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

Check 4482 RECEIVED

Date of Notification				W-207	N	ame	of	Bui	lding (Own	er / Opera	ator	(2)		90	110	-19	ho f	,	
	9/13	nin man			P	rinc	eto	on	Unive	ersi	ty				4	n Bldg. DESTOS & LICEN	-PM	12.	20	
Agencies Notified	Type N	Votificat	tion		S	reet	Ac	ldre	SS							D	. 81	16.	u B	
⊠ EPA					I	rusi	ee	s o	t Prin	ncet	on Unive	ersi	ty E.	A. Maci	viilla	n Bidd.	00.			
DEP		Initial			C	ity, S	Stat	e &	Zip C	ode	_					21105	LUA	ITR	0L	
□ DOL	\boxtimes		ded #4		P	rinc	ete	on,	NJ 0	854	4					OF LIVE	RZÍM	G.	,	2002
□ DOH □ DCA		Emerg			N	ame	of	Cor	ntact							l e	epho	ne N	umpe	er
☐ DCA	Ш	Cance	ellation		R					-	× 11									
N			T.I DI		(0)		CIL	IT)	Y INF		MATION	-1114.	. /4\							N. 2015
Name of Facility Wi				ace	(3)					- II	ype of Fa									
Princeton Univer	rsity –	Firest	one Library							-1	Schoo	•		041 41	- 1/ 4	10)				
Street Address										ΙĻ				Other tha			į.			
One Washington	Road									1						cial buildings			etc.)	
0" (5)			01(0)	70		-1	-	l - /	7\	ا ^د	Square Fe	et		# of Floo	ors	Bid	g. Age)		
City (5)		- 1	County (6)	10	ou	nty (000	ie (/)	-					- 1	- ID				
Princeton			Mercer								Current Us			873	emoli	sned)				
							_			_	Iniversit		And the second second	·						
Name of Monitoring ATC Associates,		lired by	Building Own	er (8	8)		A	SC	M No.		lame of A			t Contrac	tor (9))				
Street Address	IIIC.				_	-12-3				_	Street Add									
Bromley Corpora	ata Cai	ntor 3	Terri I and	Suif	to '	12				435	O Box 2									
City, State & Zip Co		iitei 5	Terri Lane,	Jun		-					City, State		n Co	de						
Burlington, NJ 0											umberto									
Project Manager for		ring Fi	rm	Tele	enh	one	Nı	ımb	er		elephone					License Nur	nber			
Mike Keehn		g				86-8			٠.		09-265-2						0052	9		
Scheduled Start Da	te (10)	Is	cheduled Con							I	lame of O	SHA	A Mor	nitor						
7/2/12				9/2						E	MSL An	alyt	ical							
Occupancy Status I	During /	Abatem	ent (Check or	ily o	ne)					S	Street Add	ress								
			uring Entire P				ate	mer	nt		08 Hadd		A CONTRACTOR							
Abatement	Perform	ned Ou	tside of Norma	al H	ou	S					City, State	& Zi	p Co	de						
Describe:										V	Vestmon	ıt, N	IJ 08	108						
Scope of Work (Che	eck all t	hat app	oly)									Ē	-	Eull Con	toinn	nent with Neg	rativa	Dro	eeure	v:
N >2-6>21	ı£			N 7	1	Dor		otio				F	=	Mini-End			jative	1 10	33ui C	
≥3 sf or ≥3 l				X	1	Rer						L	爿			ocedures				
≥160 sf ≥26	O IT				l .	Der	noi	TIOI	1				X X		_	ed and Non-F	riable	Dre	codu	ıro
1.				L	o I	000	ion				Descript			INOII-LXC			Aba			
227	ocation tos-Cor					ocat ally l		h		A	sbestos-C					(Specify	7 100	itom	T	JPC
	terial (A					lely l				, , , ,	Material					SF or LF)	_		Щ	m
92,000,000	BE ABA					enan		or		(i.e	e., therma			s		56: 1000/00/1800/04 5 0	er	Re	Ca	ncl
i	n Facilit	ty		Cus		dial 3	Sta	ff?	i		lation, sur						Remova	Repair	Encapsulate	Enclosure
	(13)					(12)	T & 1	10		or c	other misc	ella	neous	s)			<u>a</u>	7	late	ē
Various Location	an The	a u a b a	ut 4 St Floor	Yes	S	No	1 30	/A		_	Pipe Inst	ulat	ion		20 L.F	(wrap & cut)	X		П	
4 th Floor Room 4	15 IIII	ougno	ut i Fiooi	님	+	片		3			oor tile &			•		72 SF		H	Ħ	H
1 st Floor Tech Se	-0-D			H	+	片.		1			oor tile 8					160 SF	X	Ħ	H	H
1 Floor Tech Se	ervices	•		뉘	+	H	H	+	-		oor the c	7	ροιι	•		100 01	H	片	悄	杆
				H	+	H	╁	╡┤				t				7000	Ħ	Ħ.	F	Ħ
				님	+	Ħ	F	╡┤	_	-		/					H	悄	Ħ	Ħ
Name of Registered	d Waste	Haule	r			NJ	DE	PV	Vaste	Cul	bic Yards		Name	e of Regi	stere	d Landfill	1			
Traine of regions of						100000	ule	r ID	No.		Vaste			5/70 Samoras						
AbateTech, Inc.							1	B 7 5	0		10			F Land	fill					
City, State Lumberton, NJ										Dis	posal Date 9/28/12			State /town, F	ΡΑ					
	t or Torr	· ~)	110000000000000000000000000000000000000			Tit	10			Ci~				,, 1			Date	05.55		
Completed By (Prin Gwen Trumbetti	tor typ	<i>(</i>)						C	ord.		nature	. ,	1				9/13	112	6	
Owell Hullipetti						-	, p. G				(1	11	1				<i>31</i> 13	114	e.	



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

1207-4514

Date of Notification (1) 9/12/12						Owner / Operato		2012 SEP 21	PM	19.		
Agencies Notified Type Notification		Stre	et A	ddre	ess			Aspro-		K (17	
□ EPA						ossing Rd.		STOS	COM	The		
│					Zip C			ASBESTOS & LICEN	SING	ing	L.	
□ DOL					ntact	NJ 08648		ĺΤ	elepho	ne N	lumh	er
DCA Cancellation		Deb						i	CIODITIC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	101110	C.
		F	ACI	LIT	Y INF	ORMATION						
Name of Facility Where Abatement is Taking P	lace (Type of Facil						
Westfield Armory						School (
Street Address							oter 8 (Other th			32.22 h		
500 Rahway Ave.						Square Feet		mmercial building			etc.)	
City (5) County (6)	Co	unty		do (7)	Square Feet	# 01 F1	oors	dg. Ag	е		
		unty	CO	ue ("	Current Hea	Prior if being	demolished)				
Westfield Middlesex							(Filor ii beilig	demonstred)				
Name of Monitoring Firm Hired by Building Own	ner (8)			480	M No.	Armory	tement Contra	actor (0)				
Whitman Companies	ilei (o)		ľ	100	IVI INO.	AbateTech		actor (a)				
Street Address						Street Addres						
116 Tices Lane Unit B-1 City, State & Zip Code	-/			\		PO Box 25 City, State &	Zin Codo	*******		-		
East Brunswick, NJ 08816				1		Lumberton						
Project Manager for Monitoring Firm	Telep	ohon	e N	umb	er	Telephone N		License No	umber			
Kevin Lovely	732-	390	-58	58		609-265-21	07	* \	0052	29		
Scheduled Start Date (10) Scheduled Co. 8/27/12	mpletic 9/28		ate	(11)		Name of OSI EMSL Anal						
Occupancy Status During Abatement (Check o						Street Addres	845					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm			Date	mer	II .	108 Haddor City, State &					-	
Describe:	аі по	uis	/	/		Westmont,						
Facility Occupied During Abatement	_	_				aacstillolit,	143 00 100					
Scope of Work (Check all that apply)	-31-0-		- 1 to 1 to 1									
The control of the co								ontainment with Ne	egative	Pre	ssure	Э
≥3 sf or ≥3 lf	\boxtimes			/atio				nclosure				
≥160 sf ≥260 lf		De	emo	litior	1			Bag Procedures		_	24	
I marking of	1 1-	·	. 41			Di-ti		xempted and Non-		_		
Location of Asbestos-Containing	Norr	Loca				Description Asbestos-Con		Amount (Specify	Ab	atem	enti	ype
Material (ACM)		olely		-		Material (A		SF or LF)			m	l m
TO BE ABATED	Main					(i.e., thermal s		50	l en	Repair	cap	nclo
in Facility (13)	Cust	odiai 12)		1117	1	insulation, surfaction or other miscell			Remova	pair	Encapsulate	Enclosure
(13)	Yes	No		I/A		or other miscen	arieous)		=		ate	(D)
Boiler Room			1	\exists		Firebrio	k	800 SF		П		\Box
Boiler Room	X	H	ili	Ħ١	Boi	iler Breeching		600 SF		IT	Ħ	愩
	Ħ		Ħ	Ħ		<u>-</u> g			T	厅	Ħ	
			Ħ	5			+1					
							352mm					
Name of Registered Waste Hauler					Vaste No.	Cubic Yards of Waste	Name of Re	gistered Landfill				
AbateTech, Inc.				875		12	TRRF Land	dfill				
City, State						Disposal Date	City, State		S21123211			
Lumberton, NJ						9/28/12	Tullytown,	PA	1-			
Completed By (Print or Type)			itle	12		Signature	D		Date	114 ~		
Gwen Trumbetti		100	oo			()	MI		9/12	112		

State of New Jersey 1209-4545 NOTIFICATION OF ASBESTOS ABATEMENT Check 430 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification								r / Operate	or (2)		201	2SEP 21	- Pag			
A	9/12/12						ıblic S	chools	1000.00		A	~ 1	m	2: 8	7	
Agencies Notified EPA	Type Notific	ation		Stree		***********	. A				M 30	ESTOS	00.			
□ DEP	│	ı				emont & Zip						LICEN	COM	RA		
⊠ DOL		nded #1		and the same of the			J 0730	5				CIM	SING	.0	5 .	
	<u> </u>	rgency				Contact							Teleph)er
□ DOH		cellation		STATE OF STATE OF		tolino						i	Сюрп	01101	7	,,,,
					CILI	TY IN	FORM	IATION								
Name of Facility Wh				3)			Ту	pe of Faci								
Jersey City BOE	Administra	tion Offices					_ _	School	25							
Street Address							I			(Other tha		XXX:196X	12		2 147	
346 Claremont A	ve.						_					cial building			etc.)	
City (5)		County (6)	IC.	ounty	Codo	(7)		uare Feet		# of Flo	ors	B	ldg. A	ge		
Jersey City		Hudson	100	Julity	Code	(1)	C	irrent Use	/Drior	if boing d	lomoli	obod)		-		-
Jersey City		nuuson					0.4000	inem Ose Imin Bui		ii being d	emon	snea)				
Name of Monitoring	Firm Hired h	y Building Ow	ner (8)		IAS	CM No		me of Aba		at Contra	otor (C	1)	-			
Matrix New World			1101 (0)		/	OW NO		pateTech		ii Contrac	טוטו (ט	')				
Street Address								eet Addre						******		
120 Eagle Rock A								Box 25								
City, State & Zip Co							100	y, State &								
East Hanover, NJ Project Manager for		Time.	T-1-		Nicon			mberton								
Eric Gratson	Monitoring F	·IIIII		240-				lephone N 9-265-32		r		License N	umber : 005			
Scheduled Start Dat	e (10)	Scheduled Cor						me of OSI		nitor	_		005	29		
9/17/12			9/24	l/12	(.	`\		ISL Anal								
Occupancy Status D						7.		eet Addre	750							
		During Entire F utside of Norm			atem	ent		8 Haddo								
Abatement F Describe:		utside of Norm	аі но	urs	/			y, State &								
		Abatement :					AAG	estmont,	NJ U	8108						
Scope of Work (Che			(4)			2000			-							
			_							Full Con	tainm	ent with Ne	egative	Pre	ssure	÷
≥3 sf or ≥3 lf			\bowtie		ovati					Mini-End						
≥160 sf ≥260) IT		Ш	Den	nolitio	on						ocedures		-	34.0	
10	cation of		lo.	Locati		_	-	D = = = -i-4i = :		Non-Exe		d and Non-			and the second	
	os-Containin	a		nally l				Description estos-Con		,		Amount Specify	Ab	atem	ent T	ype
Mate	erial (ACM)			olely b				laterial (A		•		F or LF)	_		Щ	l m
	E ABATED Facility			tenan				thermal s					\chi_\chi_\chi_\chi_\chi_\chi_\chi_\chi_	Repair	Cap	ncle
"'	(13)		Cusi	odial 9 (12)	stair?			ion, surfaction, surfaction					Removal	pair	Encapsulate	Enclosure
			Yes	No	N/A		0. 0		anoou				_		ite	Ф
5 th & 6 th Floor Mech	anical Equi	pment Room	\boxtimes					Caulk			-	100 LF		П	П	П
											199					
							Or Committee									
											4000					
			Ц	Ц	Ц											
Name of Desisters I	\A/1-11-1			LI.			Ta		1							
Name of Registered	Waste Haule	er				Waste D No.	of Wa	Yards	Name	e of Regis	stered	l Landfill				
AbateTech, Inc.				100,000,000	750	D NO.	OI VV	10	TRR	F Landf	ill					
City, State							Dispo	sal Date		State	50000	Historia de Colonia de				
Lumberton, NJ								24/12		town, P	A					
Completed By (Print	or Type)	-		Title			Signa	ture	1	. /		-	Date			
Gwen Trumbetti					fice			()	11/	1			912/	2		
				Co	ord.			V	VV	W						

State of New Jersey 1209-4545 NOTIFICATION OF ASBESTOS ABATEMENT Check # 4430 (Pursuant to N.J.A.C. 8:60 and 12:120) RECEIVED

Date of Notification (1) 9/12/1	2			g Owner / Operat	tor (2) 2	112 SEP 21	PM 12: 67	000
	tification		et Address	ublic Schools				
⊠ EPA		346	Claremon	t Ave.	A.	SBESTOS C	CONTROL	
	nitial		State & Zip			& LICENS	SING	
NED 10 10 10 10 10 10 10 1	mended #2		ey City, N					
	Emergency Cancellation		e of Contac				Telephone Num	nber
				FORMATION			17	- a
Name of Facility Where Abar	tement is Taking F	Place (3)	CILITIN	Type of Fac	ility (4)			
Jersey City BOE Admini				School				
Street Address				Subcha	pter 8 (Other t	han K-12)		
346 Claremont Ave.							lings, homes, etc.)
				Square Fee	t # of FI	loors	Bldg. Age	
City (5)	County (6)	County	Code (7)					
Jersey City	Hudson				(Prior if being	demolished)		
Name of Maria de la laci	11 5 11 1			Admin Bui				4 35
Name of Monitoring Firm Hire Matrix New World Engine	ed by Building Ow Perina	ner (8)	ASCM N	o. Name of AbateTech	atement Contra	actor (9)		
Street Address	ooning			Street Addre				
120 Eagle Rock Ave.				PO Box 25	35.00			
City, State & Zip Code				City, State &				-!//\/
East Hanover, NJ 07936					n, NJ 08048			
Project Manager for Monitorin	ng Firm	Telephone		Telephone N		License	Number	
Scheduled Start Date (10)	Scheduled Cor	973-240-		609-265-32			00529	
9/17/12		9/24/12	te (11)	Name of OS EMSL Ana				
Occupancy Status During Ab	atement (Check o	nly one)		Street Addre	777			- 22 - 27 (0.5)
Facility Closed Vacat			atement	108 Haddo				
Abatement Performed Describe: 5PM sta	Outside of Norm	al Hours		City, State &	경영영(15명) 및 보고 전환 경영 등 전환 등 전환 등 보고 있다.			
Facility Occupied Dur				Westmont,	NJ 08108			
Scope of Work (Check all that	t apply)				-			
		·			Full Co	ntainment with	Negative Pressur	re
≥3 sf or ≥3 lf		<u></u>	ovation			nclosure		
≥160 sf ≥260 lf		☐ Den	nolition			Bag Procedures		200000
Location of		Is Locati	on	Description			on-Friable Proced	1111111
Asbestos-Contai	ning	Normally U		Descriptio Asbestos-Cor		Amount (Specify	Abatement	туре
Material (ACN		Solely b	ру	Material (A	CM)	SF or LF)		, m
TO BE ABATE in Facility	: <u>D</u>	Maintenan Custodial S		(i.e., thermal sinsulation, surface			Repair	n c
(13)		(12)	olaii!	or other miscell			Repair	Enclosure
		Yes No	N/A		/		- 16	0
5 th & 6 th Floor Mechanical E	quipment Room			Caulk		100 LF		
***		님님			- F			
Name of Registered Waste H	auler	L L L L	DED Mosts	Cubic Yards	Name of De-	iotorod I == dell		ШЦ
rumo di riogiotorea rvaste in	adici	100000000000000000000000000000000000000	uler ID No.	of Waste	Name of Reg	istered Landfill		
AbateTech, Inc.		187	750	10	TRRF Land	fill		
City, State	27 - 27 - 27 - 27 - 27 - 27 - 27 - 27 -			Disposal Date	City, State			
Lumberton, NJ				9/24/12	Tullytown,	PA		
Completed By (Print or Type) Gwen Trumbetti		Title		Signature	1	1000 1	Date	
Owen Hullipetti			ice ord.		111		912/12	
		- 00	oiu.	X	1001			

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

1209-4551 Romeck #4533 VED

Date of Notification (1) 9/17/12							vner / Operato			ACUE	21	P	M 12): n	6
Agencies Notified Type Notifica	ation				ddress	4 001	illison riosp	itai		ASBEST & LI	T00	801			<u> </u>
⊠ EPA						Vood	d Johnson P	lace		81	US (20	NTI	RAI	,
☐ DEP ☐ Initia		(City, S	Stat	te & Zip	Coc	de			~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	CEN.	STA	√G	·U	
	nded #						NJ 08901								- 3
	gency	- 10			Contac						Teleph	on	e Nu	umb	er
☐ DCA ☐ Cand	ellation		Geis	eri	Fajard	0									
65 33 100		- 10		CIL	ITY IN	VFO	RMATION								
Name of Facility Where Abateme		ce (3	3)				Type of Facili School (I								
Robert Wood Johnson Hos Street Address	oitai			35			100 march 100 mm and 100 mm and 100 mm		(Other than	K 12\					
One Robert Wood Johnson	Place						Other (i.e				as ho	me	s et	c)	
Cito report recomment							Square Feet		# of Floors		3ldg. A	_	-,	,	-
City (5)	County (6)	Co	unty (Coc	de (7)		1								
New Brunswick	Middlesex						Current Use (Prior	if being dem	olished)					
							Hospital								
Name of Monitoring Firm Hired b	y Building Owne	r (8)		A	SCM N	lo.	Name of Aba		nt Contractor	(9)					
Omega Environmental Street Address				\perp			AbateTech, Street Addres								
280 Huylar Street							PO Box 25	5							
City, State & Zip Code							City, State & 2	Zip Co	ode						
South Hackensack, NJ 0760							Lumberton,	NJ (08048						
Project Manager for Monitoring F	0.00	THE RESERVE OF THE PARTY OF THE			ımber		Telephone Nu		r	License N					
Geiser Fajardo			489-8		200.00		609-265-210		-14		005	29			
Scheduled Start Date (10) 9/28/12	Scheduled Comp 1	2/31		te ((11)		Name of OSF EMSL Analy								
Occupancy Status During Abater							Street Addres	s							
Facility Closed/Vacated I				ater	ment	5	108 Haddon								
Abatement Performed O	utside of Normal	Hou	urs				City, State & 2								
Facility Occupied During	Ahatement						Westmont,	NJ U	8108						
Scope of Work (Check all that ap			-	120					until 1						
								\boxtimes		nment with N	legativ	e P	ress	sure	
≥3 sf or ≥3 lf		\bowtie			ation			Ц	Mini-Enclos						
≥160 sf ≥260 lf			Den	noli	ition			H		Procedures	. Frich	l)	a al	
Location of		le l	ocat	ion			Description	L of		oted and Nor Amount					
Asbestos-Containin	g r		nally l			,	Asbestos-Cont			(Specify	/ 1	T	T	111	ypc
Material (ACM)			olely I				Material (AC			SF or LF)	7	,		Ē	ш
TO BE ABATED in Facility			tenan odial S				i.e., thermal sy sulation, surfac				Kemova		Repair	cap	nclo
(13)		Judic	(12)	J.C.	".		r other miscella				Va		ar	Encapsulate	Enclosure
	Y	'es	No	N	/A									9	
Tower Building Ground Floo	or [\boxtimes			L	inoleum & N	/lasti	С	3,000 SF					
		4	Ц.		4							Щ	4		
		4	Н-	H	4					***			╣	닠	片
		+	H	1-	\dashv							HL	╡┼┼	밁	H
Name of Registered Waste Haul			N.I	DF	P Was	te C	ubic Yards	Nam	e of Registe	red Landfill		Ш			Ш
				ule	r ID No		Waste		10.75	. Ju Barraini					
AbateTech, Inc.	4417 - ANN THE SECTION OF THE SECTIO			18	8750		25	11.20.00.00	RF Landfill		22.17.17				
City, State						Di	isposal Date		State						
Lumberton, NJ			1			-	12/31/12	rull	ytown, PA) 	le :				
Completed By (Print or Type) Gwen Trumbetti			Titl			. Si	grature 1	n			Date		and the same of		
			Off	rice	Coord	1. `	\ / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	/				9/	17/1	12	

B & G proj. #: 2012-172

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

										-			
Date of Notification	(1)	Na	ame of Bu	ilding Own	er/Operator (2)		2012 SF	P21 PM					
0 9 /1 7			Gerald So	hraub									
Agencies Notified EPA	Type Notificati	on St	reet Addre	ss			ASSES	TOS CONT	[ROI				
□ DEP	✓ Initial	11.		son Road			. &[-ICENSING	, NOL.				
	☐ Amendn		ty, State, 2	Zip Code					÷,	e .			
☑ DOL	Amendi		-	ck, NJ 07	452								
☑ DOH			me of Cor	ntact			•	Telephone	Number				
☐ DCA	☐ Cancella	ition	Gerald S	Schraub					_				
7-8-				FAC	ILITY INFORM	ATION							
Name of facility wi	nere abatement is	s taking pla	ce (3)				17	ype of Facility (4	1) (K - 12)				
Gerald Schraub)							Subcha	pter 8 (O	ther t	nan K	-12)	
Street Address								Other (Private/C	omme	rcial		
15 Emerson Ro	nad						-		Homes, e	_	В	dg. A	ge
City (5)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Coun	ty (6)			Cour	nty Code (7)						
J., (0)						(Stat		Current Use (Pr	ior if bein	g dem	olish	ed)	
Glen Rock, NJ		Berg				L.,		residential		-			
Name of Monitorin	ig Firm Hired by I	Bldg. Owne	r (8)		ASCM No.		Name of Abatement Cor						
n/a						_	·B & G Restoration,	Inc.					
Street Address							Street Address						
0 0 0							105 Ryerson Road City, State, Zip Code					-	
City, State, Zip Coo	ie .						Lincoln Park, NJ 0	7035					
Project Manager fo	r Monitoring Firm		IPI	none Num	ber	-	Telephone Number	1033	License	Numb	er		
r reject wanager re	i mormoring i mi						973-696-6869		0378				
Scheduled Start Da	ato (10)	ISchool	Completi	on Date (1	1)		Name of OSHA Monitor						
	ate (10)			on Dato (/		B & G Restoration,	Inc.					
9/27/2012		9/27/				_	Street Address						
Occupancy Status				mont			105 Ryerson Road						
Facility close	d/vacated during erformed outside	of normal f	acility hou	rs-			City, State, Zip Code						
Describe:					and the second	-	Lincoln Park, NJ 0	7035					
Other-Descri		,					Directiff tark, 110 0						
Scope of Work (ch			_			П	ull Containment w/negati	ve nressure F	Glovel	han ni	ncedi	IFA.	
(4 	⊠	Renovatio					fini-enclosure	ve pressure _E	Non-fr				
>3 sf or >3 lf		≥160 sf or			C.I	M 1	illi-eliciosure	L		TR	R		1-
Location of asbestos-co	ntoining		normally nance/cus	used sole stodial			sbestos-containing	Amount		е	e	E n	E
material to b	e	staff(12)			- material		spesios-containing	(Specify S	F or	o m	p a	a	c
abated in fac	cility (13)	Yes	No	N/A			<u>.</u>	LF)	*	v e	i	p	L
boiler room					pipe insular	tion		57 lf		Ň		П	IT
crawl space					pipe insulat	Committee of the Commit		3 lf		X		Ħ	恄
storage room					pipe insulat	-		7 lf		×			\Box
closet area					pipe insulat	-		6 lf		X			
								1					
Registered Waste			P Hauler	ID#	Cubic Yards of	Waste	Name of Registered La						-
B & G Restorati		195	63		1 1/2 yards		Tullytown Resource	& Recovery	Center				
City, State	11.07025			Disposal 9/28/2			City, State						
Lincoln Park, N		THE		9/28/2	Signature		Tullytown, PA		Date		-		
Completed by (Prin	it or Type)	Title Treasure	r		J. S. S. Autoro	(Gordana Luna		9/17/2	012			

State of NJ

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

B & G proj. #:	2012-173	-	(Pursi	uant to	NJAC 8:60)-/ ar	id 12:120-7)	R	Carok # 5	491		₹		_
Date of Notification	(1)	I I Name of	Building (Owner/O	perator (2)		21	112 SF	P21 PMIZ	- 1				
10 19 1/1 17		Bill O						- 02	'ZI PAIZ	<u>): 03 </u>		-		
Agencies Notified	Type Notification	Street Ac				-	AS	BES	TOS CONT ICENSING					
T EPA				on Don	A			&1	ICE CUNT	ROL				
☐ DEP	☑ Initial		een Villa te, Zip Co		u				PHICHE					
	☐ Amendmer	. 11								175				_
⊠ DOF	LI Amendmen	Madi	son, NJ (07940					Telephone N	lumber				
☑ DOH	_	Name of	Contact							-				
□ DCA	☐ Cancellatio	n Bill	O'Dell						1				_	=
				FACILIT	Y INFORMAT	TION								
	here abatement is to	aking place (3)						Тур	e of Facility (4)	K - 12)				
Name of facility w	nere abatement is to	aking place (e)							Subchap		er thar	n K-12	2)	
Bill O'Dell									Other (Pr	ivate/Con	nmerci	al		
Street Address									Bldgs./Ho	mes, etc.				
(3)								Sc	quare Feet #	of Floors		Bldg	. Age	
15 Green Villa	age Road	County (6)			τ	Count	ty Code (7)							
City (5)		County (o)					use only)		urrent Use (Pric	r if being	demol	ished)	
	07040	Morris							esidential				_	=
Madison, NJ	ng Firm Hired by Bl	2007/2007/2007		- T	ASCM No.	1	Name of Abateme	nt Cont	ractor (9)					
	g						B & G Restora	tion, I	nc.					
n/a	-						Street Address							
Street Address							105 Ryerson I			·				
	4-						City, State, Zip Co	de						
City, State, Zip Co	ode						Lincoln Park		035					_
	for Monitoring Firm		Phone	Number	<u> </u>		Telephone Numb			License N	Numbe	;1		
Project Manager	of Monitoring 1 in.					- 11	973-696-686	the second		0376				_
		Sched. Cor	aplotion F	ate (11)			Name of OSHA N		•					
Scheduled Start I	Date (10)	Scried, Cor	IIpietion E	, a.o (· ·)		- 11	B & G Restor	ration,	inc.		-			_
9/28/2012		9/28/2012					Street Address	n1						
Occupancy Statu	s During Abatement	(Check only o	ne)			- 11	105 Ryerson	Road						_
M Eacility clos	sed/vacated during 6	entire period of	abateme	nt.		- 11	City, State, Zip C	ode						
Abatement	performed outside	of normal facili	y nours-	× 118		_	r · L. David	NII Oʻ	7035					
Describe:_ Other-Des	cribe:					- 1	Lincoln Park	, 143 0	7033					_
	(check all that apply)						70 VII		Gloveb		ocodu	re	
Demolition		Renovation				1000	ull Containment v	v/negati	ve pressure					
27.72	_	≥160 sf or ≥260) If			X N	Mini-enclosure		l	Non-fr				
>3 sf or >3	211	Is location no		ed solely							e	R	E n	E
Location of		by maintenan	ce/custod	lial	Descripti	ion of a	sbestos-containir	ıg	Amount (Specify S	E or	m	р	C	n c
asbestos- material to		staff(12)			material				LF)	,, 0,	0	a	a	Ľ
	facility (13)	Yes	No	N/A							е	ı.	р	_
			_	∇	pipe insula	ation			105 lf			旦	띧	H
basement					р.ре шен							Ш	Ш	닏
- 1													旦	
													Ш	빝
						_	<u></u>							
		LUDER	Hauler ID	# 10	ubic Yards of	Waste	Name of Regis	tered L	andfill				1.27	
Registered Was	te Hauler	19563			1 1/2 yards		.Tullytown F	Resource	ce & Recovery	Center		_	-	
B & G Restor	ration, mc.			isposal [The second secon		City, State							
City, State Lincoln Park	NI 07035			10/1/20			Tullytown,			Date				
Completed by (Title			Signature		Gordana Li	ma		9/17/	2012			
Gordana Lui		Treasurer					Zorawnu IX			2/1//	-012			



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

RECEIVED

Date of Notification (1)					Name of Build	ding Owner/Operator (2)	•				
Date of Notification (1)	8/24/1	2			BPG Develo	pment Group	2012	SEP 21	PA	l 12: a	1
Agencies Notified	0/24/1		Tuno		Chanak Addas		Atre				
(Notification	MARKE D \$4550	Ŷ	Street Addres 3815 West C	hester Pike	400E	STOS	COL	TROI	
(X)EPA ()DEP		() Initial No (X) Amend		ation	City Ctata 7			LILE	KSIA	G	•.
(X) DOL			nent # 1	ation	City, State, Zi	<u>p Code</u> uare, PA 19073				•	* *
(X)DOH				ding justification)	Newtown 34	uare, PA 19073					
() DCA		() Cancella		amy justimoution,	Name of Con	toot	Tol M	umher	-11-11-		
, ,		, ,			John Forde	laci	1				
				FACILITY IN	NFORMATION		4		-		
Name of Facility Where A	batement is T	aking Place (3)	TAGILITTI	Type of Facili	ty (4)		-		×	
Vacant warehouse			-1		() School (K-						
Street Address						er 8 (other than K-12)					
523 Chestnut St.						private & commercial ble	dgs., hom	nes, etc.			
City (5)	County (6)		County	Code (7)	Sa. Feet	215,000	# of Floor	rs 1			
Sity (o)	County (o)			Ise Only)				·			
Woodbury Heights	Gloucster				Bldg. Age_	50					
					Current Use (prior if being demolished) window	and door	•		
					manufacturer						
Name of Monitoring Firm			ASCM N	<u>Vo.</u>	Name of Cont						
AET						ronmental Systems					
Street Address					Street Addres						
28 N. Pennel Rd.					550 East Uni						
City, State, Zip Code					City State, Zir						
Media, PA 19063	orina Cirm	Talanhana	N		West Cheste		т				
Project Manager for Monit Dave Turotsy	oring Firm	Telephone I 610-891-01			Telephone Nu 610-701-9000			e Numbe	<u>r</u>		
Dave ruiolsy		010-031-01	14		610-701-9000	Q.	00508				
Scheduled Start Date (10)		Scheduled (Completion	n Date (11)	Name of OSH	A Monitor					
9/10/12		10/05/12	- CHI PIONO	11.00.00	AET	V WOTHOT					
Occupancy Status During	Abatement (0	Check only on	e)		Street Addres	s					
(X) Facility Closed/Vacate					28 N. Pennel						
() Abatement Performed	Outside of No	ormal Facility	Hours -								
			**		City, State, Zi	o Code					
Describe					Media, PA 19	063					
Other -											
Source of Work (Check all	that apply)										
(X) Demolition () Rer	acuation										
(X) Large Proj. (>160 SF o	10Valion or >260 l F AC	M) () SM Pr	ni />25<1	60 SE or >10 <2	SOLE ACM)) Minor Proj. (<25 SF o	101E	A CRAN			
() Full Containment with N	legative Pres	sure () Mir	ni-Enclosu	re (X) Glove	ebag Procedure	() Willion Floj. (~25 SF 0	I VIO LI	ACIVI)			
Location of Asbestos-	Is Loca	ation Normally	Used	Description of		Amount (Specify SF or	(IF)	Abatem	ent Tv	ne	
Containing Material (ACM)	in Solely	by Maint./Cus		thermal system		runount (opcony or or	_, ,	Abatom	CIIL I Y	<u> </u>	
Facility (13)		(12)		surfacing, VAT							
	_ YES	NO	NA	miscell.)				Rem.	Rep.	Encap I	Enclose
Above ceiling in office			Х	Pipe insulation		200 LF		X			
Roof of Maintenance Bldg	g.		X	Roof (roof col	lapsing, will	2000 SF	~	X			
				Be removed di	uring						
				demolition)							
Perimeter windows			x	Mindow starin	~	240.05		, I			
Perimeter windows		1 1	^	Window glazin	g	210 SF	- 1	X			
Name of Reg. Waste Haule	er l	NJDEP Was	te Hauler	ID #\	Cubic Yards of	Macte	Name	of Reg. La	andfill		
rame of reg. Waste Haar	<u> </u>	INODE: Was	to Hauler	1D #1	Cubic Tarus O	vvasic	Name (or ixey. La	arium		
N.E.T.S. / Miners		17235			Approx. 10		BFI Im	perial			
City, State						Disp. Date			y. Stat	e	
					1					=8	
Hazelton, PA						/ TBD		lm	perial,	PA	
Completed by (Print or Typ	<u>e)</u>	<u>Title</u>			Signature	1	<u>Date</u>	F-30-00000000	Standard 55		S-12-3-13-13-13-13-13-13-13-13-13-13-13-13-1
					11//1/	4-AMO)					
Robert Casciato	1	President			11111	Y WO	9/18/12				
Mail to: NJDEP-DSHW-E	BRRTP	Telephone 60	09-934-662	20 <i>l</i>			C:\WOR	D/MYDO	CSVAS	BESTO	S

401 E. State St., PO 414 Trenton, NJ 08625-0414

9/18/00

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

RECEIVED

Date of Notification (1)					Name of Buildi						***************************************	
	8/24/12)			BPG Develop	ment Group	20	12 SEP	21	PH 12:	61	
Agencies Notified		Notification	Type		Street Address 3815 West Ch							-
(X) EPA		(X) Initial N	otification		3013 West On	COLOT T INC	A	BEST	05 0	ONTI	30L	
() DEP		() Amende		n .	City, State, Zip		2	& L	ICEN.	SING		
(X) DOL (X) DOH		Amenda () Emerge		ng justification)	Newtown Squa	are, PA 1907	3				36	
() DCA		() Cancella		.g jacanoason,	Name of Conta	act		Tel Ni	ımber			
				EACH ITY IN	John Forde FORMATION			Ţ				
Name of Facility Where A	batement is T	aking Place (3)	TAGILITIN	Type of Facility	v (4)						
Vacant warehouse					() School (K-		14.40)					
Street Address					() Subchapte (X) Other (i.e.	r & (otner tha orivate & cor	n K-12) nmercial bld	as hom	es. etc.			l
523 Chestnut St.												
City (5)	County (6)		County C		Sq. Feet	215,000	#	of Floor	s1			
Missalhum Haimhta	Gloucster		(State Us	e Only)	Bldg. Age	50		92				
Woodbury Heights	Gloucster				Current Use (p	rior if being	demolished)	window	and doo	r		
					manufacturer_	-1-1 (0)						
Name of Monitoring Firm AET			ASCM No	<u>).</u>	Name of Contr Alliance Envir	actor (9) conmental S	vstems					
Street Address			L		Street Address		,					
28 N. Pennel Rd.					550 East Unio							
City, State, Zip Code Media, PA 19063					City State, Zip							
Project Manager for Monit	toring Firm	Telephone	Number		Telephone Nur			Licens	e Numb	er		
Dave Turotsy		610-891-01	14		610-701-9000			00508				
Scheduled Start Date (10 9/10/12		Scheduled 9/19/12		Date (11)	Name of OSHA							
Occupancy Status During	Abatement (0	Check only or	<u>ne)</u>		Street Address				1			
(X) Facility Closed/Vacate () Abatement Performed	Outside of No	re Period of A ormal Facility	batement Hours -		28 N. Pennel F	<u>ku.</u>			,			
					City, State, Zip							
Describe Other -		-			Media, PA 190	163						
Source of Work (Check a	I that apply)											
(X) Demolition () Re	novation											
(X) Large Proj. (>160 SF	or >260 LF A0	CM) () SM P	roj. (>25<16	60 SF or >10 <26	60 LF ACM) (bag Procedure) Minor Pro	j. (<25 SF or	<10 LF	ACM)			
Location of Asbestos-		ation Normall		Description of		Amount (S	pecify SF or	LF)	Abater	ment Typ	oe .	
Containing Material (ACM	l) in Solely	by Maint./Cu		thermal system	ns insulation,	35.0						
Facility (13)	Staff? YES	(12) NO	NA	surfacing, VAT miscell.)	, or other				Rem.	Rep.	Encap E	Enclose
		T	INA	misceii.)	Ni							
Above ceiling in office			X	Pipe insulatio	n	200 LF			X			
Roof of Maintenance Bld	gT		X	Roof		2000 SF			Х			
				y								
Name of Reg. Waste Hau	lot	NJDEP Wa	eta Hauler I	D #I	Cubic Yards of	f Waste		Name	of Reg.	Landfill		
	101	17235	oto madion i	F.	100							
N.E.T.S. / Miners					Approx. 10	— т	Disp, Date	BFI Im		ity, Stat	<u>e</u>	
City, State					1		NA SHOUSE					
Hazelton, PA					101//	1	TBD	Doto		mperial,	PA	
Completed by (Print or Ty	rpe)	<u>Title</u>			Signature	the same		<u>Date</u>				
Robert Casciato		President		2000	1/11/1	1100		8/24/12	2			
1100011 00000					1000							

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

							~	44:0				
CGENCY	NC	THEIC!	ATION O	of New Jens F ASBESTO NJAC 8:60 a	S ABATEM and 12:120	IIENT 2012	SEP 2V	EIPE	بوطط	in en)	577
		7.25.75.75.75	- (C	245	//Doorstor	m 455		DANA MARIN	gajith,	å Sei	HOT S	SELA SELA
ale of Notification (1)		Na	ame of 5	uilding Owne	SEMBA	(2) 4581 15 Hy	\$100	Lan C	2	10	ne	1
gendes Notified Type Notification		া জ	reet Add	ress		1.0	LICE	NATION !	(eigna	Wite)-	11;	19
EPA Initial DEP Amended Amended Amended Amended		C	656	LATI	4 Ruf	07003		BHA CLON		Tim		<u>-</u>
EOH justification) DCA Cancellation		N	arne of C	Contact				phone Numb	er		0	÷
] DCA Salectiators			1000	TY INFORMA	ATION							-
lame of Facility Where Abatement is Taking N. J. FIREMEN'S HO	Place (3) MÉ					Type of Fac	(K-12)					
656 LATHROP AVE.						Subcha Other (etc.)	ipter 8 (Oth i.e. private (er than K-12) A commercial	buildi	nge, t	.0me	s.
ily (5)				***************************************		Square Fee	# 0	Floors	Blo	ig. Ag	653	1
BONTON						400-		2	_	50		÷
MORIZIS				SE CNLY)		Boni	2 now		a) {~}	<i>/</i> }	th-	â
lame of Monitoring Firm Hired by Suilding C	hwner (8)		ASCM	№o.	A. N	of Abatemen Nac Contra		(9)				:
Freet Accress					105	Lowell Ro						:
City, State, Zip Code					City. S Gie	State, Zip Coo n Rock, N	e I. 07452					3
Project Manager for Monitoring Firm		1	elephon	e No.		hone No. -262-5841		License No 00156				:
Start Dete(10) / 9/19/12	Schedule	d Com)ate (11)		of OSHA Mo ega Enviro		Services Inc	G.			1
Occupancy Status During Abatement (Chec	k Only On	e)				Address Huyler Str	eet					:
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of Pacility	Hours	ent		City.	State, Zip Coo ckensack, N	ie					,
Scope of Work (Check All That Apply)												
23 af or ≥3 if ≥160 af or ≥260 if		denovat Demoliti				Mini-End	iosure procedure	h Nagaliwa Pr : nd Non-Friabl			P	1
	T .					THUIPLAN	supressi / G		1	Abate	ment	t i
		Locati Normali			Descriptio	na af			_	Ty	pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intener todial S (12)	nce/	(î.e. Bhe s	Containing	Material (ACI ns Insulation, 'AT, or	, i	Amount (Specify (F or LF)	Removal	Repair	Encapsulate	The section of the
	Yes	No	N/A		. 05			15.0	-		· · ·	i
OUTSIDE TRENCH			X		PE			15 LF	X			t
												1
Name of Registered Waste Hauler Rovic Transport		1 F	LIDEP W lauler ID 20785		ubic Yards f Wasle	A		lered Landfill thlehem La		l Cai	p.	
City, State Riverdale, New Jersey 07457					7/15/12	Lan Be	_	PA 18015				į
Completed by	Title				Signate	DONE,	2,1		ite /	J.	2	
D McDosold	Pre	sident	•		1 /	11 4111	1/1		111	111	1	-

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

Date of Notification (1)				Name	of Building	Owner	Operator	(2)						
	ype Notification			Bc	ORO U (GH O	F EA	157 Ru TH	2 SEP	ed am	11: 5	56		
	7		1	Street	Address	EDET	TO	ACE AS	REST	ne en	1770			
EPA DEP DOL	Initial Amended		Ì	City, St	ate, Zip C	ode		JACK 10	& 111	CENSIA	ATKI)[200-01-000	
DOL	Amendmeni Emergency			EA	ST 1	RUTH.	ER FO	RO, N.	Ĵ,	ひりかり	13	2.		
☑ DOH ☐ DCA ☐	justification) Cancellation			Name o	of Contact SitAi					lephone N			_	
Name of Facility Where Aba	tement is Takin	a Diago /	21	FAC	ILITY INF	ORMAT	ION					-		
ABANDON B	ullullivi-	g Place (3)					Type of Facility						
Street Address								School (I		ner than K-	12)			
2 CARLTO	N AVE							Other (i.e etc.)	. private	& commer	cial bui	ldings	, hom	nes,
City (5) EAST RUTH	IF O ENC	0						Square Feet	# 0	of Floors	\Box	Bldg.	Age	
	72727010			<u> </u>	~			25,000		4		5	8	
County (6) BERGEN					Code (7) USE ONL	n		Current Use (I	Prior if be	ing demolis	shed)	10 to		
Name of Monitoring Firm Hir	red by Building	Owner (8)		ASC	M No.		Name	of Abatement C	/	E				
								ac Contracti		(-)				
Street Address								Address Lowell Road						
City, State, Zip Code								tate, Zip Code Rock, N.J.	7452	*		-1-3//2		V-05V-115
Project Manager for Monitori	ing Firm		T	Telepho	ne No.			one No.		License	No.			
		-					201-	262-5841		00156	0			
Start Date (10)		Schedul	ed Cor	npletion	Date (11)			of OSHA Monitory ga Environn		envices	Inc			
Occupancy Status During Ab	patement (Chec			//-				Address	iciliai c	oei vices	116.			
Facility Closed/Vacated	During Entire F	Period of	Abaten	nent		4		Huyler Stree	t					
Abatement Performed (Other – Describe:	Outside of Norm	al Facility	Hours	;				ate, Zip Code						
Scope of Work (Check All Th	nat Anniv)						Hack	kensack, NJ	07606					
□ ≥3 sf or ≥3 lf	or, (pp.y)		Renova	tion			×							
≥160 sf or ≥260 lf		POSSESSES.	emolit				XXXX	Full Contain Mini-Enclose	ment with ure	Negative	Pressu	ire		
								Glovebag Pr Non-Exemp		d Non-Fria	hle Pro	cedur	·	
		ls	Locati	on					1		T	73974	emeni	t
Location of			lormal d Sole				scription				-	<u></u>	ре	_
Asbestos-Containing Mat TO BE ABATE		Ma	intenar	nce/				aterial (ACM) insulation,	4	mount Specify	70		m	Ш
In Facility (13)		Cusi	odial S (12)	tan?		surfac	cing, VAT	Γ, or		or LF)	Removal	Repair	caps	Enclosure
OFFICE A	REA	Yes	No	N/A			47	eous)	١,	100 :	_ _	#	Encapsulate	sure
THROUGHOUT				X		PIP			7	30 LF		-		-
OUTSIDE				X	7	RANS			-	00 SF	_	├-		-
OUTSIDE SI	HEA			K		200F			-	OU SF				
SHEO				X	PI	PE +	- DESI	215	 	YARDS	-	-		
Name of Registered Waste H	lauler	1		JDEP W		Cubic \	Yards	Name o		red Landfil				
Rovic Transport				auler ID 0785	No.	of Was		1	ana mili ana	lehem L		l Cor	p.	
City, State Riverdale, New Jersey	07457					Dispos	al Date	City, Sta		PA 18015	 5			
Completed by		Title	J			,	ignature	20010	0/			. /		
R. McDonald		Presi	aent				IK.	11 Your	40 (9//	8/1	12	

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

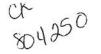
Date of Notification (1)	9/18/12		1	Name of I	Building On	wner/O	perator	(2) 2012	SEP 21	(i.M	111:56				
Agencies Notified	Type Notification		1	Street Ad	dress	t) Clo		4						-	
EPA	Initial			200	1/20	4 1	5,457	- Man	ics403	CO	WFROL				
DEP	Amended		(City, State	e, Zip Code	e . a	/1 -	/2 7	4503	KSI	NG				
▼ DOL	Amendment # Emergency (ir		-	1210	6-2000	100	<i></i>	U	43 -	T-1-	-b No-				
DOH	justification)	3			Contact SBARA					Tele	phone Nun	nber			
☐ DCA	Cancellation	<u> </u>		The same of the sa	ITY INFOR					4		-			
Name of Facility Where		Place (3)		IAGIL		Can Circ	7	Type o	f Facility (4)						
RETAIL ST	TORE	**************************************							chool (K-12)		100				
Street Address	E. RIDE	CE wee	e	AUF				X O	ubchapter 8 ther (i.e. pri	(Othe vate &	r than K-12 commercia	!) al build	ings.	home	s,
	2, /0100	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,				et	c.)						
City (5) RINGEWOOD								Square	LOO	# 01	Floors		dg. A		
			1	County C	nde (7)				t Use (Prior	if beir	g demolish		<u> </u>		
County (6) BERGEN					SE ONLY)				STURK		ig domeno.	,			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM	No.		Name	of Abate	ement Contr	actor	(9)	-			
							A. M	lac Cor	ntracting	inc.	2000				
Street Address								Address							
City, State, Zip Code								State, Zip							
City, State, Zip Code						1			, N.J. 074	52					
Project Manager for Mor	nitoring Firm		T	Telephon	e No.			none No.			License N 00156	0.			
Start Date (10) /	r	Schedule	Con	nletion [)ate (11)				A Monitor						
9/27/12		10/	2/	, C	alc (11)				vironmen	tal S	ervices li	nc.			
Occupancy Status Durin	ng Abatement (Check		- 1					Address							
Facility Closed/Vac	ated During Entire P	eriod of Al	batem	ent			280	Huyler	Street						
Abatement Perform Other – Describe:	ned Outside of Norm	al Facility	Hours				110000000	State, Zip		ene					
							пас	Kensa	ck, NJ 070						
Scope of Work (Check /	All That Apply)	E2 _					E	7	.		N 1# 1		220		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				-		Containmer -Enclosure	nt with	Negative i	ressu	е		
							5		ebag Proce Exempted		l Non-Frial	ole Pro	cedur	е	
		Т.						20 14011	-Exempled	() ain	a Non-i na	T	1000	ment	
Locatio	n of		_ocati ormal			Des	scription	n of				_	Ty	pe	
Asbestos-Containing	g Material (ACM)		i Sole			os Cont	aining I	Material			mount	_		m.	m
TO BE AE	BATED			Staff?	(i.e. t		system cing, VA	s insulat	tion,		pecify or LF)	Rem	Repair	Cap	inde
(13)			(12)				niscella			0.	o,	Remova	pair	Encapsulate	Endosure
		Yes	No	N/A								-		te	(D)
TROUGHOUT				X	ν	AT				2	800 st	X			
										24 1					
		+													
Name of Registered Wa	aste Hauler	1		JDEP W			Yards		Name of R						
Rovic Transport				lauler ID 20785	NO.	of Wa	ste 2		IESI PA	Beth	ilehem L	andfil	l Co	p.	
City, State Riverdale, New Jer	sev 07457			waite and open and		Dispo	sal Date) } }	City, State Bethleh		PA 1801	5			
Completed by	,,,	Title		-		-	•	_	1/	1		ate /	7		
R. McDonald		Presi	dent	TVAGED TO STATE			1/4	L- J/1	7-Yardi			9/1	8/1	1_	

^{*} 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)

Check # 7981 RECEIVED

Date of Notification (1)	9/18/12		1			wner/Operato		201	SEP 21 AI	411:	56		
Agencies Notified	Type Notification		15										
DEP DOL	Initial Amended Amendment # Emergency (i justification) Cancellation		-	City, State	ン Ro Contact	e OCK N	J.	0745	BESTOS CO & LICENSI		V		
	17				ITY INFO	RMATION							
FRICKSON Street Address 40 12.066	<u></u>	Place (3)	-		e e e e e e						dings	, home	es,
City (5)					************		Squa 1 G	re Feet	# of Floors	2	ldg. A	Age	
County (6) BERLE-U				County C	ode (7) SE ONLY)	***	Curre		or if being demolish らう	ned)			
Name of Monitoring Fire	rm Hired by Building C	wner (8)		ASCM	No.			tement Con					
Street Address						A11230	et Addre	ss II Road					
City, State, Zip Code	Concerns the Concerns of the Concerns of							ip Code k, N.J. 07	452				
Project Manager for M	roject Manager for Monitoring Firm						ohone N 1-262-		License N 00156	lo.			
Start Date (10) 9/3	7/12	Scheduled	Com	pletion D	1	1/310000000		HA Monitor	ntal Services I	nc.			
Occupancy Status Dur		Only One	*) /	0-0/		V. (1977) 1977 1977	t Addre						
Facility Closed/Va Abatement Perfor Other – Describe:	acated During Entire P med Outside of Norm	eriod of Al al Facility I	oatem Hours	ent		City,	State, Z	er Street ip Code ack, NJ 0	7606				
Scope of Work (Check	All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	00.23000		enovat emoliti				X Min	ni-Enclosure ovebag Prod				ге	
		ls I	ocati	on I							Aba	emen	ıt
Locati Asbestos-Containii <u>TO BE A</u> In Fa (1:	ng Material (ACM) <u>BATED</u> cility	Used	ormall Solel ntenar odial S (12)	y by nce/		Descriptions Containing hermal system surfacing, Vother miscell	Materia ms insul AT, or	ation,	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
Bonker	2000	103	140	X		Boil E.	1		48 SK	X	-		
11	11 10000			×		PIPE			60 CF	×			
						10-10-10-10-10-10-10-10-10-10-10-10-10-1				+	-	-	-
Name of Registered W	Name of Registered Waste Hauler					Cubic Yards		Name of	Registered Landfi	1			1
Rovic Transport						of Waste /			A Bethlehem L	andfi	II Co	rp.	
City, State Riverdale, New Je	ersey 07457					Disposal Da	201		nem, PA 1801				
Completed by R. McDonald		Title Presi	dent					4-1	LA D	ate //	8/	1	



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

040				Pursuant to N.J.				R	EC	EII.	20	
Date of Notification (1) 9/17/2012					Name of Buildi Paulsboro Refi		Operator (2)	2012 -		EIV	ED	
Agencies Notified		Notification '	Type		Street Address			1012 S	EP 21	•		
/ tgerioles (Votaliou					800 Billingspor		76		- 41	AMI	1:50	
() EPA		(X) Initial No		1			&	Size		CONT SING	, OB	
() DEP		() Amended		1	City, State, Zip			-5/3	105	Con		
(X) DOL		() Cancelle	:d		Paulsboro, NJ	08066		Or L	ICFN	COML	Rni	
(X) DOH								T-1 M	LILA	SHIC		
() DCA					Name of Conta Ravi Jarecha	ict	1	Tel In	IMNAF	_		
				FACILITY INF								
N	h ataus ant in T	akina Dlaga /	2)	FACILITY IN	Type of Facility	(4)					- pi depe	
Name of Facility Where A Paulsboro Refining Comp		aking Place (21		() School (K-1							
Paulsboro Renning Comp	ally				() Subchapter		an K-12)					
Street Address					(X) Other (i.e.			gs., hom	nes, etc.			
800 Billingsport Rd												4
000 Dgop 0				81 T-100 T-100 T-4 T/6-1 Magazi d	Sq. Feet N/A	·	# of Floors	SN/A	١			
City (5)	County (6)		County Co	ode (7)	Bldg, Age N/	•						
Paulsboro	Paulsboro Gloucester (State Use Only)							011 0-	e			
		Current Use (p	rior if being									
Name of Monitoring Firm	<u>).</u>			Name of Cor				^				
						Kenny Atlant	ic indus	triai Ser	vices LL	C		
Street Address					Street Address 800 Billingspor							3
					City State, Zipo							
					Paulsboro, NJ							
Project Manager for Monit	toring Firm	Telephone I	Mumber		Telephone Nur			Licens	e Numb	er		
Project Manager for Morni	toring Firm	Telephone i	vuilibei		856-224-4392	IIDOI		00857		<u> </u>		
		1			000 22 1 1002							
Scheduled Start Date (10)	Scheduled	Completion	Date (11)	Name of OSH/	A Monitor						
10/1/12	4	10/8/12			Kenny Atlantic	Industrial S	Services, LLC					
Occupancy Status During	Abatement (Check only or	ie)		Street Address							
() Facility Closed/Vacate	d During Enti	re Period of A	batement		800 Billingspor	t Rd						
() Abatement Performed	Outside of N	ormal Facility	Hours -									
					City, State, Zip							
Other - Describe - Remo	val within res	tricted work a	rea in outsid	ie areas	Paulsboro NJ	08066						
						-						
Source of Work (Check a	Il that apply)											
(V) Donothina	votion											1
() Demolition (X) Reno () Large Proj. (>160 SF	or >260 I F A	CM) (X) SM P	roi (>25<16	60 SF or >10 <26	OLFACM) (Minor Pro	i. (<25 SF or <	10 LF A	(CM)			
() Full Containment with	Negative Pres	ssure () M	ini-Enclosur	e (X) Glove	bag Procedure							
Location of Asbestos-	Is Loc	ation Normall	y Used	Description of		Amount (Specify SF or	LF)	Abate	ment Ty	<u>oe</u>	
Containing Material (ACM		by Maint./Cu		thermal system								
Facility (13)	Staff?	(12)		surfacing, VAT	, or other				Dom	Don	Encap	Enclose
	_ YES		NA	misc.)	1 0 0 0	2015			Rem.	Titep.	Liicap	T
Locker Room Turnstile A	rea	×		TSI – Pipe Ins	ulation	~20 LF			X		ĺ	
			-		i	-				-		
										 	SWAC-ACTIVE SE	
Name of Day Monte Hou	ilor	I NIDED Wa	eta Haular I	D#	Cubic Yards o	f Maste		Name	of Rea	Landfill		
Name of Reg. Waste Hau Waste Management, Inc.		NJDEP Wa 17273	<u>U #</u>	< 1 CY	· vvastc				unty Lar	ndfill		
Waste Management, Inc.		17275								,		
City, State							Disp. Date			City, Stat	e	
South Harrison, NJ							Various		13	South Ha	rrison, î	NJ
					Signature							
Completed by (Print or Tr	Completed by (Print or Type) <u>Title</u>							Date				
					1 1	,		0/47/0	040			
ANDREW GREEN	NDREW GREEN MANAGER - KENNY ATLANTIC							9/17/2	012			
							Supervisor					
		1			Site	perations S	Super visor					3
		1		87	//							
1												

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

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

									M - C		1/1-	PQ
Date of Notification (1) 9/19/12					Name of Build BASF Corpora		Operator (2)		KEC			
								2013	1000 0			
Agencies Notified		Notification	Type		Street Addres	s		2012	SEP 2	I	AM II:	1 6
		p Tax - Savincian			100 Campus	Drive						~_
(X)EPA		(X) Initial N	lotification		City, State, Zi			4				
(X) DOL		() Amende		ion	City, State, Zi	p code		# 3 C	SESTO.	SC	CALT	200
	13	1 1		1011				1,000	9 1 10	2.0	UNII	KUL
(X)DOH		() Cancelle	ea		Florham Park	NJ 07932			W 161	- N.	SINC	
() DCA					Name of Conf	act		Tel. Nun	nber		out Q	
					Frank Piechoe	eta		VINCOLUE VINCOLUE				
5 				EACH ITY IN	FORMATION			_	-			
				PACILITIN		- 111						
Name of Facility Where Ab		Taking Place	(3)		Type of Facilit							
BASF - Outside Concrete	Slabs				() School (K-	-12)						
					() Subchapte	er 8 (other th	nan K-12)					
Street Address					(X) Other (i.e.			as home	s. etc.			
Otteet Address					(,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	P		3-1				
37 37 6 <u>2</u> 9 3					0- 5-4 0	ш.	f Floors O					
1 James Street					Sq. Feet 0	# 0	1 F1001S_U	3				
City (5)	County (6)		County C	Code (7)								
Belvidere	Warren		(State Us		Bldg. Age 0	+/-						
Delvidere	valien		Totale of	oc omy	Current Use (demolished)	vacant	manufact	urinc	1	
					T danient dea (P.1.01 II 201113						
Name of Monitoring Firm H	ired by Bldg	. Owner (8)	ASCM N	<u>0.</u>			Name of Co				38	
			00104				NCM Demo	lition and l	Remediati	on, I	_P	
							1					
	Environmental Health Investigations, Inc.						1					
Street Address		Street Addres										
					404 N. Berry S							
655 West Shore Trail												
					01.01.1.71	0-1-				-		
City, State, Zip Code					City State, Zir							
					Brea, CA 928	321						
Sparta, NJ 07871												
Project Manager for Monito	ring Firm	Telephone I	Mumber		Telephone Nu	imher		License	Number			
	mig r iim		F-11-5		484-480-8931			01066	TTGITIDOI			
William S. Kerbel, CIH		973-79-564	9		404-400-0931			01000				
Scheduled Start Date (10)		Scheduled (Completion	Date (11)	Name of OSH	A Monitor	1	A-0000	100000000000000000000000000000000000000		2011/01/2012	-idite-sh
9/24/2012		12/07/2012		15010 [11]	Testor Tech	A CONTRACTOR OF THE PARTY OF TH						
9/24/2012		12/0//2012			Testor recir							
Occupancy Status During A	Abatement (0	Check only on	e)		Street Addres	<u>s</u>						
(X) Facility Closed/Vacated	d During Ent	ire Period of A	Abatement		10 59 Jackson	n Ave.						
() Abatement Performed												
() / toatement i enomica	Outside of 14	onnan aomiy	110010		Cit. Ct-t- 7:	- C	LICN	ew York, 1	11101			
D :					City, State, Zi	b Code	L.I.C. N	ew fork,	11101			
Describe Vacant Bldg. To E	se Demolish	<u>ea</u>										
Other – Describe												
Source of Work (Check all t	that apply)											
Course of Work Concor and	triat apply)											
00 B 101 / 1 B												
(X) Demolition () Renov												
() Large Proj. (>160 SF or >	>260 LF ACI			60 SF or >10 <2	60 LF ACM)	() Minor Pr	oj. (<25 SF or	<10 LF A	CM)			
() Full Containment with N	Negative Pre	ssure ()	Mini-Enclo	sure () Glo	vebag Procedu	re (X) Non-	-Friable Outdo	or Work				
Location of Asbestos-	Islac	ation Normally	Used	Description of	ACM (i.e.	Amount (Specify SF or	LF)	Abatemer	t Tv	pe	
Containing Material (ACM)				thermal system								
	Solely	by Maint./Cus	otoulal									
Facility (13)	Staff?		2000	surfacing, VAT	, or other	1		1.	Dom D	20	Enon-	Engless
	YES	NO	NA	miscell.)					Rem. Re	ep.	cucap	Enclose
Concrete Slabs at grade	X			Asphalt Tar 8	Paper	5,400 sf			X			
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terror and account of the second of the seco									+			
						1			100			100000000000000000000000000000000000000
Name of Reg. Waste Hauler NJDEP Waste Hauler ID #					Cubic Yards o	f Waste	Novieta Wi	Name of	Reg. Lan	dfill		
					250				Bethleher		ndfill	
					200		Dian Dat	ILUITA				
City, State							Disp. Date		City.			
75							9/28/12		Beth	lehe	m, PA	
56 Route 46 Delaware, NJ	07833											
Completed by (Print or Type		Title			Signature			Date				
	<u>e)</u>	<u>Title</u>		dia ata -	Signature			Anneadon de la companya del la companya de la compa				
Joseph K. White		Pi	roject Coor	dinator	1 Acres	11 1	(11)	9/19/12				
					1 Och	W. WI	U					

Notification of Demonstron of Ker	IOVALIUII(continued)			UIL SEP 21 Mue
X. Description of Planned Demolition or Building Slabs will be demolished using				
XI. Description of Engineering Controls	and Work Practices to be	Used to Contr	ol Emmision	ns of Asbestos at the
Demolition or Renovation Site:		Common Alberta Common and Common Comm		<u>*</u>
Wet materials during operations using h	lydraulic excavator to han	nmer slabs an	d bucket loa	ders to move and load into
dumpsters.				
XII. Waste Transporter#1 Gary W. Gray	Trucking			
Address: 56 Route 46				,
City: Delaware	County: Warren		State: NJ	Zip: 07833
Contact: Jason R. Wilson			Telephone: 908-	475-3797
Waste Transporter#2 N/A				
Address	- In these			
City	County		State	Zip
Contact		ŀ	Telephone	
XIII. Waste Disposal Site IESI PA Bethle	ehem Landfill Corp		EPA Certification	n Number: PADEP 100020
Address: 2335 Applebutter Road				
City: Bethlehem	County: Northampton		State: PA	Zip: 18015
Contact: Alan Schleyer			Telephone: 610-	317-3200
XIV. If the Demolition was Ordered by a	Government Agency, Plea	se Identify the	Agency Be	low:
Name		Title		
Authority		50 TSO 55 TS		
Date of Order (MM/DD/YY)		Date Ordered to B	egin (MM/DD/YY	0
XV. For Emergency Renovations:				SATE OF BEST FOR A STORY AND A STORY OF THE STORY
DATE and HOUR of Emergency: (MM/DD/YY) 9-16-201	12	(HH:MM) Prior to	noon	
Description of SUDDEN, UNEXPECTED EVENT: Ple		d 09/18/2012 .		
Explanation of how the Event caused unsafe condition	ns, or a serious disruption of indu	strial operations: P	lease see attach	ned BASF letter dated 9/18/2012
XVI. Description of Procedures to Be Fo				ound, or that Previously Non-
Friable Asbestos Material Becomes Crui	mbled, Pulverized or Redu	iced to Powde	r	
Restrict work area and regulate, wet mat	terial, notify appropriate r	egulatory ager	icies, comm	nence cleanup using wet
methods.				
XVII. I Certify that an Individual, Trained	in the Provisions of this I	Regulation (40	CER. Part 6	1. Subpart M) Will be On-Site
During the Demolition or Renovation, an	nd that Evidence that the I	Required Train	ing has Bee	en Accomplished by this
Person will be Available for Inspection D	During Normal Business H	lours (Required or	ne (1) year after j	promulgation).
	4.	1 / 111h	(20	
	(Signature of Ov	Sijk U. Wh. vner/Operator)	(Da	te) 9/19/12
XVIII. I Certify that the Above Information	n is Correct			
position 5 3 3 7 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	/			
	Tory	ill. WK	W	
	(Signature of Ov			te) 9/19/12

CK 29014

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

Date of Notification (1) 09/20/12	Month/Day/Year Agency Notified Type Notification EPA Initial				Operator	r (2) 2	112 SEP 2	e a	M11: 4	4
Agency Notified EPA DEP	x Initia		Street Add P.O. box 2 City, State			۵	& LIC	S CC ENSI	NTRE)L
DCA DOH		nded ification ellation	Princeton Name of C Robert Ot	Contact tego		ľ	Telephone Nu	mber		
Name of Facility Where Abatem Princeton University Wyman Street Address Princeton University	House - Basen			County Code		x Other (i. buildin		comm	ercial	
Princeton Name of Monitoring Firm Hired Pennoni Associates Inc	by Building O	wner (8))	ASCM No.	Name	Current Use (Prio University of Abatement Contr	actor (9)	nolishe	d)	
Street Address 515 Grove Street Suite 1B				1	Street	iated Specialty Contr Address Crue Avenue	acung			
City, State, Zip Code Haddon Heights NJ				State, Zip Code Mills, PA 19342						
Project Manager of Monitoring Alan Lloyd	Telephone 856-547-05			hone Number 64-9622		Licen 110	ce Numb 3	er		
Scheduled Start Date (10) 10/02/12 Month/Day/Year		Sched. (Completion Date 10/05/12 Month/Day/Yea	20 %	11	of OSHA Monitor ion Labs				
Occupancy Status During Abate Facility Closed/Vacated I X Abatement Performed O Hours - Describe: 8 Other - Describe:	During Entire F utside of Norm	Period of al Facilit			3370 I City, S	Address Progresive Drive State, Zip Code Iem PA 19020				
Scope of work (Check all that ap Demolition x >3 sf or >3 if >160 sf or >260 lf	ply)		x Renovation	n	x	Full Containment Mini - Enclosure Glovebag Procedu Non-Friable Proce	re	e Pressu	ire	
x >3 sf or >3 if >160 sf or >260 lf Location of Asbestos - Containing Material (ACM) TO BE ABATED In Facility (13) Location Normally Used Solely by Maintenance/ Custodial Staff (12)			Asbesto Mater (ie. The insulation,	eription of os-Containing rial (ACM) ermal systems , surfacing, VAT miscellaneous)	,	Amount (Specify SF or LF)	R E M O V A L	R E P A I	E N C A P S U L	E N C L O S U R
Basement wine cellar	plaster	and a solid process		20 SF	х					
Name of Registered Waste Haule	DEP Waste nuler ID No.	Cubic Yards of Waste		Name of Registere	d Landfill					
City, State Trenton NJ Completed By (Print or Type)	tle	Disposal Date As needed		City, State Morrisville PA			Date			
Mark Goshow		100000	oject Manager		n	Jack Holi	n			072

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

6096330664

RECEIVED

2012 SEP 21 AM 9: 43

Date of November 171				Man	of Puil-ti	ng Owner/Operator	(2)		-	-		U
Date of Notification (1)	-7-12					y Blud P	roper fie	& LICE	Cir	1117	.00	
Agencies Notified	Type Notification	n		Stro	et Address	1		& LICE	NSI	NC	46	1
□ £PA	Initial				61-	C6 131 -1	KIE 57			- 10		_
□ DOF	Amended Amendment	#	20	City,	State, Zip		1 107	07307				
	Emergency	includin	9) E 29		1 N) -	Telephone Numb	or	_	. *	1
DOH DCA	justification Cancellation			10-1-000	e of Conta	VELEZ		I CICDHORIC NUMBER	CI	A PARA	I Library	ad I
						FORMATION		1		-		•
Name of Facility Where	Abatement is Tak	na Pian	2 (3)	FA	CILITY	FURMATION	Type of Facility	7(4)				
	ennedy		المتاا	. 7	TO PE	· Lies	School (K-1					
Street Address							Subchapter	8 (Othor than K-12)	din		
2706	Lenned	y Bl	(US	١.			homes. etc	private & commercia)		7//		
City (5)	- 1		_	5503	.0.0	80	Square Feet	# of Floors	BI	dg. A	ge.	
<u> </u>	att	1	<u> </u>		200				<u></u> _			_
County (8) Hebs	,01J.			USE	inty Code E ONLY)	(7) (STATE	Current Use (F	nor if boing domatio	nod)			
Name of Monitoring Firm		Owner	_	ASCN	No.	Name of Abatem	ent Contractor (S	9}		ì	77	
(8) Hill m 21			STA		Value 1922	Commence of the second of the		CONHENTA	IC	ost	1)	UC
Street Address		1	1	2		Street Address	1 1					
	22 EA	st				<u> 2914 @</u>		٠.				
City, State, Zip Code	N2.					City, State, Zip C		01687				
0000			T +-1	ephone	Ala	Telephone No.	17 23	License No		_		=
Project Manager for Mon	itoring ritm		16	chrone	i i wo.	201-805-	5343	01165				
Start Date (10)		duled C			ate (11)	Name of OSHA N						
4-7-12.		- 15		2							-	
Occupancy Status During	•					Street Address						200 E
Facility Closed/Vacate	d During Entire P	eriod of	Abate	ment								_
☐ Abatement Performed ☐ Other - Describe:	Ultiside of Norma	a racuit	y mou	15		City, State, Zip Co	DCIC					
Scope of Work (Check at	I that apoly)		9000			L 					-	
	· TIEL PPPI)					The same of the sa		gative Pressure				
23 sf or ≥3 lf ≥160 sf or ≥260 ff			novat molitic			☐ Mini-End Gloveba	g Procedure					
		1				Non-Exc	mpted (*) and Ne	on-Friable Procedur	_	bato	mani	
			ocationally				(4)		^	Typ		
Location o		Uscd	Solei		Achee	Description of tos Containing Mate	rrial (ACM)	Amount				
Asbestos-Containing M TO BE ABAT	ED	Cu	stodia		(i.e.	thermal systems in	isulation,	(Specify	교	70	500	쭚
IN Facility (13)			taff? (12)			surfacing, VAT, other miscellaneo	or us)	SF or LF)	Removal	Repair	ncapsulate	Enclasure
(13)		Yes	No	N/A			oo. . €0		<u>N</u>		ale	9
ROCE		V			Por	F BLACK	HENRIAN	12005F	2			_
320 Flor	\P	1				JACW CA		6QLF	1			
IST Flons		v			-	= 1054/A	_	ZOLF	i		س	
1 1017												
Name of Registered Was	e Hauler			JDEP (Cubic Yards		stered Landtill				
	eting		_ H	laufer IC	No.	of Waste 30	BATHLE	HAM Lan	7 E	111		
City, State		. —				Disposal Date	City. State	_	Λ			
MEWBER		12		7			BATHLE	HAU PY	٠,		=	=
CAPICS VILLE	Titte	Pro	ادر م	Ha	wye	Signature)	In Ville	J Dela	7-	12		
ASB-11		/ (7%)			11		7	/				-
100-11	* P	o not us	e this	torm f	or asbeste	os licensure exemp	ted activities					

*End Date has been amended

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

RECEIMED 4220.

Date of Notification (1)					Building (perator ((2)					-			
9-18-2012					ship of U	Inion		201	2 SEP 21	01	4 9: &	ili				
Agencies Notified	Type Notification			Street A						740	1	-				
X EPA	Initial				erryville			AS	BESTOS	cc	MID	صل				- 2000000
EPA DEP	× Amended				te, Zip Co			0	& LICE			UL.				
▼ DOL	Amendment Emergency		- L		ton NJ 0)8827			OF LICE	180	iAC					
DOH DCA	justification)				Contact					Tel	ephone	Numbe	er			
DCA	Cancellation				iannetti											
Name of Facility Where	Abatament is Takin	a Diago /2		FACI	LITY INFO	DRMATIC	N	Time	of Facility (A)				_		_	
Hoffman House	Abatement is Takin	g Place (3))					parties.	of Facility (4)	67 t						
Street Address			200						School (K-12 Subchapter 8		or then I	V 12\				
	Dood								Other (i.e. pri				ouild	lings,	hom	es,
28 Baptist Church	Nuau			W. W V. S					etc.)	Г						898
City (5)								Squa	re Feet	# 0	Floors			dg. A	ge	
Union										<u> </u>				0+		
County (6)					Code (7) JSE ONLY)				nt Use (Prior			olished)			
Hunterdon		. (a)						550000000000000000000000000000000000000	se for Der							
Name of Monitoring Firm				ASCN					tement Conti		(9)					
RK Occupational E	nvironmentai A	naiysis i	nc.	0090	,				ntracting, L	LC						
Street Address 403 St. James Ave					3	Street /										
		2				22 Tr										
City, State, Zip Code Phillipsburg, NJ 08	065								ip Code	25						
				T.L	N.				ark, NJ 070	JSS		- 51-				
Project Manager for Mon Jon Gilbert	itonng Firm			Telephoi	ne No. 68-8414		Telepho 973-7				Licens 0108					
THE RESERVE OF THE PROPERTY OF		01.11					170000000000000000000000000000000000000				0100	0	7053			
Start Date (10) 9-5-2012		Schedule		ipletion i	Jate (11)				A Monitor	10						
	Al- 4 (OL								tracting, L	LC						
Occupancy Status During			50 . 2. 30				Street A		277							
Facility Closed/Vac							22 Tr	-								
Abatement Perform Other – Describe:		iai Facility	Hours						p Code	025						
-	II That Analys						Linco	om Pa	ark, NJ 07	USO						
Scope of Work (Check A	іі тпас Арріу)	-					_									
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enova emoliti	35-20 C/V			×		l Containmer ii-Enclosure	it with	Negativ	e Pres	sur	е		
2100 31 01 2200 11			CITIONU	OH			×	Glo	vebag Proce							
							×	Nor	n-Exempted	(*) and	Non-F	riable F	roc	edur	9	
		75507	Locati	50007											ment pe	1
Location		20 CONT. CO. CO. CO. CO. CO. CO. CO. CO. CO. CO	ormall Sole	*			cription					-	_	1 9	pe	
Asbestos-Containing TO BE ABA			ntenar			os Conta thermal s					mount		,,		Ē	т
In Facil		Custo	odial S	taff?	(i.e.		ing, VAT		ition,		pecify or LF)		ñ	Repair	cap	nclo
(13)	Ž.		(12)			other mi	iscellan	eous)			10.00		Remova	air	Encapsulate	Enclosure
		Yes	No	N/A					1						te	O)
Basem	ont	+-+			Ack	estos F	Ding In	eulat	ion	31	25 LF	-		-		
		+		3	ASI				lion			-1	4		-	\vdash
Basem	ent	\perp		X		Trans	ite Bo	ard		26	50 SF	_ >				
Attic, 2nd FI	. Chase			X		Transite	Flue	Pipe		12	20 SF	>	1			
Exterio	Exterior					Windo	w Glaz	zina		10	00 LF	>	7			П
Name of Registered Was	N	JDEP W	aste	Cubic Y		. 3	Name of R			dfill	<u>\</u>			-		
Jadar Contracting, L	233	auler ID		of Wast	te		G.R.O.V									
	0	033137		TBD				•.0.	Lanuill							
City, State	naE					Disposa	al Date		City, State		A 400	C7				
Lincoln Park, NJ 070	J33	1	an			TBD	2		Morrisvil	ie, P	A 190					
Completed by		Title				Sig	grature	۱. ۲	V.	_	X	Date	0.	140		
Lillie Lazarevich		Secre	etary			N	ill	لمد	Luzer	~~	2)	9-18	-2(112		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

							302	REC	EIVED					
Date (! Notification (1)					Name of	Building C					2.0	10	~	
Se	ptember 18, 20	12					Robert	Sci	7012 CCD	H AM 9: 6	20)6X	8	
Agencies Notified [x] EPA	L	Notific			Street Ad	dress	P O Bo	ox 2	205		•			
[] DEP [x] DOL [x] DOH	Amer	dment	tification #including		City, Stat	e, Zip Code	Brielle	, N.	J 08730 & LIC	OS CONTRO Ensing	L.			
[] DCA	justifi	cation) ellation			Name of		Schwart	z	Те	lephone Number				
				FAC	CILITY IN	VFORM	ATION							
Name of Facility Where A	batement is Taking	g Place	(3)					Ту	pe of Facility (4)	School (k-12) Subchapter 8 (oth	er than	⊭ 12)		
Street Address 823	3 South Drive								[x]	Other (i.e., privat homes, etc.)			al build	lings,
City		Coun	ty (6)		County Co (STATE U	ode (7) JSE ONLY)		quare feet 1500 sf	# of Floors	Bldg	Age 6	0	
Brick		Oce	an					Cı	urrent Use (Prior if Residen					
Name of Monitoring Firm		ASCM No	D.	Name of	Aba	tement Contractor		Inc.						
Street Address				Street Ac	ddres		+ 0 II-i+ 61							
Cir. Cir. Zir Cr.				City, Sta	te. 7.		ute 9, Unit 61							
City, State, Zip Code							8		Toms Ri	ver, New Jerse		55-12	271	
Project Manager for Moni	Alesa.		Telephone				Telephor 732-34	9-9	932	License N 00624	umber	1)		
Scheduled Start Date (10) 10/01/12			Scheduled 10/03/		tion Date (1	.1)	Name of	OSI	HA Monitor E.M.S.L	. Analytical				
Occupancy Status During [x] Fac		d Durir	ne) ng Entire Per	iod of A			Street Ac		ss 1056 Ste	elton Road				
	ner – Describe	Outside	or Norman	actifity	Tours		City, Sta	ite, Z	Zip Code Piscatav	vay, New Jerse	y 088	54	7/2	
Scope of Work (Check all	l that apply)						[]		Full Containment Mini-Enclosure	with Negative Pre	ssure			
	sf or ≥3 lf		[]	Renov			[]		Glovebag Procedu Non-Exempted (*)		Procedi	ıre		
[x] ≥16	60 sf or ≥260 lf		[x]	Demo	lition		[x]		Non-Exempted (*)	and Noter Habie				
				.33							Abat	ement	Туре	
	C		Is Location Normally u				Description of the Description o			Amount	R E	R E	E N	E N
Location Asbestos-Containing			Solely by		1	N	1aterial (A	ACN	1)	(Specify SF	M	P	C	C
TO BE ABA	ATED	Mai	ntenance/C		1		, thermal			or LF)	0	A	A P	L
in facilit	ty		Staff (12)			insu	lation, su VAT, o		cing,		v	R	S	S
(13)			(12)		1	oth	er miscell		ous)		A		U L	U R
		YES	S NO	N/A							L		E	E
Exterior			X	T	Asbes	stos sidin	g			1500 sf	X			
														_
	Name of Registered Waste Hauler Guardian Contracting, Inc. NJDEP Waste Hauler 20223					Cubic Ya	rds of Was		Name of Registe T.R.R.F.	red Landfill				
City, State					osal Date 04/12		City, S	tate	n, Pennsylvania					
Completed by (Print or T	, New Jersey	Title		10/0	Signati	ure	/	V	/		Date		_	
Nicholas Fe	rnicola	Proj	ject Manag	and the second second		VIIC	the	1	+11		9/1	8/201	2	
		*	*Do not use	this for	rm for asbe	estos licer	isure exer	npte	ed activities.					

Nocheck

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

Completed by J. Maiorano	Estimato				Signature	activities.		9//	8/	12	2	
Hackensack,	N.J. 076	01			9/21/12	City, State Waynes	burg , Oh					
Name of Registered Waste Hauter Best Removal Inc	ID	DEP W No. 710	Vaste H	lauler		Minerv	stered Landfill a Enterpri	ses				
									1			
BASEMENT		<u> </u>			MAL INSU		60 LF	1	×	1		
BASE MENT			مر	CEI	WIGTIN	Ē	475 SF		X			
BASEMENT	1.3		7	 	YAT		475 SF	= 1	K	1		
	Yes	No	N/A				27				6	0
Location of Asbestos-Containing Material (A TO BE ABATED IN Facility (13)	CM) Use	Locationali d Solel intenar custodii Staff? (12)	ly ly by nce/ al	Asber (i.e.	Description stos Containing M , thermal systems surfacing, VAI other miscelland	aterial (ACM) insulation, i, or	Amount (Specify SF or LF)		1	Tyr	1000	
Scope of Work (Check all that apply) □ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf		•		ovation nolition	國 Mini 图 Glov	Enclosure ebag Procedure	n Negative Pressure	iure				
Pacifity Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe:				,	City, State, Zip C South H		ck, N.J. 0	7606				
Occupancy Status During Abatement					Street Address 280 Huy	ler St						
9-19-12	9-21-1				Omega En	vironme	ntal Inc					
	heduled Completi		te (11)		Name of OSHA	Monitor						
Project Manager for Monitoring Firm	Te	elephon	ne No.		Telephone No. 201-329-	7444 -	License No. 00388		10010			
	÷				Hacken		.J. 07601					_
City, State, Zip Code					450 S. City, State, Zip C	River St	:					
Street Address					Street Address					_		_
(8)	- S OWNER	, work	.40.			emoval 1	77					
Name of Monitoring Firm Hired by Bui	iding Owner	ASCM			Name of Abaten	CESIO						_
County (6)	73		County ONLY)		(STATE USE	Producer of the commence of the same	Prior if being demolish	ed)	18			
MONTICLA!	n					1800	2	81			Ś	
Street Address 89 W(UOW 04) City (5) . PONT CLAI		;				Other (i.e. p homes, etc	8 (Other than K-12) rivate & commercial I) # of Floors	ouilding				
12. SATTER						☐ School (K-1	2)					
Name of Facility Where Abatement is	Taking Place (3)		FACI	LITY INF	ORMATION	Type of Facility	y (4)					_
DCA Cancella	tion		100		1100 Wale	₹ €	1				_	
Amenda D Emerger justification	icy (including	-	//O/ Name	of Contac	AIR, NJ	. 070	SBESTOS CO	NG		,		
☐ EPA ☐ Initial ☐ Amended	500000	1	City S	tate, Zip	Code		SESTUS CO	HTR	0	L		
Agency Notified / Type Notific	ation		Street .	Address	OWNALE	A JE	AL IZI M	ים אי	4	2		
9/18/2	012	1	飞.	SAT	TER WHI	TE ;	2012 SEP 21 A	M-0-	_			
Date of Notification (1)			Name	of Buildin	g Owner/Operator	(2)						



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)	-ACIAE	D			
	/	12			1.7	Princeton Unive						
Agencies Notified Type N	lotificati	ion		Street	Address			EP 21 AM 9	: 46	_		
☐ EPA ☐ Init				E.A.	MacMill	ian Building						
100 mm m m m m m m m m m m m m m m m m m	ended				tate, Zip C		→ 2RE	STOS CONTO	וחכ			-
☑ DHSS Am	endmen	nt # <u>1-9/18</u>	/12				å	STOS CONTI LICENSING	IUL.			
		(including				J 08544				×		
	tification				of Contact			Telephone Numb	er			
☐ ☐ Ca	ncellatio	n		Rob	ert Orte	ga		1	enus-			
				FAC	ILITY IN	FORMATION	r=					
Name of Facility Where Abateme			1000				Type of Facility	7 7				
Princeton University-Elen	nentary	y Particle	Lab-	Buildi	ng 25		School (K-12	!) 3 (Other than K-12)				
Street Address							Other (i.e., p	rivate and commerc	cial bu	ildino	IS.	
Faculty Rd							homes, etc.)		nai bo		,	
City (5)			***********				Square Feet	# of Floors	Bl	dg. A	ge	
Princeton							11,000	1	1	60+		
County (6)				Coun	ty Code (7)(STATE USE ONLY)		or if being demolisi	ned)			
MERCER				000	., 0000 (.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MRI Suite a		,			
	D. ildi.		(O) T	ASCM	No	Name of Abateme	1 1920 2 20 20 20 20 20 20 20 20 20 20 20 20					
Name of Monitoring Firm Hired b	y Bullair	ng Owner	(8)			17500 market (17500 market)	narratina en en mana menara a casa de 1882.					
ATC Associates, Inc.				0009	8		VIRONMENTA	L, INC.				
Street Address						Street Address						
3 Terri Lane						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode					
Burlington, NJ 08016						BRISTOL, PA	19007					
Project Manager for Monitoring F	irm		Tele	phone	No.	Telephone No.		License No.	Termit.		-	
Michael R Keehn			60	9-386	-8800	215-788-6040)	00509				
Start Date (10)	Isc	cheduled C	omple	tion Da	te (11)	Name of OSHA N	fonitor					
ON HOLD		/	- 60			BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During Abater	nent (CI	heck only	one)			Street Address						XXX - XX
☐ Facility Closed/Vacated Durin				ment		1123 BEAVE	RSTREET					
☐ Abatement Performed Outsid	-				cribe	City, State, Zip Co						10
Time of Abatement: 7:00AM						BRISTOL, PA						
Scope of Work (Check all that ap	nlv)					BRISTOL, PA	19007					
Scope of Work (Check all that ap	(Kid					☐ Full Con	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf			novati			☐ Mini-End	closure					
≥160 sf or ≥260 lf		∐ De	molitic	on			g Procedure	n-Friable Procedure	_			
		1	Locat			□ MOII-Exe	impled () and No	II-FIIADIE FIOCECUI				• And Rote
l anation of			Norma			Description of			-	atem	_	1
Location of Asbestos-Containing Materia	(ACM)	Use	ed Sole	ely by	Asbe	stos Containing Ma	SECTION OF THE PROPERTY.	Amount	Removal	Repair	Ē	Enclosure
TO BE ABATED	. ()	Ma	intena			., thermal systems	insulation,	(Specify	l o) air	ä	los
IN Facility		Cus	todial (12)			surfacing, VAT		SF or LF)	<u>a</u>		Encapsulate	ure
(13)		Yes	No	N/A	1	other miscellane	ous)		1		te	
1 st Floor -Workarea NF #1			No		Floor ti	le .		1400 SF			П	
1 st Floor- Workarea NF #1						sulation		20 LF				
1 Floor- Workarea NF #2			-	+				25 SF	-			-
					Floor ti					-		
1 st Floor- Workarea NF #1						v glazing		25 LF	\boxtimes		П	
Name of Registered Waste Haul			0.000	IJDEP \ lauler II		Cubic Yards of Waste	Name of Regis					
BRISTOL ENVIRONMENT	AL, IN	C.		18706			(i) Sassoning to a state of the	. NORTH LAND	-ILL			
City, State						Disposal Date	City, State					
BRISTOL, PA 19007							MORRISVI	LLE, PA 19067				
Completed By (Print or Type)		Title				Signature	1	Dat	te /	-/	5507	
Brian Scafiro		Estima	tor			Drian	Scalis	9	1/12	1/1	2	

ASB-41 MAY 11 B 5/2093 - A

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

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

0 <u>~</u> 7 ×0						ing Owner/Operator		CP71 MM C	3. 1 .	
9 /	13 /	12		1	rustees o	of Princeton Univ		EP 21 AM S	1: 48	
	Type Notification	on		Stre	et Address	S	ASRE	STOS CONT	7001	_
- 1059	Initial			E	.A. MacM	lillian Building	2	STOS CONT LICENSING	ROL	
☑ DHSS 674/	Amended				, State, Zip			TICE MOING	<u> </u>	
	Amendment Emergency					NJ 08544				
(NJAC 5:23-8)	justification)	(IIICIUU)	iirig		ne of Conta			Tolophess N.		
	☐ Cancellation	1		1	obert Ort			Telephone Nu	umber	
			100 100 100			NFORMATION				
Name of Facility Where Ab						IN OKWATION	Type of Facilit	tv (4)		
Princeton University	-Elementary	Partic	ele La	b-Build	dina 25		School (K-			
Street Address							☐ Subchapte	r 8 (Other than K-	12)	
Faculty Rd							☐ Other (i.e.,	private and comm	nercial buildin	gs,
City (5)							homes, etc	215-000		-
Princeton							Square Feet	# of Floors	Bldg. A	\ge
County (6)				TCou	inti Cada	(7) (OTATE HOE ON	11,000	1	60+	
MERCER				Cot	inty Code	(7)(STATE USE ONLY)	,	Prior if being demo	olished)	
Name of Monitoring Firm Hi	ired by Building	Owne	r (D)	ACCI	4.51-	1		and storage		
ATC Associates, Inc.		Owne	1 (0)	ASCA		Name of Abatem				
Street Address				000	198		IVIRONMENT	AL, INC.		
3 Terri Lane						Street Address				
			er Co			1123 BEAVE	AND			
ity, State, Zip Code						City, State, Zip C	ode			
Burlington, NJ 08016						BRISTOL, PA	19007			
roject Manager for Monitor	ring Firm		100	ephone		Telephone No.		License No.		_
Michael R Keehn			6	09-386	0088-8	215-788-6040	1			
						210-100-0040		1 00509		
	Sche	eduled	Compl	etion Da	ate (11)			00509		
Start Date (10)9 /24 /						Name of OSHA M	fonitor			
9 / 24 / Occupancy Status During Al	batement (Cher	10 ck only	/ _ {	/	ate (11)	Name of OSHA N BRISTOL EN				
9 / 24 / Decupancy Status During Al	batement (Chec	10 ck only eriod o	one)	ement	ate (11) 12	Name of OSHA M BRISTOL EN'	Monitor VIRONMENTA			
9 / 24 / Occupancy Status During Al Facility Closed/Vacated [] Abatement Performed Ou	batement (Checouring Entire Poutside of Norma	10 ck only eriod o	one) f Abate	ement	12	Name of OSHA N BRISTOL EN' Street Address 1123 BEAVER	Monitor VIRONMENTA			
9 / 24 / Decupancy Status During Al	batement (Checouring Entire Poutside of Norma	10 ck only eriod o	one) f Abate	ement	12	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co	Monitor VIRONMENTA R STREET			
9 / 24 / Decupancy Status During Al Facility Closed/Vacated [Abatement Performed Outline of Abatement: 7:00	batement (Checouring Entire Poutside of Normal DAM-3:30PM/	10 ck only eriod o	one) f Abate	ement	12	Name of OSHA N BRISTOL EN' Street Address 1123 BEAVER	Monitor VIRONMENTA R STREET			
9 / 24 / Occupancy Status During All Facility Closed/Vacated [Abatement Performed On Time of Abatement: 7:00 cope of Work (Check all the	batement (Checouring Entire Poutside of Normal DAM-3:30PM/	10 ck only eriod o	one) f Abate ity Hou	ement rs - Des AM	12	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA	Monitor VIRONMENTA R STREET ode 19007	AL, INC.		
9 / 24 / Occupancy Status During Al Facility Closed/Vacated [Abatement Performed On Time of Abatement: 7:00 Cope of Work (Check all the	batement (Checouring Entire Poutside of Normal DAM-3:30PM/	ck only eriod o al Facili	one) f Abate ity Hou M enovat	ement rs - Des AM	12	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA	Monitor VIRONMENTA R STREET ode 19007 ainment with Ne	AL, INC.		
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Occupancy Status During Al ☐ Facility Closed/Vacated [☐ Abatement Performed On Time of Abatement: 7:00 Scope of Work (Check all that ☐ ≥3 sf or ≥3 if ☐ ≥160 sf or ≥260 if Location of	batement (Chec During Entire Poutside of Norma DAM-3:30PM/ at apply)	ck only eriod or all Facilit R	one) f Abate ity Hou M enovat emoliti s Loca Norma	ement rs - Des AM ion on	12	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Mini-Encl Glovebag Non-Exer	Nonitor VIRONMENTA R STREET ode 19007 ainment with Ne osure procedure mpted (*) and No	AL, INC.	ure Abateme	ent T
9 / 24 / Decupancy Status During All Facility Closed/Vacated [Abatement Performed Or Time of Abatement: 7:00 Scope of Work (Check all that 3 sf or ≥3 if 160 sf or ≥260 if Location of Asbestos-Containing Mat	batement (Chec During Entire Poutside of Norma DAM-3:30PM/ at apply)	ck only eriod of all Facilities F	one) f Abate ity Hou enovat emoliti s Loca Norma ed Sole	ement rs - Des AM ion on tion	ate (11) 12 scribe Asbe	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Glovebag Non-Exer Description of stos Containing Mat	Nonitor VIRONMENTA R STREET ode 19007 ainment with Ne osure Procedure mpted (*) and No	gative Pressure	Abateme	_
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9 / 24 / Decupancy Status During Al Facility Closed/Vacated [Abatement Performed Ou Time of Abatement: 7:00 Scope of Work (Check all that ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Mat TO BE ABATEL IN Facility	batement (Checouring Entire Poutside of Normal DAM-3:30PM/_at apply) derial (ACM)	Ck only eriod of all Facilities F	one) f Abate ity Hou M- enovat emoliti s Loca Norma ed Sole aintena stodial (12)	ement rs - Des AM ion on tion tily ely by ince/ Staff?	Asber (i.e	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneo	Annitor VIRONMENTA R STREET ode 19007 ainment with Ne osure p Procedure mpted (*) and No f erial (ACM) nsulation, or	gative Pressure on-Friable Procedu Amount (Specify SF or LF)	Abateme Repair	Encapsulate
9 / 24 / Decupancy Status During All Facility Closed/Vacated [In Abatement Performed Outer Time of Abatement: 7:00] Scope of Work (Check all that is 23 sf or 23 if 2160 sf or 2260 if Location of Asbestos-Containing Matematical In Facility (13) St. Floor -Workarea NF #	batement (Chec During Entire Poutside of Norma DAM-3:30PM/_ at apply)	Ck only eriod or all Facility	one) f Abate ity Hou PM- enovat emoliti s Loca Norma ed Sole aintena stodial (12) No	ement rs - Des AM ion on tion tily ely by nce/ Staff?	Asber (i.e	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous	Annitor VIRONMENTA R STREET ode 19007 ainment with Ne osure p Procedure mpted (*) and No f erial (ACM) nsulation, or	gative Pressure on-Friable Procedu Amount (Specify SF or LF) 1400 SF 20 LF	Abateme Repair	Encapsulate
9 / 24 / Decupancy Status During All Facility Closed/Vacated II Abatement Performed Ou Time of Abatement: 7:00 Cope of Work (Check all the 2 ≥3 sf or ≥3 lf 2 ≥160 sf or ≥260 lf Location of Asbestos-Containing Mat TO BE ABATE! IN Facility (13) It Floor -Workarea NF # It Floor-Workarea NF #	batement (Chec During Entire Poutside of Norma DAM-3:30PM/_ at apply) terial (ACM) D	Ck only eriod of all Facility of the control of the	one) f Abate ity Hou M- enovat emoliti s Loca Norma ed Sole aintena stodial (12) No	ement rs - Des AM ion on tion tion tion tion ty ely by nce/ Staff?	Asber (i.e. Floor til	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont. Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaneous	Annitor VIRONMENTA R STREET ode 19007 ainment with Ne osure p Procedure mpted (*) and No f erial (ACM) nsulation, or	gative Pressure On-Friable Procedu Amount (Specify SF or LF) 1400 SF 20 LF 25 SF	Abateme Repair	Encapsulate
9 / 24 / Decupancy Status During All Facility Closed/Vacated It Abatement Performed Out Time of Abatement: 7:00 cope of Work (Check all that 2 ≥ 3 sf or ≥ 3 lf	batement (Chec During Entire Poutside of Norma DAM-3:30PM/_ at apply) Perial (ACM) 11	Ck only eriod of all Facilities F	enovatemoliti s Loca Norma ed Sole aintena stodial (12) No	ement rs - Des AM ion on tion elly by ince/ Staff?	Asber (i.e Floor til Pipe Ins	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont. Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaneous	Annitor VIRONMENTA R STREET ode 19007 ainment with Ne osure p Procedure mpted (*) and No f erial (ACM) nsulation, or ous)	AL, INC. gative Pressure on-Friable Procedu Amount (Specify SF or LF) 1400 SF 20 LF 25 SF 25 LF	Abateme Repair	Encapsulate
9 / 24 / Decupancy Status During All Facility Closed/Vacated [I] Abatement Performed Outone of Abatement: 7:00 Cope of Work (Check all that is a second of Asbestos-Containing Mathematics of A	batement (Chec During Entire Poutside of Norma DAM-3:30PM/ at apply) derial (ACM) D	Ck only eriod of all Facilities F	enovatemolities Loca Normaled Solial (12)	ement rs - Des AM ion on tion tion staff? N/A DDEP V auler ID	Asber (i.e Floor till Pipe Ins Floor till Window Vaste No.	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont. Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaneous	Nonitor VIRONMENTA R STREET ode 19007 ainment with Ne osure Procedure mpted (*) and No ferial (ACM) nsulation, or ous) Name of Regis	gative Pressure on-Friable Procedu Amount (Specify SF or LF) 1400 SF 20 LF 25 SF 25 LF	Abateme Repair	Encapsulate
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9 / 24 / Decupancy Status During All Facility Closed/Vacated D Abatement Performed Outon Time of Abatement: 7:00 Coope of Work (Check all that 2 ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestos-Containing Maton To BE ABATE IN Facility (13) St Floor - Workarea NF # St Floor - Workarea NF #	batement (Chec During Entire Poutside of Norma DAM-3:30PM/_ at apply) derial (ACM) derial (ACM) derial (ACM) Title	Ck only eriod or all Facility F	one) f Abate ity Hou PM enovat emoliti s Loca Norma ed Sole aintena stodial (12) No	ement rs - Des AM ion on tion tion staff? N/A DDEP V auler ID	Asber (i.e Floor till Pipe Ins Floor till Window Vaste No.	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont. Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaneous establishment of the sullation establishment of the sullation glazing Cubic Yards of Waste	Name of Regis G.R.O.W.S. City, State	AL, INC. gative Pressure on-Friable Procedu Amount (Specify SF or LF) 1400 SF 20 LF 25 SF 25 LF tered Landfill NORTH LAND	Abateme Repair	Encapsulate



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

Date of Notification (1) 9/14/12				Name of	of Building Authority	Owner/O Transit	perator Corp	r (2) ora	tion 2012 SE	P 21	AM 9:	20			
Agencies Notified	Type Notification	2018-0-120-0		Street A	Address on Street				ASBES	The	CONT	100			
EPA DEP DOL	Initial Amended Amendment		_		ate, Zip Conwold, N		4		& [İCE	KSING	(UL			
DOH DCA	Emergency (i justification) Cancellation	ncluding			of Contact Binder					Те	lephone Nu	mber			
				FAC	ILITY INF	ORMATIC	ON								
Name of Facility Where					.,			Ту	pe of Facility	(4)					
PATCO Contract 1	U-G, Lindenwold	Station	(Sta	π Poir	nt)				School (K-						
Street Address Whiteehorse Road	& Berlin Road							×	Subchapter Other (i.e. petc.)				dings	, hom	ies,
City (5) Lindenwold	3600							Sq N/	uare Feet	# o	f Floors A	- 25	Bldg. A	Age	
County (6) Camden					Code (7) USE ONLY	,			rrent Use (Pri		ing demolis	hed)			
Name of Monitoring Firm	Hired by Building C	Owner (8)		ASC	M No.		Name		batement Cor		(9)				
-							Matti	iola	Services, I						
Street Address							Street 2082		ress Lucon Roa	d					
City, State, Zip Code									, Zip Code k, PA 1947	4				4	
Project Manager for Mor			Telepho	one No.		Teleph 610.		No. .5634		License N 01077	10.				
Start Date (10) 4/16/12		Schedule 12/31/1		pletion	Date (11)				SHA Monitor Services, I	LC					
Occupancy Status Durin	g Abatement (Check	Only On	e)		2800		Street					-		_	
Facility Closed/Vac	ated During Entire P	eriod of A	batem				2082	BI	ucon Road	d					
Other – Describe:	Not occupied	ai Facility	nours						, Zip Code k, PA 1947	4					
Scope of Work (Check A	II That Apply)						,-	-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit				×		Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				04	
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Asbestos-Containing	Material (ACM)		Sole			tos Conta	ining M	/later	ial (ACM)	Α	mount			ш	
TO BE AB		0.000000	odial S		(i.e.	thermal s	systems ing, VA				Specify or LF)	Ren	Re	nca	End
(13)	,		(12)			other mi				O.	OI LI)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								=		ate	e,
Voorhees, Cherry H	lill, Haddonfield			X	Remov	val of ov	erhea	ad A	CM mat'l	5 1	MILES	Х			
W.					ja	cket fror	m utilit	ty c	able	400000000000000000000000000000000000000					
(Project will commer			(Proj	ect start	s @ L	_ind	enwold								
and proceed to I			and e	nds @ F	erry A	Ave	Station)								
Name of Registered Was		JDEP V		Cubic Y			Name of	Registe	red Landfill						
American Disposal S		auler ID N2069		of Wast			JP Mas	caro -	Pioneer	Cros	sing				
City, State Lumberton, NJ				Disposa	al Date	,	City, State Birdsbo		4						
Completed by Caroline M. Harper		Title Projec	t Ma	nager		Sig	nature	. /	1/1/1	/	Da 9/	ite 14/12	2		
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