul	ation		40 If	N X						
main room		X	pipe insul			43 lf	X]			
boiler room		X	pipe insu	lation		12 lf	X						
] [] [Ц		
				VA/c	IN		[Ц		
Registered Waste Hauler B & G Restoration, Inc.	NJDEP H		Cubic Yards of V 1 1/2	vvaste	Name of Registered La Tullytown R	andfill esource & Re	covery Ce	nte	-				
City, State		Disposal I	Date		City, State				The second second				
Lincoln Park, NJ		09/	28/2016		Tullytown, P.	Α				V			
Completed by (Print or Type) Gordana Luna	Title Secretary/T	Signature	Gordana Luna Date 09/16/2016										

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

B & G proj. #:

2016-138

Check # 8012

Date of Notification (1)	Name of I	Building Own	ner/Operator (2))		MEC	BEIV	EM				
0 19 1/1 6 1/1 16	Suzan	ne Cermir	nara			MEG	0 15 11 15					
Agencies Notified Type Notification EPA Initial	Street Add	dress				SI	EP 20 20	16				
□ DEP □	City, State	e, Zip Code				182		- 1				
▼ DOL	^{nt} Some	rville, NJ (08876			ASBE	STOS CON	TROL &				
X DOH	Name of C	ontact				Telephone	e Number					
☐ DCA ☐ Cancellation	Suza	nne Cermi	inara									
		FAC	ILITY INFORM	IOITA	N							
Name of facility where abatement is t	aking place (3)					Type of Facility (4	4) I (K - 12)	8				
Suzanne Cerminara						1 =	apter 8 (Other t	han K-12)				
Street Address							Private/Comme Homes, etc.	ercial				
							# of Floors	Bldg. Age				
City (5)	County (6)			100000000000000000000000000000000000000	unty Code (7)			<u> </u>				
Somerville, NJ 08876	Somerset			(518	ate use only)	Current Use (Pr residential	for if being den	nolished)				
Name of Monitoring Firm Hired by Blo	lg. Owner (8)		ASCM No.		Name of Abatement	Contractor (9)						
			n/a		B & G Restorat	ion, Inc.						
Street Address					Street Address 105 Ryerson R	Road						
City, State, Zip Code				-	City, State, Zip Code							
					Lincoln Park,	NJ 07035						
Project Manager for Monitoring Firm		Phone Numb	per		Telephone Number (973)696-686		License Numb	oer				
Scheduled Start Date (10)	Sched. Comple	etion Date (1	1)		Name of OSHA Moni B & G Restorat							
09/28/2016	09/29/2016	3			Street Address	ion, mo.						
Occupancy Status During Abatement (105 Ryerson R	oad						
Facility closed/vacated during er Abatement performed outside of Describe:					City, State, Zip Code	1.07005						
Other-Describe:				-	LincolnPark, N.	J 07035						
Scope of Work (check all that apply) Demolition					Full Containment w/neg	nativa proceura. Is	≰ Glovebag pr	randura.				
	enovation 60 sf or >260 lf				Mini-enclosure	gative pressure	Non-friable					
	s location normal	v used solel	vl	-			R	RIFI				
Location of ashestos-containing b	y maintenance/c taff(12)		1	on of a	asbestos-containing	Amount	e m	e n E				
material to be abated in facility (13)	Yes No	N/A	material (ACM)		(Specify SI LF)	For ov	a a c L				
basement		×	pipe insula	ation		100 lf	X					
]			_						
		4	-			_						
		_	1					片片片				
Registered Waste Hauler	NJDEP Haule	er ID#	Ubic Yards of V	Naste								
B & G Restoration, Inc.	19563	Disposal I	1 1/2		- personal and the second seco	Resource & Re	covery Cen	ter .				
City, State Lincoln Park, NJ	Date (29/2016	City, State Tullytown, PA										
	itle ecretary/Trea	surer	Signature	Gordana Luna Date 09/16/2016								

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

B & G proj. #:

2016-137

Check # 8013

Date of Notification (1) D 9 1 1 1 1 1 1								-					
County Code (7) C	Date of Notification (1)		I I Name	of Building Ow	ner/Operator (2	2)							
Agencies Notified Per Notification Sirreet Address Sirreet Address Sirreet Address Sirreet Address Sirreet Address Sirreet Address PACILITY INFORMATION Name of facility where abatement is taking place (3) Livingston WVTP (Sub chapter 8) Sirreet Address 81 Naylon Avenue City, Siate, 2D Code Livingston WVTP (Sub chapter 8) Sirreet Address 81 Naylon Avenue City (3) Livingston WVTP (Sub chapter 8) Sirreet Address 81 Naylon Avenue City (5) Livingston WVTP (Sub chapter 8) Sirreet Address 81 Naylon Avenue City (5) Livingston WVTP (Sub chapter 8) Sirreet Address 82 Naylon Avenue City (5) Livingston WVTP (Sub chapter 8) Sirreet Address 83 Naylon Avenue City (5) Livingston WVTP (Sub chapter 8) Sirreet Address 84 Naylon Avenue City (5) Livingston WVTP (Sub chapter 8) Sirreet Address 85 No	10 19 1/1 16 1/11 16	<u>5</u> 1	11						F3 P D/	7 [7	= [7	
SEP DEP												111	
DEP DOL	X EPA X I	nitial			naston Aveni	ıe		IIUIT				-	
DOL		mai						IIIII eed	0.0.00	116	-	211	
DCA	X DOL A	mendment			07039			II II DEF	24 24	110	-		
DCA	X DOH		Name	of Contact				Telephor	e Number	BO	1 &		
Name of facility where abatement is taking place (3) Livingston WWTP (Sub chapter 8) School (K - 12) School (K - 12) Subchapter 8 (Other than K-12) County (6) County (6) County (7) County (7) County (8) County (8) Current Use (Prior if being demollshed) Waste water treatment plant Waste water wa	□ DCA □ Ca	ancellation	Jo	e Greco				ASBEST	J5 CON1	-			
School (K-12) Subchapter 8 Subchapter 8 Subchapter 8 Subchapter 8 County Code (7) County Code (7) Caunty				FA	CILITY INFORM	ЛАТІО	N						
Livingston WWTP Street Address 81 Naylon Avenue County (6)	Name of facility where abater	ment is tak	ing place (3)			T						
County Code (7) County (6) County (6) County (7) County (8)	Livingston WWTP	(5	Sub chap	ter 8)						ner th	nan K	-12)	
Square Feet	Street Address											12)	
City (6) Livingston Name of Montacring Firm Hired by Bidg. Owner (8) Matrix New World Engineering On 121 B & G Restoration, Inc. Street Address 26 Columbia Turnpike, 2nd Floor City, State, 2ip Code Florham Park, NJ 07932 Project Manager for Montacring Firm Patrick Li Scheduled Start Date (10) 10/03/2016 Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Obscriber. Obscriber. Dispersible Scape of Work (check all that apply) Abatement performed outside of normal facility hours- Describer. Describer. Location of abatesus-containing material to be abated in facility (13) y maintenancolcustodial staff1(2) was to abated in facility (13) y maintenancolcustodial staff1(2) y so No N/A Existing Blower room area X ploe insulation (2 locations) Signature City, State City, State City, State County Code (7) (State use only) Current Use (Prior if being denoilshed) Waste water treatment plant Current Use (Prior if being denoilshed) Waste water treatment plant Waste water treatment plant Name of Abatement Contractor (9) B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number (973)698-6869 00378 Name of Obatement Contractor (9) B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number (973)698-6869 00378 Name of Obatement Contractor (9) B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number (973)698-6869 00378 Name of Obatement Contractor (9) B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number (973)698-6869 00378 Telep	81 Naylon Avenue							Bldgs.	Homes, etc) .		da A	ae .
Livingston Name of Monitoring Firm Hired by Bildg. Owner (8) Matrix New World Engineering O0121 Street Address 26 Columbia Turnpike, 2nd Floor City, State, Zip Code Florham Park, NJ 07932 Project Manager for Monitoring Firm Patrick Li Scheduled Start Date (10) 10/03/2016 Occupancy Status During Abatement (Check only one) Florham Park, NJ 07035 Florham Park, NJ 07035 Scheduled Start Date (10) Scheduled Start Date (10) Occupancy Status During Abatement (Check only one) Florham Park, NJ 07035 Florham Park, NJ 07035 Telephone Number (973)696-6869 O0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number (973)696-6869 O0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Flore Address (10)	City (5)	T	County (6	5)		Co	unty Code (7)		# 01 1 10013			ag. 7 ·	
Name of Monitoring Firm Hired by Bidg. Owner (8) Matrix New World Engineering 26 Columbia Turnpike, 2nd Floor City, State, Zip Code Florham Park, NJ 07932 Project Manager for Monitoring Firm Patrick Li Scheduled Start Date (10) 10/03/2016 Cocupancy Status During Abatement (Check only one) Describe: Other-Describe: Scope of Work (check all that apply) Demolition Scope of Work (check all that apply) Demolition Scope of Work (check all that apply) Demolition Scheduled Start Date (10) Demolition Scope of Work (check all that apply) Scope of Work (check all that apply) Demolition Scope of Work (check all that apply) Description of asbestos-containing material to be abated in facility (13) Scope of Work (check all that apply) Scope of Work (check all that apply) Scope of Work (check all that apply) Description of asbestos-containing material to be abated in facility (13) Scope of Work (check all that apply) Scope of Work (check all	Livingston		FSSAV			(St	ate use only)					ed)	
Matrix New World Engineering 00121 Street Address 26 Columbia Turnpike, 2nd Floor City, State, Zip Code Florham Park, NJ 07932 Project Manager for Monitoring Firm Patrick Li 973-240-1800 Scheduled Start Date (10) 10/24/2016 Cocupancy Status During Abatement (Check only one)	erica and a first and a second				T	,	INIama of Ahatamasi		treatmer	nt pl	ant	_	
Street Address 26 Columbia Turnpike, 2nd Floor City, State, Zip Code Florham Park, NJ 07932 Project Manager for Monitoring Firm Patrick Li Scheduled Start Date (10) 10/03/2016 Cocupancy Status During Abatement (Check only one)			500					32/35					
26 Columbia Turnpike, 2nd Floor City, State, Zip Code Florham Park, NJ 07932 Project Manager for Monitoring Firm Patrick Li Scheduled Start Date (10) 10/03/2016 Cocupancy Status During Abatement (Check only one) If Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Describe: Demolition Demolition Renovation Demolition Scope of Work (check all that apply) Demolition Scope of Work (igineenin	9			_		tion, Inc.					
City, State, Zip Code Florham Park, NJ 07932 Project Manager for Monitoring Firm Patrick Li Scheduled Start Date (10) 10/03/2016 Occupancy Status During Abatement (Check only one)		o 2nd E	loor					Road					
Florham Park, NJ 07932 Project Manager for Monitoring Firm Patrick Li Scheduled Start Date (10) 10/03/2016 Cocupancy Status During Abatement (Check only one) Facility closed/wacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: Scope of Work (check all that apply) Demolition Expendition of asbestos-containing material to be abated in facility (13) Facility (13) Existing Blower room area Existing		e, zna r	1001			_					-		
Patrick Li Scheduled Start Date (10) 10/03/2016 Occupancy Status During Abatement (Check only one) Facility closed/wacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: Compendition Renovation Step of Work (check all that apply) Demolition Renovation Step of Non-friable procedure	Florham Park, NJ 07	932											
Name of OSHA Monitor Scheduled Start Date (10) Scheduled Start Date (10) 10/24/2016 1	Project Manager for Monitoring	g Firm		Phone Num	ber	-			License N	lumb	er		
Scheduled Start Date (10) 10/03/2016 10/03/10-10/24/16	Patrick Li			973-240	0-1800				003	78			
Occupancy Status During Abatement (Check only one) Facility closed/wacated during entire period of abatement.	Scheduled Start Date (10)	T	Sched. Co	mpletion Date (11)	_							
Description of asbestos-containing material to be abated in facility (13) Existing Blower room area X Blows/fittings (3 locations) Lest pipe gallery Lest			10/24/2	016				tion, inc.					-
Abatement performed outside of normal facility hours-Describe: City, State, Zip Code		tement (Cl					The state of the s	?oad					
Abatement performed outside of normal facility hours—Describe: Other-Describe: LincoInPark, NJ 07035	- ''- ''- ''- ''- ''- ''- ''- ''- ''- '												
Other-Describe: ClincoinPark, NJ 07035	Abatement performed or						Oity, Glate, Zip Gode						
Scope of Work (check all that apply) □ Demolition						_	LincolnPark, N	J 07035					
Description		t apply)											
Location of asbestos-containing material to be abated in facility (13) Existing Blower room area Exi			ovation			X	Full Containment w/ne	gative pressure	✗ Gloveba	g pro	ocedu	ire	
Location of asbestos-containing material to be abated in facility (13) Existing Blower room area Exi	□ >3 sf or >3 lf	× >160	sf or >260) If		X	Mini-enclosure	1	Non-fria	ble p	госе	dure	
asbestos-containing material to be abated in facility (13) Existing Blower room area Existing Blower					ely					R	R	E	TE
material to be abated in facility (13) Existing Blower room area X elbows/fittings (3 locations) quantity: 30 X				ce/custodial	Descript	ion of a	asbestos-containing		1	_			73.53
Existing Blower room area Existing Blower room					- material	(ACM)			For	33 W			1
Existing Blower room area X pipe insulation (2 locations) 20 lf & 45 lf X	abated in facility (15)	es	No N/A				/		e	ı	р	-	
East pipe gallery Storage Room # 1 SEE ADDITIONAL SHEET Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ	Existing Blower room are		X	elbows/fit	tings	(3 locations)	quantity:					口	
Storage Room # 1 SEE ADDITIONAL SHEET Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ Completed by (Print or Type) SEE ADDITIONAL SHEET X SEE ADDITIONAL SHEET Cubic Yards of Waste Name of Registered Landfill Tullytown Resource & Recovery Center City, State Lincoln Park, NJ Completed by (Print or Type) Title Signature Completed Signature Compl	Existing Blower room are	ea		X									ᆜ
SEE ADDITIONAL SHEET Registered Waste Hauler B & G Restoration, Inc. NJDEP Hauler ID# 19563 SEE ADDITIONAL SHEET NJDEP Hauler ID# 19563 SUBJECTIVE STATE Lincoln Park, NJ Completed by (Print or Type) Title Signature SEE ADDITIONAL SHEET Cubic Yards of Waste Name of Registered Landfill Tullytown Resource & Recovery Center City, State Lincoln Park, NJ Signature Completed by (Print or Type) Title Signature Date				Х			(5 locations)						님
Registered Waste Hauler B & G Restoration, Inc. NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill Tullytown Resource & Recovery Center				X				quantity:	7	X			부
B & G Restoration, Inc. 19563 5-10 Tullytown Resource & Recovery Center City, State Lincoln Park, NJ Disposal Date 10/03/16-10/24/16 Completed by (Print or Type) Title Signature Date		ET _						11 16"				Ц	Ш
Lincoln Park, NJ 10/03/16-10/24/16 Tullytown, PA Completed by (Print or Type) Title Signature CO. CO. Date						vvaste			covery C	ent	er		
Completed by (Print or Type) Title Signature CO . CO Date						16		PA					
	Completed by (Print or Type)						l ——			204	6	7	_

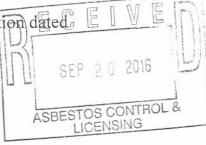
Re:

One page attachment to 14 day initial notification dated

09/16/2016 for asbestos removal at:

81 Naylon Avenue, Livingston, NJ 07039

Start date: 10/03/2016



The following materials shall be abated:

Location of asbestos- containing material to be abated in facility	Is location normally used solely by maintenance / custodial staff	Description of ACM	Amount (LF or SF)	Remove	Repair
Storage # 2 (Boiler room)	NO	Elbows/fittings	Quantity: 30	X	
Storage # 2 (Boiler room)	NO	Pipe insulation	55 lf	X	
Storage # 2 (Boiler room)	NO	White block stack insulation	27 sf	X	
Storage # 2 (Boiler room)	NO	Rope gasket	20 lf	X	
Storage # 2 (Boiler room)	NO	Boiler insulation	120 sf	X	
Storage # 2 (Boiler room)	NO	Heat exchanger insulation	124 sf	X	

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		100

Date of Notification (1)	Name of Building Owner/Operator (2)															
	16 /	16	_					ses, Inc d/b		uc)	EGE				7	
Agencies Notified	Type Notifica	ation			Street	Address			and the same of th	Para 1	1			111	111	
☐ EPA					262	0 Broady	vay				0.77					
□ DOLWD	☐ Amended				City, S	state, Zip C	ode		- 1		SEP 20	20	16	11-	#	
□ DHSS	Amendm				Nev	v York, N	Υ		1						-	
DCA (NJAC 5:23-8)	☐ Emergen justification		iuaing		Name	of Contact	t	AND ASSESSED TO SEE SEE		- 1/2	Telephone Numb	ekir	201	0	-	
(140/10 0.20 0)	☐ Cancellat				Jee	t Gulati			Mineral		101111111111111	21(1)	HUL	Č	Communication	
					FAC	CILITY IN	FOF	RMATION		1.0						
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Faci	lity (4)					
Residential Building	g								School (K							
Street Address											Other than K-12) rate and commerc	rial hi	ildino	c		
									homes, e		ate and commen	JIGI DC	manig	٥,		
City (5)									Square Feet		# of Floors	BI	dg. A	ge		
Hightstown									6,000		3		90+			
County (6)					Cour	ty Code (7)(STA	TE USE ONLY)			r if being demolisi	ned)				
Mercer									Multi-fam	nily F	Residentiali					
Name of Monitoring Firm	Hired by Build	ding Ov	wner (8)	ASCM	No.	Nar	me of Abateme	ent Contractor	(9)						
Environmental Con	nection				0003	30	S	Superior Aba	tement Inc							
Street Address							Stre	eet Address								
120 North Warren S	it						2	Henderson	Drive							
City, State, Zip Code								, State, Zip Co	ode							
Trenton, NJ 08608							٧	Vest Caldwe	II, NJ 07006							
Project Manager for Moni	toring Firm			Tele	phone	No.	Tele	ephone No.			License No.					
Dominic Dercole				(6	09) 39	2-4200	9	73-808-1616			00411					
Start Date (10)	5	Schedu	led Co	omple	tion Da	te (11)	Nar	ne of OSHA N	lonitor							
09 /26 /	16	_ 09	_ /	_ 28	_ /	16	S	uperior Aba	tement Inc							
Occupancy Status During	Abatement (0	Check	only o	ne)			Stre	eet Address					= =	7.7		
☐ Facility Closed/Vacate							2	Henderson	Drive							
Abatement Performed							City	, State, Zip Co	ode							
Time of Abatement: _	AIVI	PIVI	/	_PIVI-	AM West Caldwell, NJ 07006											
Scope of Work (Check all	that apply)										egative Pressure					
≥3 sf or ≥3 lf		Г	⊠ Rei	novati	on					Nega	tive Pressure					
☐ ≥160 sf or ≥260 lf		Ĩ	De	molitic	n				g Procedure							
								☐ Non-Exe	mpted (*) and	Non-	Friable Procedur	T -				
Location	of			Locat lorma				Description	,			Ab	atem	ent Ty	уре	
Location Asbestos-Containing I)	Use	d Sole	ly by	Asbe	stos	Description of Containing Ma			Amount	Re	Re	E	En	
TO BE ABA	TED	1		ntena	nce/ Staff?		., the	rmal systems	insulation,		(Specify	Remova	Repair	cap	Enclosure	
IN Facilit (13)	У		Cusi	(12)	Stall!			urfacing, VAT, ner miscellane			SF or LF)	/al		Encapsulate	ure	
(10)			Yes	No	N/A		Oti	iei illiscellarie	ousj					te		
Basement Boiler Roo			Pipe Fit	ting	s			15 LF								
Basement Boiler Room						Clean u	рВ	oiler and De	bris		140 SF					
Name of Registered Wast	te Hauler			N	JDEP \	Vaste	Cub	oic Yards of	Name of Re	egiste	ered Landfill					
Service Transport G	Froup Inc			Н	auler II SW21		Was		Minerva	Ent	erprises					
City, State								posal Date	City, State							
New Castle, DE							9/28/16 Waynesburgh, OH									
Completed By (Print or Type) Title								Signature	111	1	Da	e ,			-	
Nick Petrovski	nt				dilla		1	9	//	4/	16					

			Name of	E Divildina O		aratar	(2)		4			11	/_	2
Date of Notification (1) 9/16/16			Transc	f Building O ontinental	Gas Pi	pe Lin	ne Com	ipany, LLC				7 7	7 =	- Income
Agencies Notified Type Notificati	on		Street A 2800 P	ddress ost Oak B	lvd			and the Constitution of th	M	EC	E			
EPA Initial Amended Amended Amended				nte, Zip Cod on, Tx 770						SF	P 21) 2)16	
☐ Emergen justificati ☐ DCA ☐ Cancellat				f Contact Martinkev	viz				1	phone Nu	ımber		TROI	2
2 50.1			FACI	LITY INFO	RMATIO	N				ASBES	TOS (ICEN	SIN	3	
Name of Facility Where Abatement is Ta Abandon House	king Place (3)							of Facility (4 School (K-12			1021			
Street Address 26 Bordentown – Chesterfield R	d						回口	Subchapter 8 Other (i.e. pri etc.)				dings	, home	es,
City (5) Bordentown, NJ								e Feet	# of 2	Floors		oyrs	-	
County (6) Burlington				Code (7) USE ONLY)				nt Use (Prior don home				1100		
Name of Monitoring Firm Hired by Buildi N/A	ng Owner (8)		ASCN	A No.				ement Cont		3-9	-			
Street Address						Street	Addres				iite 10)		
City, State, Zip Code						City, S	tate, Zi	p Code						
Project Manager for Monitoring Firm			Telepho	ne No.	-	Teleph	none No		2	License I	No.			
Start Date (10)			npletion	Date (11)		Name		A Monitor		00749				
10/3/16 Occupancy Status During Abatement (C	10/14/16 heck Only On							onmental top.scf Sti	reet Ac	idress				
Facility Closed/Vacated During Ent Abatement Performed Outside of N					-		20 th A							
Other - Describe:					-		k, NJ 0							
Scope of Work (Check All That Apply)						-	,							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		enova emolit					Min Glo	i-Enclosure vebag Proc						
				T			Nor	n-Exempted	(*) and	d Non-Fria	ble Pro		re temen	
	100	Locati Iormal											ype	
	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility N. Used Mair Custo				Descr Asbestos Contain (i.e. thermal sy surfacin other mis				(8	mount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
Detached Shed	Yes	No	N/A	Transite	and roo	of shin	gle		420 S	F	X	+-		-
Main House	X			dow ca			zing	10	00 LF	*				
Name of Registered Waste Hauler Freehold Cartage		Н	IJDEP V		Cubic Y			Name of F				1		
City, State		1:	5939		30 Disposa	al Date	•	City, State						
Freehold, NJ			10/14/16 Newburg, PA											
Michael Migliore	ccoun	t Mana	ger	Si	gnature Mi	cha	al Onighie 9/16/16							

D&S Proj. #: 16-279

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

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	7		П	η.π	r r	-

D&S Proj. #: 16-279	9			(Pursi	iant to NJAC	0.0	o and 12:120)		,					
								IM	EG		V			
Date of Notification (1)	6.1	1	Vame of	Building Owr	ner/Operator (2))		TIS'						
	Votification	-	kelly sl	-					SEB	202	016	The state of the s	ازل	
☐ EPA ☐ Initia	I		Street Ad	dress										
Amend	ment #:	1	City, State	e, Zip Code				1	ASDEST	ENSIN	TPC G	1 2.		
	rgency	-11	NORT	H BERGE	N, NJ 07047	ř			LIC	LIVOIN	<u>u</u>			
	uding ication)	N	lame of C	Contact					Telephone	e Numbe	r			
	cellation		kelly s	shannon										
				FAC	ILITY INFORM	ATIO	N							
Name of facility where abate	ement is ta	king pla	ace (3)					Туре	of Facility (4					
kelly shannon									_	(K - 12)			. 40)	
Street Address										pter 8 (C Private/C			-12)	
									Bldgs./l	Homes, e	tc.			
City (5)		Cour	nty (6)			Co	unty Code (7)	Squa	re Feet	# of Floor	S	BI	dg. A	ge
o.i, (o)			, (-)				ate use only)	Curr	ent Use (Pri	or if bein	g dem	olishe	ed)	
NORTH BERGEN			DSON			<u> </u>							: 	
Name of Monitoring Firm Hi	red by Bldg	. Owne	er (8)		ASCM No.		Name of Abatement		SE (8)					
Street Address						_	D & S RESTOR Street Address	ATION	I, INC.					
Street Address							20 California A	VA.						
City, State, Zip Code						-	City, State, Zip Code	vc.	-					
							Paterson, NJ 07	503						
Project Manager for Monitorin	ng Firm			Phone Numb	er	_	Telephone Number			License		er		
							973-345-8020	**		0	1169	_		
Start Date (10)		Sched	. Comple	tion Date (1	1)		Name of OSHA Mon D & S Restorati							
09/26/16		10/15	5/16				Street Address	on, me	•					
Occupancy Status During Ab				22-00-00-00-00-00-00-00-00-00-00-00-00-0			20 California Av							
Facility closed/vacated Abatement performed	2.75.00						City, State, Zip Code							
Describe: NOR	MAL HOUR	RS				_	Paterson, NJ 07	503						
Scope of Work (check all that	at apply)							Full Con	tainment w/	negative	press	ure		
≥ 3 sf or >3 If	□ Rer	novatio	n				-	Mini-end		10000				
≥160 sf or ≥260 lf	☐ Der	nolition	1						g procedure empted (*) a		riable	proce	edure	<u> </u>
Location of	ls l	ocation	n normall nance/cu	y used solely	1				•		R	R	E	E
asbestos-containing material (acm) to be		ff(12)			Description material (asbestos-containing		Amount (Specify SF	= or	m	р	n c	n
abated in facility (13)	Y	'es	No	N/A	matoriar	, (0,1)			ĹF)		o v e	a i	a p	L
BASEMENT			$\square X$		PIPE INSU	LAT	ION	120	LFT		Ĭ			
BASEMENT			$\square X$		BOILER IN	ISUL	ATION (fire box)	30	sq ft		\boxtimes			
				4							Щ		ᆜ	뷰
Registered Waste Hauler		N.IDE	P Haule	rID# I C	ubic Yards of V	Vaste	Name of Registered	Landfill				Ш	Ш	
D & S RESTORATION,	INC.	135		ACAMANA (1)	yds.		TULLYTOWN,		JRCE RE	COVER	Y			
Dity, State	2			Disposal D			City, State	D.:						
PATERSON, NJ 07503 Completed by (Print or Type)		Δ		09/26/1	Signature		TULLYTOWN,	PA		Date				
BOGDAN JOLDZIC							09/14/2016							
100 44	* Do	not use	thic form	n for achoes	mnto	d activities			L					

Date of Notification (1)				Nam	ne of Buildi	ng Owner/Operator	(2)	<u> </u>	1	J_	-	
	14/	16				Property Manag	A Control of the Cont	ruction				
Agencies Notified	Type Notifi	ication		Stre	et Address					5.7		Park Street
⊠ EPA ⊠ DOLWD	☐ Amend			20	W. State	Street, 3rd Fir.	II.	JECE		\mathbb{W}	5	n
☑ DOLWD		ea ment#		City,	State, Zip	Code		VI			1	
□ DCA		ency (includi	na	Tr	enton, N	J 08608	111))			1	
(NJAC 5:23-8)	justifica	ation)	•	Nam	e of Conta	ct		Telephone Num	ber a	2016		世
	☐ Cancell	lation		Ri	ck Ferrer	a					1	
- 3				FA	ACILITY I	NFORMATION		ASBESTOS	CON	ITRO	3 10	10
Name of Facility Where		Taking Place	ce (3)				Type of Facility	(4) LICE				
Residential House	е						School (K-12					
Street Address							Other (i.e., pr	3 (Other than K-12 rivate and comme	() rcial b	uildin	as.	
				6			homes, etc.)				J	
City (5)							Square Feet	# of Floors	В	Bldg. A	\ge	W.
Linden, NJ												
County (6)				Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Union	es fillered by D.	11-11	(0)	1 1001								
Name of Monitoring Fire Bio Terra Solution		Ilding Owner	(8)	ASCM	1 No.		ent Contractor (9)	С				
Street Address			1			Street Address					10	
P.O. Box 1224						27 Outwater	Lane					
City, State, Zip Code	F 1 F	9 9	1 3	72.0		City, State, Zip C						-
Union, NJ						Garfield, NJ						
Project Manager for Mo	nitoring Firm		Te	lephone	No.	Telephone No.		License No.	-		-	
Rick Eustaquio			. 9	73-49	4-3762	973-928-4888	3	1188				
Start Date (10)		Scheduled (Comp	letion Da	ate (11)	Name of OSHA N	Monitor				-	
09 /19 /	16	10	/ _3	31_ /	16	ALL PRO MA	NAGEMENT LL	_C				
Occupancy Status Durin						Street Address						
☐ Facility Closed/Vaca						27 Outwater	Lane					
Abatement Performe	d Outside of N	Normal Facili	ty Ho	urs - De	scribe	City, State, Zip C	ode	50 U ^{#4} D				
Time of Abatement:		PIVI/	PN	1	_AIVI	Garfield, NJ	07026					
Scope of Work (Check a	Ill that apply)					□ F.// Con	tologogia to the Nico		7 7			
≥3 sf or ≥3 lf		□R	enova	tion		☐ Mini-End	tainment with Nega	ative Pressure				
≥160 sf or ≥260 lf		⊠ De	emolit	ion		☐ Gloveba	g Procedure					
		1 1	s Loca	otion	1	⊠ Non-Exe	empted (*) and Non	ı-Friable Procedui	_			
Location	n of	7000	Norm	ally		Description of	of		1	atem	Г	T
Asbestos-Containing				lely by ance/		stos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Enc	Enclosure
TO BE AB. IN Facil		10 454,500		Staff?	(i.e	e., thermal systems surfacing, VAT		(Specify SF or LF)	Nov	ai-	aps	ISO
(13)	y		(12)		other miscellane		3F 01 LF)	<u>a</u>		Encapsulate	ē
		Yes	No	N/A							in in	
Basement Stairs				\boxtimes	VAT,Ma	astic		27 SF				
1 st Floor, 2 nd Floor					VAT,Ma	stic		610 SF				
Kitchen				\boxtimes	VAT			150 SF				
2 nd Floor				\boxtimes	Black g	lue dots to pane	eling	3,200 SF				
Name of Registered Was	ste Hauler			NJDEP		Cubic Yards of	Name of Regist	ered Landfill				
Century Waste Ser	vices LLC		1	Hauler II 3279		Waste As Nooded	IESI Bethlel	nem Landfill				
City, State				3219		As Needed Disposal Date	City, State				200	
Elizabeth, NJ						TBD	Bethlehem,	PA	1			
Completed By (Print or T	ype)	Title				Signatoré /) ,	Da	te. /		1:	
Allen Monchik	50000000000	Project	Mar	ager		117116			91	14	11	6

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)					Nam	e of Buildir	ng Owner/Operator	(2)		10	_		
09 /	14 /	16					Property Manag		struction			Je	
Agencies Notified	Type Notific	cation				t Address	. , ,		NECE		V	5	M
⊠ EPA	☐ Initial				20	W. State	Street, 3rd Flr.	A COLUMN TO THE PROPERTY OF TH	7/1			-	
☑ DOLWD	Amende Amendn				City,	State, Zip	Code		050	0 0	0016		Ull
□ DCA	⊠ Emerger		udino	1	Tre	enton, N.	J 08608		IЩ SEP ∂	U	2010	12	
(NJAC 5:23-8)	justificat			,	Name	e of Conta	ct		Telephone Nun			1	
	☐ Cancella	ation			Ric	ck Ferrer	a		1.0000100		RC	L &	
1 3 6					FA	CILITY II	NFORMATION		LICE	NSIN	G		
Name of Facility Where A	Abatement is	Taking P	lace	(3)			11 ()	Type of Facility	(4)	200			
Residential House								School (K-1					
Street Address			2			70	. 5		8 (Other than K-1) orivate and comme		uildin	gs,	
City (5)				-				Square Feet	# of Floors	P	ldg. A	ae.	
Linden, NJ	n				#			Square reet	# 01110015	В	iug. A	ge	
County (6)			302		Cou	nty Code (7)(STATE USE ONLY)	Current Use (P.	rior if being demoli	shed)			0 8
Union					nite.								
Name of Monitoring Firm		ding Ow	ner (8)	ASCM	No.	Name of Abatem	ent Contractor (9)		- 1		
Bio Terra Solutions			1	-			ALL PRO MA	NAGEMENT L	LC.				
Street Address						37 <u>11</u>	Street Address		. 8 5 2				
P.O. Box 1224			3				27 Outwater	Lane					
City, State, Zip Code Union, NJ							City, State, Zip Co			A ST			
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No.		-		
Rick Eustaquio				9	73-494	-3762	973-928-4888	}	1188				
Start Date (10)09 /19 /		Schedule 10			tion Da		Name of OSHA M	Monitor	.LC				
Occupancy Status During	Abatement (Check or	nly o	ne)	-		Street Address			-			
□ Facility Closed/Vacate					ment		27 Outwater	Lane			4		
☐ Abatement Performed	Outside of N	ormal Fa	cility	Hou	s - Des	scribe	City, State, Zip Co						
Time of Abatement:	AM	PM/_	- 65	_PM-		AM	Garfield, NJ	W-200					
Scope of Work (Check all	that apply)	545	27				ne -		203	-		-	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				novati			☐ Mini-End ☐ Glovebag	Procedure	gative Pressure on-Friable Procedu	re		¥	
				Locat					2.	Ab	atem	ent T	уре
Location of Asbestos-Containing N		4)		lorma d Sole		Acho	Description o stos Containing Ma		Amount	R	R	Щ	ш
TO BE ABA	TED	· .		ntena			e., thermal systems		(Specify	Remova	Repair	cap	Enclosure
IN Facility (13)	y		JUSI	(12)	Staff?		surfacing, VAT, other miscellane		SF or LF)	Va.	,	Encapsulate	sure
(13)		Y	es	No	N/A		other miscellane	ous)				te	1 200.00
Basement		E				Pipe In:	sulation		160 LF				
Basement]		\boxtimes	Mudde	d Fitting Insulati	on	15 LF	\boxtimes			
Garage Window						Windov	v Caulking		10 LF	\boxtimes			
Name of Registered Wast	e Hauler		-	1,588	JDEP \		Cubic Yards of	Name of Regis	stered Landfill				
Century Waste Serv	ices LLC			Н	auler II 32797		Waste As Needed	IESI Bethle	ehem Landfill				
City, State							Disposal Date	City, State					
Elizabeth, NJ							TBD	Bethlehem	i, PA	2		î	
Completed By (Print or Ty	pe)	Title					Signature	1	Da	ije, /	, 1	1.	
Allen Monchik		Proj	ect	Mana	ager		190	0-1-		4/1	4	16	

ASB-41 JAN 13

CK 1707

Date of Notification (1)				Nam	e of Ruildi	ng Owner/Operator (2)		11		1	
09 /	14 /	16				f Property Manag	5 50	struction	SECULE AND			
Agencies Notified EPA	Type Notifi			Stree	et Address		The second secon	DECE		\mathbb{V}_{-}		M
☑ DOLWD ☑ DOH	Amende Amendr			City,	State, Zip	Code					- 1	
DCA		ncy (includin	a a	Tre	enton, N	J 08608	and the second	SEP 2	0 /	2016	11	الا
(NJAC 5:23-8)	justifica	tion)	3	Nam	e of Conta	ct		Telephone Num	ber			
	☐ Cancella	ation		Rie	ck Ferrei	ra		ASHESTON	100		DL &	ı.
				FA	CILITY	NFORMATION	- Table	ASBESTUS LICE	VSIN	IG_		
Name of Facility Where	Abatement is	Taking Plac	e (3)		V _ 4		Type of Facility	(4)				
Residential House							School (K-1	2) 8 (Other than K-12	ıx.			
Street Address								private and commer		uildin	gs,	
City (5)		Par III			Ten control	18	Square Feet	# of Floors	E	Ildg. A	Age	
Linden, NJ										3	3-	
County (6)			10	Cou	nty Code	(7)(STATE USE ONLY)	Current Use (P	rior if being demolis	shed)			
Union	2.2					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
Name of Monitoring Firm		lding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				
Bio Terra Solutions	5				4.15	ALL PRO MA	NAGEMENT L	.LC				
Street Address						Street Address					37	
P.O. Box 1224			- 1	S 5 '	10 00	27 Outwater I						
City, State, Zip Code Union, NJ						City, State, Zip Co						
Project Manager for Moni	itorina Firm	4 28 0 E	TTO	lephone	No	Garfield, NJ Telephone No.	07026		- 1	200		
Rick Eustaquio	itoring r iiiii			973-494		973-928-4888		License No.				
Start Date (10) 09		Scheduled C	omp	letion Da	ate (11)	Name of OSHA M	0.0					
Occupancy Status During Facility Closed/Vacate	ed During Ent	ire Period of	Abat			Street Address 27 Outwater L	_ane		6	9		
Abatement Performed	Outside of N	lormal Facilit	y Hou	urs - Des	scribe	City, State, Zip Co	de				V	-
Time of Abatement: _		PIVI/	_PIV	1	_AIVI	Garfield, NJ	07026					
Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	that apply)	□ Re				☐ Mini-Encl ☐ Glovebag	Procedure	gative Pressure n-Friable Procedur	e			
Location	of		Loca Norm						Ab	atem	ent T	уре
Location Asbestos-Containing N TO BE ABA IN Facilit (13)	Material (ACN TED	И) Use Ma	d So inten	lely by ance/ Staff?		Description of estos Containing Mat e., thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Basement		Yes	No	N/A	VAT			350 SF			0	
									1			
Exterior						t Shingles under		2,500 SF		Ш	Ш	
Basement					Duct V	ibration Joint Clo	th	2 SF				
Name of Registered Wast Century Waste Serv			1.5	NJDEP N Hauler II	O No.	Cubic Yards of Waste	Name of Regis	tered Landfill hem Landfill				
City, State Elizabeth, NJ				32797	N.	As Needed Disposal Date TBD	City, State Bethlehem	PΔ				
Completed By (Print or Ty	ne)	Title					Demienen	data aspir	1		1	
Allen Monchik	he)	Title Project	Mar	ager		Signature	1/1	Dal	7/1	4-1	1/1	0

Date of Notification (1)				Nam	e of Buildi	ing Owner/Operator ((2)			10		-
	16			Di	vision of	f Property Manag	ement & Cons	truction				
Agencies Notified Type Notifi	cation			Stree	et Address	3		MEC	15	11 1		
⊠ EPA				20	W. State	e Street, 3rd Flr.				<u> </u>	/ L	-
☑ DOLWD ☐ Amende				City,	State, Zip	Code						-
DOH Amendr ☐ DCA	_	aludia	-	Tre	enton, N	J 08608		III CE	P 2 (20	16	HL
(NJAC 5:23-8) justifica		ciuuiii	g	Nam	e of Conta	nct		Telephone Nu		1 20	1.0	1-
☐ Cancella	ation			Rie	ck Ferre	ra			<u> </u>			١
				FA	CILITY	NFORMATION		ASBES	TOS C ICENS			_ X-
Name of Facility Where Abatement is	Taking	Place	e (3)				Type of Facility	(4)	IOLIV	J1: 4C		
Residential House	77.7						School (K-12		. 1.			
Street Address				9			☐ Subchapter 8 ☐ Other (i.e., potential homes, etc.)	rivate and comm		uildin	gs,	
City (5)	0 0	Y			lg I		Square Feet	# of Floors	В	ldg. A	qe	
Linden, NJ											5	
County (6)	77 .20	E.		Cou	nty Code ((7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			
Union												
Name of Monitoring Firm Hired by Buil	lding O	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					1
Bio Terra Solutions	e (58)			4		ALL PRO MA	NAGEMENT L	LC				
Street Address						Street Address						
P.O. Box 1224			7 5			27 Outwater I						
City, State, Zip Code						City, State, Zip Co						
Union, NJ	- 1	The part of	1-1			Garfield, NJ	07026					
Project Manager for Monitoring Firm Rick Eustaquio				ephone 73-49 4		Telephone No. 973-928-4888		License No.				
A CONTRACTOR OF THE PROPERTY O	Schedu	ıled C		etion Da	C 1800 C 1800 C	Name of OSHA M		1100				
09/19/16				1_ /			NAGEMENT LI	_C				
Occupancy Status During Abatement (Check	only c	one)		-	Street Address						
☐ Facility Closed/Vacated During Enti		2011		ement		27 Outwater L	ane					
☐ Abatement Performed Outside of N	ormal F	acility	y Hou	rs - Des	cribe	City, State, Zip Co				2		
Time of Abatement:AM	РМ		_PM		AM	Garfield, NJ (
Scope of Work (Check all that apply)		-	Te .					17)	. 5	-		
		☐ Re ☑ De				☐ Mini-Encl ☐ Glovebag			uro.			
		Is	Loca	tion		M MOII-EXCI	Inpled () and Nor	I-I Hable I Toced		atem	ont T	uno.
Location of			lorma			Description of				1		
Asbestos-Containing Material (ACM TO BE ABATED	1)		intena	ely by ance/		estos Containing Mat e., thermal systems in		Amount	Rem	Repair	nca	ncl
IN Facility		Cust		Staff?	(1.0	surfacing, VAT,	or	(Specify SF or LF)	Remova	air.	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A		other miscellaned	ous)		-		late	o,
Interior- under stairs					VAT			2 SF				
Kitchen					VAT,Ma	astic		360 SF	\boxtimes			
Exterior	1				Windov	w Caulking		150 LF				
Exterior	1			\boxtimes	Cemen	t Drain Pipe		102 LF				
Name of Registered Waste Hauler			IN	JDEP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill				
Century Waste Services LLC			H	1201er 10 32797		Waste As Nooded		hem Landfill				
City, State				32191	<u> </u>	As Needed Disposal Date	City, State				. 1550	
Elizabeth, NJ						TBD	Bethlehem,	PA	A			
Completed By (Print or Type)	Title		-			Signature	1	Ī	ate /		3 /	
Allen Monchik	Pro	ject	Man	ager		V (V)(X)_	1/		9/1	41	16	,
							- 0		161	. 1	*	

CK 1707

Date of Notification (1)				TMan	o of Puils	diag OurselOt	(0)		1		l	
09 /	14 /	16				ding Owner/Operator of Property Manag		ruction E	C E	3 [W	E
Agencies Notified	Type Notifica	ation			et Addres		gernent & Consi		U L	للد	<u>U</u>	
⊠ EPA	☐ Initial	20011		110000000000000000000000000000000000000		te Street, 3rd Flr.						
☑ DOLWD	☐ Amended			-	State, Zi			<u> </u>	EP :	20	2011	6
☑ DOH ☐ DCA	Amendme					NJ 08608						
(NJAC 5:23-8)			ng		e of Cont			Telephênê Nût	35635	00	NITO	
	☐ Cancellat			Ri	ck Ferre	era		Cichibite Mi	DINEL	Sil		OL
				FA	CILITY	INFORMATION						
Name of Facility Where A	Abatement is T	aking Pla	ce (3))			Type of Facility	(4)				
Residential House							School (K-12)				
Street Address				1 1			Subchapter 8	(Other than K-1	2)		102020	
		2					homes, etc.)	ivate and commi	erciai t	ouliair	igs,	
City (5)				7			Square Feet	# of Floors	E	Bldg. /	Age	
Linden, NJ	1 19			3	m			100				
County (6) Union				Cor	inty Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			
	IP 11 5 99		121			that the last						
Name of Monitoring Firm Bio Terra Solutions		ing Owner	(8)	ASCN	1 No.		ent Contractor (9)		37		-	7
Street Address		1		135			NAGEMENT LI	_C				
P.O. Box 1224						Street Address						
City, State, Zip Code		11 11 11	1 1		and I	27 Outwater						
Union, NJ						City, State, Zip Co					100 10	
Project Manager for Monit	toring Firm		Te	elephone	No.	Telephone No.	07020	License No.				- 60
Rick Eustaquio				973-494		973-928-4888		1188				
Start Date (10)		cheduled (Comp	oletion Da	ate (11)	Name of OSHA M		1				-
09 /19 /	16	10	/ _:	31 /	16	ALL PRO MA	NAGEMENT LL	С				
Occupancy Status During						Street Address				18.2		
Facility Closed/Vacated	d During Entire	Period of	Aba	tement		27 Outwater I	Lane					
Abatement Performed Time of Abatement:	Outside of Nor	mal Facili	ty Ho	urs - Des	scribe	City, State, Zip Co	ode		-			
				VI-	Alvi	Garfield, NJ	07026					
Scope of Work (Check all	that apply)					□ F::!! C						-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		□ Re ⊠ De				☐ Mini-Encl	Procedure					
		l ls	Loc	ation	T	☑ Non-Exer	mpted (*) and Non	-Friable Procedu	-			
Location o			Norm	ally		Description of	f			atem	_	T
Asbestos-Containing M TO BE ABAT				olely by nance/		estos Containing Mat e., thermal systems i		Amount	Remova	Repair	Encapsulate	Enclosure
IN Facility	,	Cus	7577	I Staff?	(1.1	surfacing, VAT,	or	(Specify SF or LF)	lova	air	apsu	nso
(13)		Yes	(12 No		1	other miscellaned	ous)	90000 NASA PARAME	_		ilate	6
Kitchen				⊠	VATER	aatia		400.00	F-3			
- titolion					VAT,M	astic		120 SF		Ш		Ш
								į.				
						N .			П	П	П	П
Name of Registered Waste	Hauler	-	100	NJDEP V		Cubic Yards of	Name of Registe	red Landfill	1			-
Century Waste Service	ces LLC			Hauler II 32797		Waste	IESI Bethleh					
City, State				32131		As Needed Disposal Date	City, State					
Elizabeth, NJ						ТВР	Bethlehem,	PA	1		i-	
Completed By (Print or Typ	e) T	Title				Signature	1	Da	te/	12 94	1.	
Allen Monchik		Project	Mar	nager		1 4110	1		91	4.1	11	2
SB-41							· V		7. 1	- 1	1 -	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)				1	Nam	e of Buildir	ng Owner/Operator ((2)		1			
09/	14/	16			Di	vision of	ng Owner/Operator (Property Manag	ement & Const	ruction	F	1/7 П	7 [
Agencies Notified EPA	Type Notific						Street, 3rd Flr.	and the second s	DEG		<u>U</u>		4
☑ DOLWD	Amende	35.		1		State, Zip				P 2 (20	16	1
□ DCA	Amenda ⊠ Emerge		lina		Tre	enton, N	J 08608		II II DE	F 61	1 60	10	-
(NJAC 5:23-8)	justificat	tion)	iiig	İ	Name	e of Conta	ct		Telephone Nu	mber			1
	☐ Cancella	ation			Ric	ck Ferrer	a				- A 17		_ &
e e					FA	CILITY I	NFORMATION		L	-HULIN	OHAN		
Name of Facility Where	Abatement is	Taking Pla	ace (3	3)	W.			Type of Facility	(4)				
Residential House	е							☐ School (K-12	2)				
Street Address	9						1 2 3 A	Subchapter 8 Other (i.e., printed homes, etc.)	rivate and comm	12) nercial b	uildin	gs,	
City (5)				-	0			Square Feet	# of Floors	E	Bldg. A	ae	
Linden, NJ									8.5			3.	
County (6)		1 11 1			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			
Union					10								
Name of Monitoring Fire	m Hired by Buil	lding Own	er (8)	I	SCM	No.	Name of Abateme	ent Contractor (9)	7 1 1 1 1 1 1			100	
Bio Terra Solution	IS							NAGEMENT LI	LC				
Street Address			7		74		Street Address		207 11 14 2			7.5	5(120
P.O. Box 1224							27 Outwater	Lane					
City, State, Zip Code	The state of the s						City, State, Zip Co	ode					-
Union, NJ							Garfield, NJ	07026					
Project Manager for Mor	nitoring Firm		1		hone		Telephone No.		License No.				
Rick Eustaquio				97	3-494	-3762	973-928-4888		1188				
Start Date (10)09 /19 /	o escendo e escendo	Scheduled 10			on Da	and the second	Name of OSHA M	lonitor NAGEMENT LL	_C		375.4		
Occupancy Status Durin	ng Abatement (Check onl	y one	2)			Street Address						_
Facility Closed/Vacat							27 Outwater I	_ane					
☐ Abatement Performe	d Outside of N	ormal Fac	lity H	ours	- Des	scribe	City, State, Zip Co	ode					
Time of Abatement:		F IVI/		· IVI		AIVI	Garfield, NJ	07026					
Scope of Work (Check a	III that apply)	0 -	R.S.						- 1				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Renov				☐ Mini-Encl			lure			
6			Is Lo	catio	n			I A TOTAL TO			atem	ent T	VDE
Location	T-1707	. 11	Nor sed S	mally			Description of			200	-	Γ	T
Asbestos-Containing TO BE AB		") 1	/lainte	enan	ce/		stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facil		Ct	ıstodi	ial S 12)	taff?	(surfacing, VAT,	or	SF or LF)	oval	·	nsd	Sur
(13)		Ye	1	10	N/A		other miscellaned	ous)				ate	Ф
Exterior				-		Window	v Caulking		110 LF		\vdash	П	
			1			Williady	Vadikiig		TIOLI		H		
			-		_	-					H		
			[-							닏		
Name of Death to diffe	to the Lee]	Ц							Ш	П
Name of Registered Was					DEP \ uler [Waste O No.	Cubic Yards of Waste	Name of Regist					
Century Waste Ser	VICES LLC				2797		As Needed		hem Landfill				
City, State							Disposal Date	City, State	D.A				
Elizabeth, NJ							TBD	Bethlehem,	PA		Γ	ĵ.	
Completed By (Print or T	ype)	Title					Signature	1		Date /	IA	11.	, 1
Allen Monchik		Proje	ct Ma	anaç	ger		I IVL	$\sim V$		41	14	1/1	-2

Date of Notification (1)			-	-	Nam	e of Buildi	ng Owner/Operator	(2)			1	(netering
	14/	16	-3				Property Manag		ruction E		E	P	
many control of the c	ype Notific ☑ Initial	cation			150000000000000000000000000000000000000	et Address W. State	Street, 3rd Flr.						
☑ DOLWD [Amende	ed .				State, Zip			SEP	20	16	1	1
Ø DOH	Amendr				Secretary Section	enton, N.		i tal tar					day and and
DCA (NJAC 5:23-8)	☑ Emerger justificat		ding			e of Conta			Telephone Nui	TLAGA	F5/51	_ إ	-
N. 12 (2017) - 1 (2017)	☐ Cancella				100000	ck Ferrer		1 1	Verebrioue Mili	nner I	HILL	OL	-
										21			
Name of Facility Where Aba	ofom antini	T-1: D	-	(0)	FA	CILITY	NFORMATION						
Residential House	atement is	Taking P	lace	(3)				Type of Facility (☐ School (K-12)	3 50				
Street Address		_						Subchapter 8	(Other than K-1				
								Other (i.e., pri	ivate and comm	ercial b	uildin	gs,	
City (5)		377						Square Feet	# of Floors	Te	ldg. A	100	
Linden, NJ								oquai o i cot	# 01 1 10013		nug. 7	ige	
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demo	ished)			
Union					1								
Name of Monitoring Firm Hi	red by Buil	ding Owr	ner (8	3)	ASCM	No.	Name of Abatem	ent Contractor (9)					
Bio Terra Solutions							ALL PRO MA	NAGEMENT LL	C				
Street Address					1	¥/2 = 2	Street Address					0000	
P.O. Box 1224		7 1					27 Outwater	Lane					
City, State, Zip Code	E	1.7 A4	¥4,		- 1		City, State, Zip Co	ode					
Union, NJ				# 10 m			Garfield, NJ	07026					
Project Manager for Monitor	ing Firm	\$		Tele	phone	No.	Telephone No.		License No.				
Rick Eustaquio				97	73-494	-3762	973-928-4888	3	1188				
Start Date (10) 09		Schedule 10			tion Da	1000	Name of OSHA M	Monitor	C		5,		
Occupancy Status During Al		10.00					Street Address						
☐ Facility Closed/Vacated [ment		27 Outwater	l ane					
☐ Abatement Performed Ou	utside of No	ormal Fa	cility	Hour	s - Des	scribe	City, State, Zip Co						
Time of Abatement:	AM	PM/_		_PM-	E	AM	Garfield, NJ						
Scope of Work (Check all that	at apply)		1 112		0		Carriera, 140	07020			5.4	il.	
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	,,,,,			ovati nolitic			☐ Mini-Enc ☐ Glovebag	g Procedure					
			1- 1					mpted (*) and Non-	-Friable Procedu	ıre			
Location of				ocat orma			Description			Ab	atem	ent T	
Asbestos-Containing Mat		1) (ly by	Asbe	Description o estos Containing Ma		Amount	Re	Re	E	Enclosure
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IN Facility (13)			,,,,,,,	(12)	otan:		surfacing, VAT, other miscellane		SF or LF)	a	1	Encapsulate	ure
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Interior						White t	extured finish (to	op coat)	400 SF	\boxtimes			
Exterior- Roof					\boxtimes	Black s	hingle roof		2,000 SF	\boxtimes			
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Allen Monchik	85	Proje	ect N	/lana	iger		11 011/10	-1~	- (71	14-1	14	,

ASB-41 JAN 13

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

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Project Manager for Moni Rick Eustaquio	itoning Firm				phone	-3762	Telephone No.		License No.				
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Bio Terra Solutions				4 3 1		ALL PRO MA	NAGEMENT LL	_C				
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Project Manager for Monit	toring Firm		T	elephon		Telephone No.	**************************************	License No.				
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Union, NJ			180			Garfield, NJ						
Project Manager for Mon	itoring Firm		Tele	ephone	No.	Telephone No.		License No.				
Rick Eustaquio			9	73-494	4-3762	973-928-4888		1188				
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09/19/	16	10 /	_ 3	1_ /	16	ALL PRO MA	NAGEMENT L	LC				
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□ Facility Closed/Vacate						27 Outwater	Lane					
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Time of Abatement: _	AMF	'M/	PM		_AM	Garfield, NJ	07026					
Scope of Work (Check all	that apply)					1 47 252						
☐ ≥3 sf or ≥3 lf		ПР	novat	ion			ainment with Neg	ative Pressure				
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Living Room- Closet		1			VAT			30 SF		Ш		L
Name of Registered Wast	e Hauler		100	JDEP \		Cubic Yards of	Name of Regist	tered Landfill				A
Century Waste Serv	rices LLC		H	auler II 32797		Waste As Needed	IESI Bethle	hem Landfill				
City, State				52131		Disposal Date	City, State					
Elizabeth, NJ						ТВО	Bethlehem,	PA	1000			
Completed By (Print or Ty	pe) Titl	е				Signature /	1 1.	Da	ite /	1	4	

Allen Monchik

Project Manager

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-16 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ August 29, 2016 Street Address Notification Type Agencies Notified ENVIRONMENTAL HEALTH & SAFETY DEPT ☑Initial Notification **D**EPA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ☐ Amended Notification # DDCA City, State, Zip Code ■ Emergency (including X DOL PISCATAWAY, NJ 08854 justification) ▼ DEP- No Longer REQUIRED Name of Contact -- N mher Telc--□Cancelled MICHAEL SMITH, ENV. X DOH ASBESTUS CO. ITROL & **HEALTH & SAFETY** FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) 77 HAMILTON AVENUE, BLDG# 3015 ☐ School (K-12) ☐Subchapter 8 (other than K-12) Street Address ☑ Other (i.e. private & commercial buildings, homes, etc.) **COLLEGE AVENUE CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 100+ years County (6) County Code (7) (State Use Only) Current Use (prior if being demolished): ACADEMIC **NEW BRUNSWICK** MIDDLESEX Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Contractor (9) ASCM No. 0098 ATC GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 609-386-8800 BRIAN KEARNY 00840 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09/16/16 09/19/16 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe XOther - Describe: Schedule: 4PM - 5AM (24 HOURS & WEEKENDS AS NEEDED) FAIRLAWN, NJ Scope of Work (Check all that apply) □ Full Containment with Negative Pressure □ Renovation ■ Mini-Enclosure $\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$ ☐ Demolition ☐Glovebag Procedure / Wrap & Cut ≥ 160 sf or ≥ 260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Type Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount (Specify SF (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Solely by Maint./Custodial Remove Repair Encap Enclose VAT, or other miscell.) or LF) Staff? (12) YES NO NA Rooms 100, 101B VAT 300 SF X X NJDEP Waste Hauler ID # Name of Registered Landfill Name of Reg. Waste Hauler 5 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 09/19/2016 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP# 4509 215-736-1700 Completed by (Print or Type) Signature SENIOR PROJECT August 29, 2016 RAYMOND C. PEDALINO Raymand C. Pedalino MANAGER

				N OF ASBESTOS to NJAC 8:60 ar) AL	45	17	X	25	F
Date of Notification (1) 09/16/16				of Building Owner/ er Industries	Operator	(2)) E (GEI	W	E	M	7
	Notification		Street A	Address State Street		A CALL OF THE PARTY OF THE PART					The state of the s	The state of the s
X DEP X DOL	Initial Amended Amendment #			ate, Zip Code Amboy , NJ 0	8861	A PRESENTATION OF THE PRES	11 51	P 20	2016		IJ	
× DOH	Emergency (including justification) Cancellation	g	Name o	f Contact		Control of the Contro	ASBES	POS CON	Wher C)L &		
	11 T 11 BI	(2)	FAC	ILITY INFORMAT	ION				10			
Name of Facility Where Abaten Autcher Industries	nent is Taking Place	(3)				Type of Facili	E SW					
Street Address 1200 State Street	110 M / Add 20 10 M / Add 20 1					Other (i.	ter 8 (Oth	er than K-1 & commerci		dings,	home	es,
City (5) Perth Amboy						etc.) Square Feet	# 0	f Floors	В	ldg. A	ige	
County (6) Middlesex County				Code (7) USE ONLY)		Current Use (Prior if be	ing demolis	hed)			
Name of Monitoring Firm Hired	by Building Owner (8	3)	ASCN	И No.	The state of the s	of Abatement Abatement	Contractor	(9)				
Street Address					48 E-20 E-20 E	Address 87th Street	Suite A	4				
City, State, Zip Code					City, S	State, Zip Code h Bergen, N						
Project Manager for Monitoring	Firm		Telepho	ne No.	Teleph	none No. 293-6305		License N 01223	lo.			
Start Date (10) 09/26/16	Schedu 11/26/		npletion	Date (11)		of OSHA Moni		G LLC				
Occupancy Status During Abate	ement (Check Only C	ne)				Address						
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City, State HILLSIDE, NJ				Dispo	sal Date	City, S MOR	tate RISVILI	E PA				
Completed by Bryan Parra	Title Proj	ect Ma	nager		Signatur	HURTH	ana) Da	ite 9/16/1	6		

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	of Notification (1) 4/16				Name o Ikay H	f Building Owner/0 enry	Operator	(2)	1	D)r	56		_₩	<u> </u>	
×	cies Notified EPA DEP DOL	Type Notification Initial Amended Amendmen Emergency	t #			ddress ate, Zip Code Orange, NJ					SEP	2 O	201 201		<u> </u>
_	DOH DCA	justification) Cancellation	1		Name o	f Contact				Tele	ephone Nú	mberS	ING		
					FACI	LITY INFORMATI	ON								
	of Facility Where A Henry	Abatement is Takii	ng Place (3	3)				Тур	oe of Facility School (K-						
Stree	t Address		***************************************					×	Subchapte Other (i.e.	r 8 (Othe	er than K-1 & commerc	2) ial buil	dings,	home	es,
City (5) City of Orange County (6)															
County (6) Essex County County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished)															
Essex County (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Pro Abatement															
Street	t Address	Material Control of State of S					Street 1009		ress th Street S	Suite A	4				
City, S	State, Zip Code								Zip Code ergen, NJ (07047					
Projec	ct Manager for Mon	itoring Firm		1	Telepho	ne No.	Teleph 201-		No. -6305		License N 01223	lo.			
	Date (10) 5/16		Schedule 09/25/1		pletion	Date (11)			SHA Monitor IM CONSU		3 LLC				
Occup	pancy Status During	Abatement (Che	ck Only Or	ne)			Street			7 7 7 7			17-17-17		
X F	acility Closed/Vaca	ated During Entire	Period of A	Abatem	ent		1600	RC	OUTE EAS	TSU	ΓΕ 107				
	Abatement Perform						City, S	tate,	Zip Code						
	Other - Describe: _						UNIC	NC	NJ 07083						
Scope	e of Work (Check A	ll That Apply)													
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	Baseme						Other				0 LF	x			
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	2nd Flo	oor					Oher			1	0 LF	X			

Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste **NEWARK CARTING** WASTE MANAGEMENT GROWS N. 04509 City, State Disposal Date City, State MORRISVILLE PA HILLSIDE, NJ Completed by Title Signature Date Bryan Parra Project Manager 09/14/16

Date of Notification (1) Name of Building Owner/Operator (2) 09/12/16 Joan Stein Agencies Notified Type Notification Street Address **EPA** Initial × City, State, Zip Code DEP Amended × DOL Amendment # East Rutherford, NJ Emergency (including Name of Contact Telephone Number DOH justification) **\$BESTOS CONTROL &** × DCA Cancellation **FACILITY INFORMATION** LICENSING Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Joan Stein School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, City (5) # of Floors Square Feet Bldg. Age East Rutherford County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Bergen County Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Pro Abatement Street Address Street Address 1009 87th Street Suite A4 City, State, Zip Code City, State, Zip Code North Bergen, NJ 07047 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201-293-6305 01223 Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) HILMAMM CONSULTING LLC 09/16/16 09/26/16 Occupancy Status During Abatement (Check Only One) Street Address 1600 ROUTE EAST SUITE 107 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: **UNION NJ 07083** Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure × ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure × Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Repair Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement TSI 222 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste **NEWARK CARTING** WASTE MANAGEMENT GROWS N. 04509 City, State Disposal Date City, State HILLSIDE, NJ MORRISVILLE PA Completed by Date Signature Bryan Parra 09/12/16 Project Manager

NO 1972307	487	VOTIF	St. CATION	ate of Nev I OF ASBI	w Jersey ESTOS A 8:60 and	ABATEI	ME 0)	ENT	(D)	EC	r n	Π./7			
Date of Notification (1) 09/14/16	700	الار		f Building					K	EG		<u>W</u>	E		
Agencies Notified Type Notification		-	Street A					2.5	Щ	GER	- 6	2016		H	
EPA Initial		-	Cib. Che	to 7:n Co	do								-		
X DEP Amended Amendment				ite, Zip Co cus , NJ					AS	BESTOS LICE	CON	ITRO)L &		
Emergency (justification)	including		Name of	f Contact					Tel	ephone Nu	mber	-		_	
□ Cancellation			FACI	LITY INFO	ORMATIC	ON									
Name of Facility Where Abatement is Taking Yan Julia Li	Place (3	3)					1	Type of Facility							
Street Address									er 8 (Oth	er than K-1 & commerc		linas	home	20	
C:h. (5)							L	Other (i.e. etc.) Square Feet		f Floors		ldg. A		.5,	
City (5) Secaucus								oquare reet	# 0	1110015		iug. A	ge		
County (6)				Code (7)	1		C	Current Use (P	rior if bei	ng demolis	hed)				
Hudson County Name of Monitoring Firm Hired by Building (Owner (8)		ASCN			Name	ame of Abatement Contractor (9)								
, , , , , , , , , , , , , , , , , , , ,				::::::::::::::::::::::::::::::::::::::		Pro /	AŁ	patement							
Street Address									Street Suite A4						
City, State, Zip Code								te, Zip Code Bergen, NJ	07047						
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph	hor	ne No. 93-6305		License N 01223	lo.					
Start Date (10) 09/19/16	Schedule 09/29/		HILI					OSHA Monito		G LLC					
Occupancy Status During Abatement (Chec			1600					ddress ROUTE EAS	ET SIII	TE 107					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of / al Facility	Abater / Hour	ment s			City, S	Sta	te, Zip Code N NJ 07083		12 107					
Scope of Work (Check All That Apply)						01410	-	14143 07000					-//		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					e				
		Locat											ement pe		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole intena todial (12)	ely by ince/ Staff?			Ma ns i AT,	terial (ACM) nsulation, or	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A										le le		
Basement						TSI	400		2	50 LF	X				
Name of Registered Waste Hauler NEWARK CARTING		NJDEP Waste Cubic Hauler ID No. of Was 04509							ered Landfil NAGEME		ROV	VS N	1.		
City, State HILLSIDE, NJ		Disposal Date				3	City, St MORE	ate RISVILI	LE PA						
Completed by Bryan Parra	ect M	ct Manager Signature				ZIUHA	M	1// 14	ate 9/14/1	16					

									1	_		ل	4	1	4	
Date of Notification (1) 09-12-16			Name of Building Owner/Operator (2) Michael Jozsa Jr.											- Parent		
Agencies Notified	Type Notification		-	Street A						E 6		\mathbb{W}				
□ EPA	Initial								1131							
DEP	Amended Amendment	4			ite, Zip Co Hills, NJ		2		A comment	SE	P 2.0	201	9	U		
_	Emergency	(including	-		f Contact	07070			final land	Telen	hone Nu	nher				
DOH DCA	justification) Cancellation				el Jozsa	Jr.			l A	STE .			UL 8	×		
		5, ,,		FACI	LITY INFO	ORMATI	ON	-			ICENO	NG				
Name of Facility Where A Private Home	Abatement is Takin	g Place (3	3)						f Facility (4)							
Street Address								☐ S	chool (K-12) ubchapter 8	(Other						
									ther (i.e. pri	vate &	commerci	al buil	dings,	home	es,	
City (5)								Square		# of F	loors	В	ldg. A	ge		
Short Hills	•			0	0! - /7\			0	4.11 (D-1	is to a to a		1				
County (6) Essex					Code (7) USE ONLY)				t Use (Prior			ied)				
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	/ No.		Name of Abatement Contractor (9) Delfa Contracting LLC.									
Street Address	10000000000000000000000000000000000000		18-31.11/11				Street Address 522 7th St.									
City, State, Zip Code							City, State, Zip Code									
Oity, Otate, Zip Gode									NJ 07087							
Project Manager for Mon	oject Manager for Monitoring Firm							none No. 216-96			License N 01206	0.				
Start Date (10) 09-14-16							200000000000000000000000000000000000000		A Monitor acting LL	С						
Occupancy Status During	g Abatement (Ched	k Only On	ie)					Address	3							
Facility Closed/Vaca								7th St.	0-4-	- C 11				23-23-2		
Abatement Performed Other – Describe: _		nai Facility	nour	S 			87.5	state, Zip in Citv	NJ 07087	,						
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf			Renova				Full Containment with Negative Pressure									
≥160 sf or ≥260 lf		r D	emoli	tion			Mini-Enclosure Glovebag Procedure									
	•	T					Į.		-Exempted		Non-Friab	le Pro	cedur Abate			
		1000	Locat			_								pe		
Location Asbestos-Containing		Use	d Sole	ely by		tos Cont		/laterial (Am	ount			Ш		
TO BE ABA In Facili			todial		(i.e.		system cing, VA	s insulat T. or	ion,		ecify or LF)	Remova	Repair	ncap	Enclosure	
(13)	5		(12)			other n	niscellar	neous)				oval	air	Encapsulate	sure	
		Yes	No	N/A										Ф		
1st Floor / k	Kitchen		Х			Lir	noleou	m		750	SF	X				
				CALARSON -												
	0.00															
Name of Registered Was			2.0	NJDEP Waste Cubic Yards Hauler ID No. of Waste					Name of Re				an/ E	acili	hv	
Delfa Contracting LL				35240 30					987 / Sec 19					Ly		
City, State Union City, NJ				Disposal Date 09-16-16				Maria de la companya								
Completed by Title					Signature				1		Da		4.0			
Jaime Delgado	Man	ager.				18			09)-12-	16					

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

Print	Form
FIIIIL	LOUIL

JO CK			ICATION	N OF ASB to NJAC	ESTOS	ABATEN		EG	E		\mathbb{V}	E	M		
Date of Notification (1) 9/2/2016				of Building y Hallow			(2) pers URI		SEP	2	0 2	2016	To the second se		
Agencies Notified Type Notification EPA Notification			Street A	Address Jeffesror	Rd S	uite 202	2		CDECT	26.0	200	ITDO	NI O		
DEP Initial Amended Amendment	#	İ		ate, Zip Co pany NJ					SBEST(CEN			La		
DOH Emergency justification)			0.01	of Contact	07301				Telephone	Num	ber	-			
DCA Cancellation			Dave	27.511(2.512.515)											
Name of Facility Where Abatement is Takin	g Place (3)	FAC	ILITY INFO	ORMAT	ION	Type of Fa	cility (4)							
Private Property							Scho	ol (K-12)	~						
Street Address							× Other		Other than ite & comm			dings.	hom	es,	
City (5)		<u> </u>					etc.) Square Fe	et	# of Floors		TE	Bldg. A	ge		
Plainfield NJ			Country	Codo (7)			4000		1	- H-1-		50			
County (6) Union				Code (7) USE ONLY			Current Us	e (Prior if	veing dem	ioiishe	ed)				
Name of Monitoring Firm Hired by Building N/A	Owner (8))	ASCN N/A	Л No.			ne of Abatement Contractor (9) nago Environment LLC								
Street Address N/A							et Address 9 Lafayette Street								
City, State, Zip Code N/A						75 SERVICE STATE OF SERVICES	ate, Zip Co ark NJ 07								
Project Manager for Monitoring Firm N/A		Telepho N/A	ne No.			one No. 191-0877		Licens 0124		1.					
Start Date (10) 9/12/2016	Schedul 10/10/2		mpletion	Date (11)			of OSHA Mo Environm		orp						
Occupancy Status During Abatement (Chec	k Only O	ne)					Address	11/2-24							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm							Route 22 ate, Zip Co								
Other – Describe:					_		NJ 0780								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mini-End Gloveba	losure g Procedu	with Negati ire and Non-F				e		
		Locat			725	50.38	120					Abate Ty	ement pe	t	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intena todial ((12)	ly by nce/		tos Cont thermal surfa		aterial (ACN insulation, , or	A)	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure	
Dailes	Yes	No	N/A X						01.5		-		е		
1st floor bathroom	Boiler						ion d mastic		6LF 341SF	_	Х				
back warehouse		X				mpound				X			-		
Dack Waleriouse			X	SHE	CK	Joint CC	nipound		700SF		Х				
Name of Registered Waste Hauler		1.5000	J JDEP W	1777 AV	Cubic		ards Name of Registered Landfill								
Newark Carting Inc						Hauler ID No. of Waste 04509			ISES Bethlehem Rd Landfill						
City, State Po Box 5670		Disposal Date				Date City, State 2335 Applebutter Rd Bethlehem Pr				PA					
Completed by Edwin Precilla	ct Ma	Signatu t Manager Ea				Date 9/2/2016									

$n \sim c \sim c$,		NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)													
Date of Notification (1) 9/2/2016					f Building y Hallow				s URF			<u> </u>				
Agencies Notified	Type Notification			Street A							Annual Property)EP	2 ()-20	16	
DEP DOL	Initial Amended Amendment		_	AND RESIDENCE OF COMME	ate, Zip Co any NJ						ASBE	STO	OS C	ON SINC	ROI	_&
DOH DCA	Emergency (justification) Cancellation	including		Name o Dave	f Contact Clark					 Tel	ephone	-	THE REAL PROPERTY.			
				FAC	ILITY INF	ORMATI	ON						DE - 60-50			
Name of Facility Where A Private Property Street Address	Abatement is Taking	g Place (3)					Тур	e of Facility (School (K-1 Subchapter	2)	or than	K 12	\			
								×	Other (i.e. p etc.)	rivate a	& comn	nercia	l build			s,
City (5) Plainfield NJ								800	11	1	f Floors		+	ldg. A 50	ge	
County (6) Union					Code (7) USE ONLY)		Curr	rent Use (Prid	or if bei	ng dem	nolish	ed)			
Name of Monitoring Firm N/A	Hired by Building (wner (8)		ASCN N/A	ЛNo.		Dina	e of Abatement Contractor (9) ago Environment LLC								
Street Address N/A								t Address Lafayette Street								
City, State, Zip Code N/A								Zip Code NJ 07105								
Project Manager for Mon N/A	itoring Firm			Telepho N/A	ne No.		Teleph 973-				Licen: 0124).			
Start Date (10) 9/12/2016		Schedule 10/10/2		npletion	Date (11)				SHA Monitor ronmental	Corp					-	
Occupancy Status During Facility Closed/Vaca				Street Address 2333 Route						st						
Abatement Perform Other – Describe:				ement												
Scope of Work (Check A	Il That Apply)			Union N3 07 803												_
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		_	Renova Demolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
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Location Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM)	Use Ma	d Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfac		Materia s insul T, or		Amount (Specify SF or LF)			Removal	Repair	Encapsulate	Enclosure
Windo		Yes	No	N/A		م ام ماندد		II alian an			6LF				œ .	
Windov		X		windo	w cau	iking		9		х						
						25										
Name of Registered Was	to Hauler		I NI	IDED W	lasta	Cubio	Varda		Name of F	Pagiata	rod I or	- HEII				
Newark Carting Inc	Н	NJDEP Waste Hauler ID No. 04509 Cubic Yards of Waste					Name of F	10 Euro			ndfill					
City, State Po Box 5670	Disposal Date					City, State 2335 Ap		ıtter R	Rd B	ethle	hem	PA				
Completed by Edwin Precilla	2-14-14 (1-14-14-14-14-14-14-14-14-14-14-14-14-14	ct Ma	nager	S	ignature &	ature Aul Date 9/2/201					16					

NOCK	(Pursuant to NJAC 8:60 and 12:120)										P	F		W	E	
Date of Notification (1) 9/2/2016				f Building C y Hallow				URE								
Agencies Notified Type Notification		- 1	Street A 80 S J	ddress leffesron	Rd S	Suite 20	2			Name of contrast	SE	2	0	2016)	
EPA Initial Amended Amendment #				ate, Zip Coo any NJ 0						ASE	EST	OS	CO	NTR	OL 8	
DOH justification Cancellation	ncluding	100	Name of Dave	f Contact Clark	20002		3 		Tele	ephone						
			FACI	LITY INFO	RMAT	ION										
Name of Facility Where Abatement is Taking Private Property	Place (3	3)					_	of Facility (100 7 10000							
Street Address								School (K-1 Subchapter Other (i.e. petc.)	8 (Othe			build	lings,	home	es,	
City (5) Plainfield NJ								re Feet	# of	Floors			ldg. A	ge		
County (6) Union				Code (7) USE ONLY)	_		Curre	ent Use (Pri	or if bei	r if being demolished)						
Name of Monitoring Firm Hired by Building On N/A	wner (8)		ASCN N/A	/I No.				atement Cor								
Street Address N/A	~_~					Street 339 I		ss ette Stree	et							
City, State, Zip Code N/A	- 17							ip Code J 07105								
Project Manager for Monitoring Firm N/A	ager for Monitoring Firm Te							o. 1877		Licens 01240						
	Schedul		pletion	Date (11)	and the second second			HA Monitor onmental	Corp		- 1- 0.1					
Occupancy Status During Abatement (Check	Only Or	ne)	Street Address													
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	eriod of A	Abatem / Hours	tement 2333 Route 22 West City, State, Zip Code Union NJ 07803						st ———							
Scope of Work (Check All That Apply)						Orno	11 140	07000				70-		(17.00)		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti				×						e.				
	Is	Location	on				,,		<u> </u>	.,,,,,,,,			Abate	ement	:	
Location of	1	Normalled Solel	y			escription					-		Ту	pe		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	intenan todial S (12)	ce/		therma surfa	ntaining Mal systems acing, VA miscellar	s insul T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure	
Front of the bldg floor	Yes	No	X X		loor t	ile and	maet	ic	Q.	00SF		ζ.				
near side door office 2 layers			X					d mastic		0SF	-	۲ .				
Boiler room						ct seam		825		0LF						
Roof						tar/flas	-	,			-					
	me of Registered Waste Hauler NJDEP Was						simig	Name of	4050SF x Registered Landfill							
Newark Carting Inc	auler ID 509	ler ID No. of Waste				dfill	I									
City, State Po Box 5670					Disposal Date City, State 2335 Applebutter Rd Bethlehem PA											
Completed by Edwin Precilla	Title Proje	Title Project Manager					Signature fel				Date 9/2/2016					

KY) (K		(P	ursuant	to NJAC	8:60 an	d 12:12	0)				60)		пп	7 5	3 1		
Date of Notification (1) 9/2/2016				of Building y Hallov				s URE	ID,	厚	G	E					
Agencies Notified Type Notification			Street A	ddress Jeffesror	n Rd S	uite 20	2		111		SEP	-	7 21	016	1 :		
EPA X Initial Amended Amendment				ate, Zip Co any NJ					zoul "	1			2011	TC/0	. 0		
DOH justification Cancellation	including			f Contact					Те	ASBE lephone	Nun	os (SIN(3 _	La		
			FACI	ILITY INF	ORMATI	ON	151 1 23							-			
Name of Facility Where Abatement is Taking Private Property	Place (3	3)					Тур	e of Facility									
Street Address							×	Subchapter Other (i.e. petc.)					dings,	hom	es,		
City (5) Plainfield NJ							Squ 48	are Feet	# 0	f Floors		- 1	ldg. A 50	ge			
County (6) Union				Code (7) USE ONLY)		Cur	rent Use (Pri	rior if being demolished)								
Name of Monitoring Firm Hired by Building C N/A	Wner (8)		ASCN N/A	A No.				nvironme									
Street Address N/A						Street 339 I		ess yette Stree	et								
City, State, Zip Code N/A						City, State, Zip Code Newark NJ 07105											
Project Manager for Monitoring Firm N/A	ect Manager for Monitoring Firm							No. -0877		Licens 0124).					
Start Date (10) 9/12/2016	Schedule		N/A npletion	Date (11)		Name	of O	SHA Monitor ironmental	Corn	1							
Occupancy Status During Abatement (Check						Street			ООГР				27/4/21/2				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of A	baten	ement 2333 Route 22 Westurs City, State, Zip Code					st									
Other – Describe:			Union NJ 07803										2002				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		enova emolit				×	N G	ull Containme lini-Enclosure Bovebag Prodon-Exempted	e cedure	0.72				е			
		Locati											0.51	ment pe			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormal d Sole intenai odial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfac	scription aining M systems cing, VA niscellan	lateri s insu T, or		(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Endosure		
	Yes	No	N/A											е			
							nent					х					
	-																
	\vdash																
Name of Registered Waste Hauler		IN	NJDEP Waste Cubic Yard			Yards	-	Name of	Reaiste	ered Lan	ndfill						
Newark Carting Inc	1 1 1 1 1 1 1 1 1 1 1 1	Hauler ID No. of Waste 04509				ISES B	170			ndfil	l.						
City, State Po Box 5670	Disposal Date City, Stat 2335 A					utter R	d Be	ethle	hem	PA							
Completed by Edwin Precilla	nager		S	ignature	1.	1	1/2		Date 9/2	e /201	6						

SUMMARY of ACM

Plainfield, New Jersey 07062 Block: 625; Lot: 20 1358 South Avenue



ROOF OVERHANG	FRONT STAIR 1ST FLOOR	2ND FLOOR	B/W ROOM	DRY CLEANER	[beneath] B/W ROOM	B/W ROOM	BACK ROOM IST FLOOR	BARBER SHOP	DRY CLEANER	Location
Black Tar Flashing	Textured Coating	Window Caulking	Joint Compound	Floor Tile	Floor Tile	Floor Tile	Floor Tile	Floor Tile	Pipe Insulation	Type of Material
4,800 sq. ft.	300 sq. ft.	560 LF	500 LF	350 sq. ft.	700 sq. 11.	700 co A	425 sq. ft.	410 sq. ft.	40' LF	Мициина Мининованиную принциу
Z	Z	Z	N	Z	Z	Z	Z	N	Υ	Friability (Y/N)
4	4	4	4	4	4	4	4	4	4	Condition
Abate	Abate	Abate	Abate	Abate	Abate	Abate	Abate	Abate	Abate	Recommendation

- 1 Good2 Good to Slightly Damaged3 Good to Damaged

- 4 Damaged5- Covered with Rug

f grm

								101	-						-	
Date of Notification (1) 9/2/2016			Name of Building Owner/Operator (2) Sleepy Hallow Fleet Developers URE											7.1		
Agencies Notified	Type Notification			Street A	ddress effesror	Rd Si	uite 20	2	1181					7		
DEP DOL	Initial Amended Amendment		_	City, Sta	ite, Zip Co any NJ	ode				S	EF no	201	6	L		
DOH DCA	Emergency justification) Cancellation			Name of Dave (Contact				AS	Tele	phone Num	ber	= :	L	No. of Contrast of	
_				FACI	LITY INFO	ORMATI	ON			-	Trensin	iu			1	
Name of Facility Where A Private Property Street Address	Abatement is Takin	ig Place (3	3)					Туре	School (K-12 Subchapter 8)	r than K-12)				
Street Address								×	Other (i.e. prietc.)				dings,	home	es,	
City (5) Plainfield NJ								100	· -	2	Floors	+	ldg. A	.ge		
County (6) Union					Code (7) USE ONLY)		Curr	ent Use (Prior	if bein	g demolish	ed)				
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN N/A	1 No.				atement Cont nvironment		9)					
Street Address N/A								Street Address 339 Lafayette Street								
City, State, Zip Code N/A							City, State, Zip Code Newark NJ 07105									
Project Manager for Mon	itoring Firm		Telepho N/A	ne No.		Telepi 973-		No. 0877		License No 01240).					
Start Date (10) 9/12/2016		Schedule 10/10/2							SHA Monitor ronmental (Corp						
Occupancy Status During	g Abatement (Chec	ck Only Or	ne)				Street	Addre	ess							
Facility Closed/Vaca Abatement Perform																
Other – Describe:							Section Control		07803							
Scope of Work (Check A	ll That Apply)						-	-								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demoli				2	M G	ull Containmer ini-Enclosure lovebag Proce on-Exempted	edure				e		
		1	Local	lian.						() =			lana min	ement	t	
Location	of		Norma			Do	scription	o of					Ty	ре	,	
Asbestos-Containing TO BE AB/ In Facil (13)	Material (ACM) ATED	Ma	ed Sole intena todial (12)	ance/ Staff?		tos Con thermal surfa	taining N	Materia is insu AT, or		Amoun (Specif SF or Li		Removal	Repair	Encapsulate	Enclosure	
Ond Floor	eitah an			×		f	oor tile			12	0 SF		-			
2nd Floor F	2nd Floor kitchen						OOI LIIE	-			0 5F	Х				
		+														
Name of Registered Was	ste Hauler		1 5 5	NJDEP W			Yards		Name of R	egister	ed Landfill	1				
Newark Carting Inc	1000	Hauler ID No. of Waste 04509				ISES Betniehem Rd Landfill										
City, State Po Box 5670						osal Date City, State 2335 Applebutter Rd Bethlehem				ı PA						
Completed by Edwin Precilla	ect M	anager		8	Signatur	lure Date 9/2/2016										

Date of Notification (1) 9/2/2016			Name of Building Owner/Operator (2) Sleepy Hallow Fleet Developers URE														
Agencies Notified	Type Notification	######################################	+	Street A	ddress				(2. + 2000) (3. +								
□ EPA	× Initial			80 S J	effesron	Rd St	uite 20	2	pursumo ₁ [7	7 6	0 E I	1 0.0	<u></u>	her water	7		
DEP × DOL	Amended Amendment		_ [ite, Zip Cod any NJ 0								E		1		
□ DOH	Emergency justification)) 			f Contact					Tele	phone Nu	mber	-		7 1		
☐ DCA	Cancellation			Dave (1							
Name of Facility Where	Abatamant is Takin	a Place (2	\	FACI	LITY INFO	RMATI	ON	Type o	f Facility (4)					1	1		
Private Property	Abatement is Takin	y riace (5	,					Type o	chool (K-12)	BES	TOS CO	ONTE	ROL	3.	L.		
Street Address								HS	chool (K-12) ubchapter 8	(Othe	LICENS	NG			-		
0,000,1000								X O	ther (i.e. pri	vate &	commerc	ial bui	al buildings, homes				
City (5)								Square	c.) Feet	# of	Floors	T	Bldg. A	Age			
Plainfield NJ								1000		2		- 1	-50	.5			
County (6)			T	County (Code (7)			Curren	t Use (Prior	if bein	ng demolis	hed)			-		
Union				(STATE U	USE ONLY)												
Name of Monitoring Firm	Hired by Building	Owner (8))	ASCM	1 No.			ame of Abatement Contractor (9)									
N/A				N/A			Dinago Environment LLC Street Address										
Street Address N/A							339 Lafayette Street										
City, State, Zip Code							City, State, Zip Code										
N/A	14			Talaaba	N-		Newark NJ 07105 Telephone No. License No.										
Project Manager for Mon N/A	ittoring Firm		Telephor N/A	ne No.			491-08			01240	40.						
Start Date (10) 9/12/2016		Schedule 10/10/2		npletion l	Date (11)				A Monitor nmental C	Corp							
Occupancy Status During	g Abatement (Chec	k Only On	e)				17000000	Address									
Facility Closed/Vac	ated During Entire I	Period of A	baten	tement					22 West				-				
Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Hours	\$			State, Zip on NJ 0										
Scope of Work (Check A	II That Apply)						01110	111100									
23 sf or ≥3 lf	//ide/ (pp.y/	Пв	enova	tion			Г	7 5.017	Containmen	t with	Mogative	Dressi	ro				
≥3 \$1 01 ≥3 11 × ≥160 sf or ≥260 lf		posterior .	emolit				×	Mini	Enclosure	L WILLI	ivegative	riessu	ii e				
TO COMPANIES HESSELF FOR SERVICE							×		Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					·o			
		Τ		-			Non-Exempted (*) a				I INOII-I IId	DIETT	7,6257	ement			
			Locati Iormal			-								/ре			
Location Asbestos-Containing		Use	d Sole	ly by	Asbesto		scription aining N	ı oı ∕laterial (ACM)	Ar	nount			Ш			
TO BE AB	ATED	1	ntena odial S		(i.e. ti	hermal	systems	s insulati	on,		pecify	Rer	R	nca	Enc		
In Facil (13)	ity		(12)			other n	cing, VA niscellar	neous)		SF	or LF)	Remova	Repair	Encapsulate	Endosure		
		Yes	No	N/A								<u>a</u>	'	ate	ē		
Basement near	crawl space			×		pipe	insula	ition		3	0LF	х					
Basement S		×	flo	oor tile	e and	mastic		3	0SF	х							
Name of Registered Was	te Hauler			IJDEP W			Yards		Name of Re	egister	red Landfi	II					
Nowark Carting Inc					Hauler ID No. of Waste 04509			ISES Bethlehem Rd Landfill									
City, State Po Box 5670						Disposal Date City, State 2335 Applebutter Rd Bethlehem PA					ı PA						
Completed by Title						TS	ignature	<u>_</u>	11	7	/	ate			_		
Edwin Precilla	Manager			Eden Mells 9/2/20					16								

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