Λ	PAI	M														Print I
Date of Notification (1) 9/19/17		1, <i>BD</i>	NO	(Pursu	State of TON OF A ant to NJA	SBESTO AC 8:60 a	S ABATI nd 12:12	20)	and the Control of th		E (。尼		\mathbb{V}		
				Nam City	ne of Buildi of Atlan	ng Owner	/Operato	or (2)	Control of the Contro		SE	P 2	2 2	2017		베
Agencies Notified	Type Notification	on		100000000000000000000000000000000000000	et Address 11 Bacha					ad ho.						distribution of the same of th
DEP X DOL	Amended Amendme	nt#		City,	State, Zip ntic City	Code			l	AS	SEES	IOS LICEN	COV	G G	L &	
DOH DCA	Emergence justification Cancellation	n)	ing		e of Contac		- 5 () - 5 - 5 - 5 - 5									
				F	ACILITY IN	EODMAT	TON			_						
Name of Facility Where Ab FIRE DAMAGED AB	atement is Tak	ing Place	(3)		KOILIT IN	FURIVIA	ION	Тур	oe of Fac	ility (4)						
Street Address	ANDONED	RESIDI	ENSE						School	(K-12)						
14 to 18 North Maryla	and Ave							×	Subcha Other (etc.)	apter 8	(Other ate & c	than Kommer	-12) rcial b	uilding	s, ho	mes,
City (5) Atlantic City								Squ 300	are Feet		# of F	loors		Bldg.	Age	
County (6) Atlantic				Count (STAT	y Code (7) E USE ONL	Y)		Cur	rent Use andone	(Prior i	f being	demoli	ished)			
Name of Monitoring Firm Hi N/A	ired by Building	Owner ((8)	ASC	CM No.		Name	of Ab	atement i Enviro	Contra	ctor (9))				
Street Address							Street	Addre	ess	7		ervice	S		-	
City, State, Zip Code							City, St	ate, 2	elon Ro Zip Code		102					
Project Manager for Monitor	ing Firm			Teleph	one No.		Teleph		NJ 074	405	11:		NI			
Start Date (10)		Cabad	1.10		908-218-088						1000	cense I 1228	NO.			
10/1/17		10/5/1	17	mpletior	1 Date (11)		Name of OSHA Monitor Yannuzzi Environmental Services									
Occupancy Status During At Facility Closed/Vacated	During Entire	Period of	Abatar	mont			Street A	Addre								
Abatement Performed (Other – Describe: ABA	Jutside of Norn	nal Englis	ty Hour	S			City, Sta	ate, Z	ip Code		102					
Scope of Work (Check All Th	at Apply)						Kinne	lon,	NJ 074	105						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demolit				×	Glo	II Contair ni-Enclos ovebag P n-Exemp	ure rocedu	re					
Location of			S Locati Normal	ly		Des	cription o		T Exemp	160 () (and No	n-Friad	DIE Pro	Abate		t
Asbestos-Containing Mate TO BE ABATED In Facility (13)	erial (ACM) 2	ed Sole aintenar todial S (12)	nce/	Asbest (i.e.	os Conta thermal s	ining Ma ystems ing, VAT,	terial nsula or	(ACM) ition,		Amou (Speci SF or L	ify	Remova	Repair	Encapsulate	Enclosure	
ENTINE OTDA		Yes	No	N/A									a	=	ilate	ure
ENTIRE STRUCT	TURE			X	EN	ITIRE S	TRUC	TUR	RE		N/A					
ame of Registered Waste Ha	uler		1													
annuzzi Group	iuici		Ha	IDEP Wauler ID 467	No.	Cubic Ya of Waste 200			Name o Atlanti							
ty, State nnelon NJ			1.7			Disposal 10/5/17		-	City, Sta	ite		y				
ompleted by hn Mucha		Title Projec	ct Mar	na .		Space Management - 12	nature	1/1	Pleasa	intville	NJ	Date				_
			or ividi	19		XXI			9/19/17							

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

13480018283			FICATIO	itate of New N OF ASBES t to NJAC 8:	STOS AB		NT .		G li	7 7 7	V	Pi	rint F
Date of Notification (1) 09/20/2017			1 1000000000000000000000000000000000000	of Building O	wner/Ope	erator (2)	14	-	SEP 2	2	2017		IJ
Agencies Notified Type Notification	on	-		Address		92 	- I	ASE		<i></i>		\perp	
X EPA X Initial			011 01				- January	105	LICEN	UUA ISINI	HRO G	L &-	1
EPA Initial Amended Amendme				ate, Zip Code sburg ,nj,(THE REAL PROPERTY.	
DOH justificatio)	Name o	of Contact				TA	lamber - 11.				
Cancenau		-	Mike	ILITY INFOR	MATION	ı							
Name of Facility Where Abatement is Tall PRIVATE HOUSE	king Place (3)		12171 1111 011	din-trion		pe of Facility	(4)					
Street Address							School (K- Subchapte	er 8 (Oth	er than K-1	12)			
City (5)						×	etc.)		& commerc				es,
City (5) Phillipsburg		XIII>-5-5-955				Sq N/	uare Feet A	# o	f Floors A		Bldg. A N/A	Age	
County (6) Warren				Code (7) USE ONLY)			rrent Use (Pr			hed)			
Name of Monitoring Firm Hired by Buildin N/A	g Owner (8))	ASC	M No.	31 055	ame of A	batement Co	ntractor	(9)				
Street Address					Si	treet Add	ress		****				Ŀ.
City, State, Zip Code							klin Street Zip Code		-				
					1 120		n,NJ,0752	4					
Project Manager for Monitoring Firm			Telepho	ne No.		elephone 173-333			License N 01274	No.			
Start Date (10) 9/29/2017	Schedul 9/30/2		mpletion	Date (11)	1 9 9		SHA Monitor						
Occupancy Status During Abatement (Che	eck Only Or	ne)			St	reet Add	ress						
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: OCUPIE	Period of a	Abater / Hour	ment s				VKLIN STE Zip Code	REET					. 3000 3000
Scope of Work (Check All That Apply)					- F	PATERS	SON,NJ,07	7524					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Martine	Renova Demoli				×	full Containm fini-Enclosur Blovebag Pro Ion-Exempte	e cedure				e	
		Locat			-50 10						Abate	ement	
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ely by	Asbestos		ng Mater		А	mount		Π		
TO BE ABATED In Facility		todial (12)	Staff?		ermal sys surfacing	, VAT, or			pecify or LF)	Remova	Repair	ncap	Enclosure
(13)	Yes	No	N/A	ot	ther misc	ellaneous	5)			oval	air	Encapsulate	sure
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				-									
Name of Registered Waste Hauler		IN	JDEP W	aste C	Cubic Yard	ds	Name of	Registe	red Landfill		<u></u>		
EHW ABATEMENT LLC		04 632	lauler ID 11946	No. o	f Waste I/A		minerv	177.0					
City, State PATERSON,NJ	*5	- lead			isposal D	Date	City, Stat		rd wayne	shur	a OH		
Completed by	Title			=/11/19	Signa		/ 300	11	Da	ite			
Victor Espiritu	Mana	ager			11/	WH	N IN	MA	1- 09	9/20/	2017		

09/20/2017

Print Form

PAID

ASB-41

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Date of Notification	(1)	200000000000000000000000000000000000000	(i ditada	The second secon	Ruilding Own	Name and Address of the Owner, which the	or (2)			7 / 3 /	
09 / 21	/ 2017			Name of Building Owner / Operator (2)						0.00	C20 200-1
-00 /-1	/			Street Ad			111	THE REAL PROPERTY AND ADDRESS OF THE PARTY AND			
Agencies Notified	Type of N	otification		345 MAIN			2 1 1 1 1 1 1 1 1				
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				ACILITY II	NFORMATIO	V			1.1001=6.10	HIC	L &
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Name of Facility W	here Abatem	nent is Taking	Place (3)		Type of Fac	ility (4)					
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						School (K	-12)				1
Street Address							er 8 (Other				1
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0:4 (5)	To 1 10		10	(m)	ļ	bldgs., ho			1		
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					Current Use	100	eing demoi	ished)			
Name of Manitoria	- Fi I II d	L. Did. O.	(0)	IAGON NO	BANK/OFFIC	-510					
Name of Monitoring EFI GLOBAL	j Firm Hirea	by Blag. Own	er (8)	ASCINI NO	Name of Aba)			
L. I GLODAL					northstar co	muacung g	noup inc				
Street Address					Street Addre	000					
155 WEST STREET					32 williams						
City, State, Zip Cod					1	punktuj					
WILMINGTON, MA					City, State, 2	in Code					
Project Mngr. For N		irm	Telephone Nu	mber	east hanove						
SEAN CASSIDY			978-688-3736		l daot manovo	0					
Sheduled Start Date	(10)	Sched, Comp	letetion Date (1	1)	Telephone N	lumber		License	Number		
10 / 02	/ 17	11	/ 10 /	17	973-884-868						
	/—	/	/						(00860	
Occupancy Status					Name of OS	HA Monitor					
		ted During Ent	ire Period of		northstar con	tracting gro	up inc				
Abateme					Street Addre	ess					
		d Outside of N	ormal Facility			53 72 05355560					
	Describe:				32 williams p						
Other - D	escribe:	7AM - 3:30PM			City, State, 2						
C	-1. 411 774	4 1 1		CHILDREN THE	east hanover	nj 07936			-		
Scope of Work (Ch	eck All Inat	Apply)									
☐ Demoliti	on	V	Renovation		Full Contain	mont with	Magativa D	rogouro.			1
>3sf or >			Renovation		Mini - Enclos		Negative F	ressure			1
☑ ≥160 sf c					Glovebag Pr						
				П	Non-Exempt		Non-Friable	e Procedu	ıre		
Location	of	ls		Descrip	tion of			Abateme	nt Type		
Asbestos Con	taining	Location	A		Containing			R		E	[E
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(13)		by Main-	or	other mis	cellaneous)			V	A	P	0
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		Staff (12)						L	R	U	R
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Name of Registered	Waste Hau		NJDEP Waste	Cubic	Name of Reg	istered La	ndfill				
NORTHSTAR CONT			Hauler ID No.	Yards	GROWS	, La					- 1
		,		of Waste							
City, State			-	Disposal	City. State						
EAST HANOVER, N	J			Date	TULLYTOWN	N, PA					
	1 1 1 1 1 1 1					11					
Completed by (Prin	t or Type)		Title			Signature		17		Date	
STEVEN STILES			PROJECT MAI			1		K	1/2		
The state of the s						1 1/16	reex.	116	Li,		09/21/17

CNX# 25595

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Check # 25595

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Date of Notification (1)	(10/17			Name	e of Buildir	ng Owner/Operato			24-12		000	
	12/17						Holmes	and been	SE	P 2	2	2017
Agencies Notified EPA	Type Notification	n		Stree	et Address			Place force				
☐ DEP	Amended			City	State, Zip 0	ode		- As	Br.S.I	USC	7.16	TD
⊠ DOL	Amendment		_	City,	otate, Zip t		leptune, Nj (LI	CEN	SIN	G
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				FA	CILITY IN	ORMATION		-				=
Name of Facility Where		200					Type of Facility	y (4)				
J 	Re	sidenta	al				School (K-1					
Street Address							Other (i.e., phomes, etc	8 (Other than K-1 private & commerce.)	ial buil	dings,		
City (5)	20000	65.7978.71		224			Square Feet	# of Floors	В	ldg. Ag	е	\neg
	Neptun	e, NJ ()775				1800	_ 2	_ _	75+	-/-	_
County (6) Mo	nmouth			USE USE	nty Code (ONLY)	7) (STATE	Current Use (P	rior if being demol	ished)			
Name of Monitoring Firm		Owner	T	ASCM	No.	Name of Abaten	nent Contractor (9	9)				=
	MECS					Stev	vens Environ	mental Servic	es, Ir	ıc.		_
Street Address	202					Street Address						
	PO Box 3	41						30x 322				_
City, State, Zip Code Cr	osswicks, NJ	08515	5			City, State, Zip C		n, NJ 08501				
Project Manager for Mor	nitoring Firm		Tele	phone	No.	Telephone No.		License Ne.				=
Bill We	isgarber		(60	9) 29	8-4070	(609) 25	59-9688		00493	3		_
Start Date (10)	Sch	eduled C	omple	tion Da	ite (11)	Name of OSHA I						
9/29/17			0/6/	17			M	IECS				_
Occupancy Status Durin		CONTROL CONTROL OF				Street Address	20.5					
Facility Closed/Vacate								30x 341				
☐ Abatement Performed ☑ Other - Describe:		iai Facilit	у нои	rs		City, State, Zip C		NII 00515				
Scope of Work (Check a						·	Crosswick	cs, NJ 08515				_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	іі (пас арріу)	Re De	novati molitic			☐ Mini-End Gloveba	ag Procedure					
		Is I	ocatio	n		Non-Exe	empted (*) and No	on-Friable Procedu		batem	ont	\dashv
		No	ormally	,					"	Type		
Location of Asbestos-Containing N			Soleh		Ashesi	Description of os Containing Mat		Amount			Т	\neg
TO BE ABAT	ED	Cu	ıstodia			thermal systems i	nsulation,	(Specify	Z	771	Enc	四
IN Facility (13)		0.00	Staff? (12)		=	surfacing, VAT, other miscellaned		SF or LF)	Removal	Repair	aps	Enclosure
(10)		Yes	No	N/A		other misoenanec	ous)		val	#	Encapsulate	sure
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Attic			X			Vermiculi		170 sf	×	\vdash	+	\dashv
1 1010		+			-				1	+	+	\dashv
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Name of Registered Was	ste Hauler	-11	IN	JDEP V	Vaste I	Cubic Yards	Name of Regi	stered Landfill	1			\dashv
Stevens Environn		es, Inc	Н	auler ID	No.	of Waste	- C	Fairless Lan	dfill			
City , State			-11			Disposal Date	City, State			7.		
	Allentown,					10/6/17	14/	Morrisville,	PA			
Completed By	Tit			1/		Signature'	1//	Date	0/00	/17		
Mahlon E. Ste	vens	Pr	oject	Man	ager	/// */ \			9/20	/1/		_

UNK# 25596 State of New Jersey Check # 25596 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) Pensak 9/20/17 2017 Type Notification Street Address Agencies Notified EPA DEP Initial Amended ASSEST IS CONTROL & City, State, Zip Code DOL. Amendment # LICENSING Edison, NJ 08820 ☐ Emergency (including DOH DCA justification) Telephone Number Name of Contact Cancellation Dan Pensak **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residental School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age 75+/-Edison, NJ 08820 1800 County Code (7) (STATE Current Use (Prior if being demolished) County (6) USE ONLY) Middlesex Name of Monitoring Firm Hired by Building Owner Name of Abatement Contractor (9) ASCM No. **MECS** Stevens Environmental Services, Inc. Street Address Street Address PO Box 322 PO Box 341 City, State, Zip Code City, State, Zip Code Allentown, NJ 08501 Crosswicks, NJ 08515 License No. Project Manager for Monitoring Firm Telephone No. Telephone No. 00493 (609) 259-9688 Bill Weisgarber (609) 298-4070 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) **MECS** 10/2/17 10/6/17 Street Address Occupancy Status During Abatement (Check only one) PO Box 341 ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: 8 am - 4 pm Crosswicks, NJ 08515 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Mini-Enclosure Renovation Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Normally Type Used Solely by Description of Location of Maintenance/ Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate (i.e., thermal systems insulation, Custodial (Specify TO BE ABATED Remova Staff? SF or LF) surfacing, VAT, or IN Facility (13)(12)other miscellaneous) Yes No N/A 10 sf X **Boiler Packing** Basement X Pipe Insulation 1 lf X Basement Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 18292 of Waste Stevens Environmental Services, Inc. Fairless Landfill City, State Disposal Date City, State Morrisville, PA

Project Manager

10/6/17 Signature

Date

9/21/17

Completed By

Mahlon E. Stevens

Allentown, NJ

Title



Cl	nec	k #	255	98
L	nec	Κ₩	255	:

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Date of Notification (1)	9/21/17			Name	e of Buildir	ng Owner/Operato	or (2) Stevenso	n	(
Agencies Notified	Type Notific	cation		Stree	et Address		Stevenso		P 2		201	7_				
DEP DOL	Initial Amende	nent#	_	City,	State, Zip		Γrenton, NJ 0	ASUES	TOS JCEI							
☑ DOH □ DCA	☐ Emerger justificat	tion)	ng	Name	e of Contac			Telenhana Num	No. of Concession, Name of Street, or other Designation, Name of Street, or other Designation, Name of Street,	NON	NCI					
						ORMATION	5011					_				
Name of Facility Where	e Abatement is	Taking Plac	e (3)	ГА	CILITIN	ORIVIATION	Type of Facility (4)									
		Resident			Settlerm 5, altropie		School (K-	68/75-NEC-11/GEN								
Street Address								r 8 (Other than K-12 private & commerci		dings	1					
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	Tren	nton, NJ	0861				2000		_ _	85	+/-					
County (6)	Mercer	100		Cou USE	nty Code (ONLY)	7) (STATE	Current Use (F	(Prior if being demolished)								
Name of Monitoring Fin (8)	m Hired by Buil MECS	ding Owner		ASCM	No.	ı	ment Contractor (vens Environ	9) mental Service	es, Ir	ıc.						
Street Address	PO Box	x 341				Street Address PO Box 322										
City, State, Zip Code	Crosswicks,		5			City, State, Zip (_							
Project Manager for Mo		110 0001		ephone	No.	Telephone No.	Allentown, NJ 08501 elephone No. License Ne.									
	eisgarber		11 11 11 11		8-4070		59-9688	0	049	3						
Start Date (10) 10/4/17		Scheduled (Comple 0/10		ate (11)	Name of OSHA		1ECS								
Occupancy Status Dur	ing Abatement			7 1 7		Street Address										
☐ Facility Closed/Vaca						00	Box 341				_					
Other - Describe:			ity 1100	115		City, State, Zip 0		ks, NJ 08515								
Scope of Work (Check	all that apply)											_				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emolitio			 ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure 										
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Location	of	Use	lomall d Sole	ly by		Description of	of			Тур	e -					
Asbestos-Containing TO BE ABA			intenar			tos Containing Ma thermal systems		Amount (Specify			Œ	Ш				
IN Facili			Staff?		(1.0.,	surfacing, VAT	, or	SF or LF)	Remova	Repair	caps	Enclosure				
(13)		Yes	(12) No	N/A		other miscellane	ous)		oval	air	Encapsulate	sure				
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Crawl Space					Th	ermal Pipe In	sulation	18 lf	×							
					Waste O No.	Cubic Yards of Waste	Name of Reg	istered Landfill								
Stevens Environmental Services, Inc.					292	2 cu		Fairless Land	dfill							
City; State Allentown, NJ						Disposal Date	Gity, State	/Morrisville,	PA							
Completed By Mahlon E. St	evens	Title P	rojec	t Mar	nager	Signature	MY	Date	9/2	1/17						
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Date of Notification (1)				Name	of Building	Owner	/Operator	r (2)	100		000	, 00) 00	4.73	
September 20, 201				Sout	h Jersey	Port (Corpora	ation	1		SEP	2.2	20	17/	
Agencies Notified	Type Notification				Address	_==			1						
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□ DEP	Amended				tate, Zip Co					5-01010		DENS		10/	-01
X DOL	Amendment Emergency (_	Cam	den, NJ	08103						-	11 1 1 1 1	Paralle Market	
⊠ DOH	justification)	moduling	, [Name o	of Contact							1			
DCA	Cancellation			Antho	ony Cola	vita									
N 65 W 111				FAC	ILITY INFO	ORMAT	TION								
Name of Facility Where A		Place (3)					Туре	of Facility (4))					
Maintenance Garag	e 								School (K-12						
Street Address	2001								Subchapter 8				9.015-0		
101 Joseph A Bolza	no Blvd								Other (i.e. pri etc.)	vate &	commer	cial bu	laings	, nom	es,
City (5)									re Feet	# of	Floors		Bldg.	Age	
Camden								3,90	0	1			50 y	ears	
County (6)					Code (7)			Curre	nt Use (Prior	if bein	g demoli	shed)			
Camden				(STATE	USE ONLY			Gara	age/ maint	enan	ce				
Name of Monitoring Firm I	Contract to the second)	ASC	M No.		Name		tement Contr						
Environmental Testi	ng Consultants	;		n/a			Silt A	Asbes	tos Abater	ment	LLC				
Street Address							Street	Addres	S		·				
413 N. Black Horse	Pike						1800) Fede	eral Street						
City, State, Zip Code							City, S	state, Zi	p Code						
Runnemede, NJ 080	78						100		NJ 08105						
Project Manager for Monit	oring Firm		T	Telepho	one No.			none No			License	No.			-
Howard Zenobi					82-1311		100	630 3			01303				
Start Date (10)		Schedul	ed Cor	npletion	Date (11)		Name	of OSH	IA Monitor						
09/30/17		10/2/1		***	7. 85.365		Self	monito	or						
Occupancy Status During	Abatement (Check	Only O	ne)				Street	Addres	s						_
Facility Closed/Vacat	ed During Entire P	eriod of	Abaten	nent											
Abatement Performed Other – Describe:	Outside of Norma	al Facility	y Hours	5			City, S	tate, Zip	o Code						
Scope of Work (Check All	That Apply)														-
≥3 sf or ≥3 lf		X F	Renova	tion] [Containmon	t with t	lonativo	Drage			
2160 sf or ≥260 lf		_	Demolit						Containmen -Enclosure	t with i	vegative	Pressu	ire		
		100000					×	Glov	vebag Proced	dure					
		Т						Non	-Exempted (*) and	Non-Fria	ble Pro			
		20000	Locati									1		ement pe	
Location of			Normal d Sole				scription					-	Τ,		
Asbestos-Containing M TO BE ABAT		Ma	intena	nce/			taining M systems				ount ecify	77		E	m
In Facility		Cus	todial S (12)	Staff?	(cing, VA				or LF)	em	Repair	cap	nclo
(13)			(12)	,		other r	niscellan	eous)				Remova	air	Encapsulate	Enclosure
		Yes	No	N/A								-		ate	e e
Maintenance s	storage	Х			Thern	nal sys	stems i	nstalla	ation	106	S LF	х			
						2011/01/08						+-			
												-	-		
Name of Registered Waste	Hauler		5.4 0.000	JDEP Wauler ID			Yards		Name of Re	gistere	d Landfi	II			
Champion Disposal			978	2707	140.	of Wa	sie		Grows La	andifil	I				
City, State				- (10 5 0)			sal Date	-	City, State						
Hainsport, NJ						10/2/			Morrisvill	e, PA	2				
Completed by		Title				215-31-32-39	ignature	Λ	1	7.000		ate			
Jeff Yekenchik		Own	er					//	1			9/20/	17		
The state of the s								ha	100						

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S PAII	(Pursuant to NJAC 8:60 and 5:16)										F	0		П	7.0	-
7	9		(P	ursua	nt to NJA	AC	8:60 and 5:10	6)	ON THE PERSON NAMED IN	M.	15	6	5		\mathbb{V}	E
Date of Notification (1)				Nam	e of Buildin	g O	wner/Operator ((2)	OF STREET	K	4	No.	/	-		1
09/19	/1	7		D	& A Demo	o, L	LC		0.000	distance distance distance	1	2	de,	8	our.	and the same
	tification	1		Stree	et Address				and the same	1 11	U	IL	4		UI/	-
	I			21	56 Campl	lain	Road			Websey						paterne
□ DOLWD □ Ame				_	State, Zip (-	90	ASBE	STO	C	ONT	ROL	- Be
	ndment a		-		Isboroug				L	74 deleteration	**	LICE	NS	ING		
	rgency (i ication)	nciuain	g		e of Contac		Control of the Contro		Te	_ p						
☐ Cano	500			An	tonio Din	nuz	io	9								
				FA	CILITY IN	IFO	RMATION								C 10	
Name of Facility Where Abatemen	t is Takir	ng Place	e (3)	0.000000				Type of Facility	(4)							
Commercial Garage								School (K-12								
Street Address		///	100					☐ Subchapter 8	8 (0	ther th	nan K-	12)				
121 Route 9								Other (i.e., pi	rivat	te and	comn	nercial	bui	lding	S,	
City (5)								Square Feet		# of FI	oors	1	Bld	g. A	ge .	
Marlboro								1500 sf	1.0	1				0	-	
County (6)				Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pri	ior if	f being	demo	olished	1)			
Monmouth							**	Commercia		The state of the s	CONTRACTOR LINES					
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9)								
Guardian Contracting, Inc.							Guardian Cor	ntracting, Inc.								
Street Address						Sti	reet Address									
1889 Rte. 9, Unit 61						'	1889 Route 9	, Unit 61								
City, State, Zip Code						Cit	ty, State, Zip Co	Code								
Toms River, New Jersey 08		200111-1-1-1					Toms River, N	New Jersey 08	755	5						
Project Manager for Monitoring Fire	n		Tele	ephone	No.	Те	lephone No.	L	icens	e No.						
Nicholas Fernicola	- 110		7	32-349	-9932	1	732-349-9932			006	24					
Start Date (10)					ite (11)	Na	me of OSHA M	lonitor								
09 /29 /17	- 400			2_/	17	E	E.M.S.L. Anal	ytical								
Occupancy Status During Abateme						Str	reet Address		- 11				-			
☐ Facility Closed/Vacated During	Entire Pe	eriod of	Abate	ment		1	1056 Stelton									
Abatement Performed Outside of Time of Abatement:AM-	of Norma	I Facilit	y Hou	rs - Des	scribe	Cit	y, State, Zip Co	ode	102							
		IVI/	PIVI		AIVI	F	Piscataway, N	lew Jersey 088	354							
Scope of Work (Check all that appl	()								79030	1000						
≥3 sf or ≥3 If		Re	novat	ion			☐ Full Conta	ainment with Neg	ativ	e Pres	ssure					
☐ ≥160 sf or ≥260 lf		☑ De	moliti	on			☐ Glovebag	Procedure								
		10	1 000	lion			⊠ Non-Exer	mpted (*) and Nor	n-Fr	iable l	Proced					
Location of		1 22	Loca Norma				Description of					1	_		ent Ty	/pe
Asbestos-Containing Material (A	CM)			ely by	Asbes	stos	Containing Mat			Amo	ount	3	0	Repair	Enc	Enc
TO BE ABATED IN Facility			intena todial	Staff?	(i.e.		ermal systems in			(Spe		3	Demoval	air	aps	Enclosure
(13)			(12)			ot	surfacing, VAT, ther miscellaned	or ous)		SF o	rLF)	2	2		Encapsulate	лге
		Yes	No	N/A				,							6	
bathroom					asbesto	s fl	oor tile			16	sf		a	П		
exterior			\boxtimes		roof flas	shir	na			20	sf	D	-			
													7			
			П										-			
Name of Registered Waste Hauler				JDEP \	Naste	Cul	bic Yards of	Name of Regist	toro	dlon	4£111	L	1	ш		Ш
Guardian Contracting, Inc.			1503	auler II	O No.	Wa	ste	T.R.R.F.	lere	u Lan	aiiii					
City, State		W		20223	5	Dis	posal Date	City, State	4							
Toms River, New Jersey							0/03/17	Tullytown,	Per	nsvl	vania	1				
Completed By (Print or Type)	Title	9					Signature	1	. 01	- A			1		-	
Nicholas Fernicola	1	roject	Man	ager			Olgitatate	1	1		1	Date 9	1	9/	17	



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					State of New Je	arcou.			1	-			_	
			N	OTIFICA	ATION OF ASBEST		TEMENIT							
					uant to NJAC 8:60									
Date of Notification	(1)		Nam		ng Owner/Operator (2)									
September 8, 2	\$3\$\				ty Management L	ıc								
Agencies Notified	Type Notification			t Address					-		_			
⊠ EPA			232	1 Kenn	edy Blvd., Suite Bi	1								
☐ DEP	☐ Amended		-	State, Zip										
⊠ DOL	Amendment #		Nor	th Berg	en, NJ 07047									
	☐ Emergency (includin	g	Name	e of Conta	ct			Telephone Numb	ier —					
☑ DOH □ DCA	justification)		Mik	e Thorr	1									
□ DCA	☐ Cancelation				ACU ITY INFORM	.=:0::		1						
Name of Facility Whe	re Abatement is Taking Place (3)				ACILITY INFORM		e of Facility (4)							
Private Building														
Street Address							School (K-1	1.5						
380 Lackawann	a Place							8 (Other than						
						X	Other (i.e. p	rivate & Comm	ercial buildings,	homes	, etc	:.)		
City (5)						Squa	re Feet	# of Floors	Bldg, Age					
South Orange						7,70	00 +	2	1960					
County (6)				110000000000000000000000000000000000000	/ Code (7)	Current Use (Prior if being demolished)								
ssex County			STATE	USE ONLY)	Office/Warehouse									
ame of Monitoring F	irm Hired by Building Owner (8)				ASCM No.	Name of Abatement Contractor (9)								
						Unicorn Contracting Corp.								
treet Address							t Address							
						32 V	Willow Way							
ity, State, Zip Code							State, Zip Code						_	
						13/2/2010/2010	odland Park, I	VJ 07424						
roject Manager fo Mo	onitoring Firm			Telepho	one No.		hone No.	33 32 13 1	License No.				-	
							-333-9176		01331					
art Date (10)			Schedu	rled Comp	letion Date (11)		of OSHA Monitor		101331		-	-		
eptember 18, 2			Septe	ember 1	19, 2017		rovision Cons	ultants. Inc.						
cupancy Status Durir	ng Abatement (Check Only One)						Address					-		
☐ Facility Clos	ed/Vacated During Entire Pe	riod of Al	bateme	nt		20-2	1 Wagaraw R	d Bldg 35-F						
	Performed Outside of Norma						tate, Zip Code	u, 5,08, 55 E			_		_	
Other - Des	cribe:07:00am to 3:30pn					100000000000000000000000000000000000000	Lawn, NJ 074	10						
ope of Work (Check A	III That Apply)												-	
≥3 sf or ≥3 li	f		X	Renov	ation		Full Containm	ent with Nega	tive Pressure					
] ≥160 sf or ≥	260 If			Demol	ition	☐ Full Containment with Negative Pressure ☑ Mini-Enclosure								
						X	Glovebag Pro	(E)						
									Friable Procedure					
			Is Location	ก			The transfer	a () and ivon	Thable Flocedure		Aba	teme	nt	
	Location of		Normall			Desc	cription of					уре		
	ontaining Material (ACM)	1	ised Soleh Naintenan	the first terms of			ining Material (ACI		Amount					
9	TO BE ABATED In Facility		stodial St	400	(i.e.		systems insulation, ing, VAT, or		(Specity			m		
	(13)		(12)	-2.12.961			iscellaneous)		SF or LF)	Ren	27	cap	Enc	
		Yes	No	N/A						Remova	Repair	Encapsulate	Enclosure	
									+	17	10	10		
Basement X					Asb	estos P	ipe Insulation		110 LF	X				
													1	
											-		1	
													1	
e of Registered Wast			NJDEP W	/aste Haul	er ID No.	Cubic Ya	ards of Waste		Name of Regustered	Landfil	1	-	4	
corn Contraction	ng Corp.		00358	44		5+ Fairless Hills Landfill								
State						Disposal Date City, State								
odland Park, N	ew Jersey					TBD			Morrisville, PA					
pleted by Title							Signature	-/.	- n	Date				
o Golcev General Manager							(5/2-1-5	1		/8/2	017	į į	
		-		-			-	1 1		7.1	(11)	/		



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									110	11				-	
Date of Notification (1) 8/23/2017		Name of Building Owner/Operator (2) Residence SEP 2 2 2017										The second			
Agencies Notified Type No	tification		Street A	Address						1					
X EPA X Initi	al									ACDS	eroc	001	I Clarks on		
	ended	1	City, St	ate, Zip Co	ode					ASDE	STOS	NSIN	CHEC	L&	
	endment #1	_	Elizab	eth, NJ	07202				-			1011		-	
	ergency (including ification)	Ì	Name o	of Contact					Tal	nhona N	ımher				
	ncellation		Anoth	ony Mar	tinang	elo									
	01-		FAC	ILITY INF	ORMAT	ION					***				
Name of Facility Where Abatement Residence	is Taking Place (3)					Туре	of Facility (4)						
								School (K-1	12)						
Street Address								Subchapter				I all as as a			
								Other (i.e. petc.)	nivate o	x comme	ciai bu	idings	, nom	es,	
City (5)							10000	re Feet		Floors		Bldg.	Age	7	
Elizabeth							185	7	2		1	117			
County (6)				Code (7)			Curre	ent Use (Pri	or if beir	ng demol	shed)				
Union			(STATE	USE ONLY	-	_									
Name of Monitoring Firm Hired by I			ASC	ΛNo.				tement Cor		(9)					
A. Seine Lighthouse Solutio	ns ———————					Brink	ks Tai	nk Service	es						
Street Address PO Box 354							Addre		200						
								rty Avenu	ie						
City, State, Zip Code South Orange, NJ 07079								ip Code							
	(2)		Hillside, NJ 0720					AND DESCRIPTIONS							
Project Manager for Monitoring Fire Sarah Calandra	n		Telephone No. 201-349-2666 Telephone No. 844-462-7465						License No.						
									01316						
Start Date (10) 9/20/2017	10/3/20														
									e Solu	tions					
Occupancy Status During Abateme						Street	Addres Box 35								
Facility Closed/Vacated During Abatement Performed Outside	Entire Period of	Abaten	nent			20, 201201111									
Other – Describe:	or Normal Facility	Hours	5					ip Code	J 07079						
Scope of Work (Check All That App	ls d				_	Sout	n Ora	nge, NJ (1/0/9	·					
_							,								
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		enova emolit				×		l Containme ni-Enclosure		Negative	Pressu	ire			
	ш.	CITIOII	1011			×		vebag Proc							
							No	n-Exempted	i (*) and	Non-Fria	ble Pro	cedu	е		
		Locati											ement	t	
Location of	4	lormal d Sole				scription	NEV2				-	T 13	/pe	-	
Asbestos-Containing Material (A TO BE ABATED		intena				aining M systems				nount	711		g g	т	
In Facility	Cust	odial S	Staff?	(1.6.	surfac	cing, VA	T, or	illori,		pecify or LF)	êm	Repair	cap	nclo	
(13)		(12)			other n	niscellan	eous)				Remova	air	Encapsulate	Enclosure	
	Yes	No	N/A								-		te	0	
Basement		X			Pir	e Wra	n		60) LF	X	\vdash			
Control to the property of the control of the contr		-				Α.					-	-	-		
		-									_				
Name of Registered Waste Hauler		0.000	JDEP W	500000000000000000000000000000000000000	Cubic '			Name of F	Register	ed Landf	ill	_			
Newark Carting		auler ID 4509	No.	of Was	ite		Waste N				II				
City, State	102	+508		Diana	ol Dete						- 507				
East Orange, NJ				Dispos	al Date		City, State		ΡΔ						
Completed by	Title					Penn Argyle, PA									
Alison Lamers	Mar	nager		3	ighature	MI	WOM?		1927	ate 1/23/2	017				





	P	NOTIF F)	CATION Ursuant	OF ASB	ESTOS 8:60 and	ABATE 12:12	MENT D)	T	A.F.	CE	1	W	67	F
Date of Notification (1)		_	Name of	Building	Owneric)nerator	(2)		以产		- Complete	-	V	
7105-41-90			_	alva	(prince	100	100/	290	UH	Jers	70.	2017	-	
Agencies Notified Type Notification		-	Street A	ddress	7 4	-1111	401	014	177	1 SEEL 3	500	2011	- 1	154
EPA Initial		1	1	210	W.	285	100	AND			•	3		
DEP Amended		Ī	City, Sta	ite, Zip Co	de		ice i	. 205		SBESTOS	CON	THE	L &i	
DOL Amendment		1	N	latic	long	Pa	rK	TIM	. (iede	TUSIN	G ·		
DOH Emergency (i	nounning	ı	CALLES VALUE	Contact				•	Tek	phone Nun	ber			
DCA Cancellation			Patr	ick I	300	chic	ich	0						_
Nama of Earlib, 18thon Abatana 12 T.L.	Di 10		FACI	LITY INFO	DRMATI	ON								
Name of Facility Where Abatement is Taking	Place (3	9	11 T-	· _ 2	rain	ing	Type	of Facility	(4)					
L'AlVary L'hapel of Street Address		<u>ov</u>	<u> unue</u>	rseu [°]	Cen	ter		School (K-1			20			
J	۸			7				Subchapte Other (i.e.)	r 8 (Otta orivate 8	er than K-12 commercia) d hvelr	lime	home	
1210 HESSIAN/	41/GI	JUE					- 6	etc.)						<u>,</u>
National Par	1							re Feet	#01	Floors	1	ldg. A	7.90	
County (6)	D		County	Code (7)				00	16		16	20 y	5	
Gloucester		1	(STATE	USE ONLY			Cuite	in use (Pi	OLILDE	ng demolish	ea)	0 0	fore	100
Name of Monitoring Firm Hired by Building O	wner (8)		ASCA	f No.		Nomo	-	tement Co	-	3	1616	7	C1 41	5-1
Quality Environmental Concepts	(0)		None					vironme						-
Street Address							Addres							
1053 North Tuckahoe Road								h Tuckah	oe Ro	ad				and the same of th
City, State, Zip Code						City, S	State, Z	ip Code					· ·	\neg
Williamstown, New Jersey 08094						Willia	amsto	wn, New	Jerse	y 08094			(2)	1
Project Manager for Monitoring Firm			Telepho			Telepi	hone N	0.		License N	0.			-
Edward Knorr			1.77	29-1166		856-	629-1	166		01086				
Start Date (10)	7.00		mpletion			-IA Monitor				-		\neg		
September 27, 2017	Sent	em	iber i	30.20	17	Qual	lity En	vironme	ntal Co	oncepts	¥1			
Occupancy Status During Abatement (Check				•			Addres	200						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma	eriod of A	Abate	ment					h Tuckat	10e Ko	ad				
Other - Describe: OFFICES Ope	EIT UIC	moun tee	s airs					ip Code						-
Scope of Work (Check All That Apply)	:					AAIIII	amsto	wn, New	Jerse	y 08094				
23 sf or 23 if	200 I		004 <u>4</u> 0000-0			Į.	- 7							
2160 sf or ≥260 if	THE REAL PROPERTY.	Renov Demoli					Ful	I Containm ii-Enclosur	ent with	Negative P	ressu	e		
							Glo	webag Pro	cedure					-
	T						a No	n-Exempte	d (*) an	l Non-Friab	1			
		Loca Norma						25					ment pe	
Location of Asbestos-Containing Material (ACM)			ely by	A-b-	De	scription	of	/* O D			-	-,		\vdash
TO BE ABATED		intena	ince/ Staff?	(i.e.	tos Cont thermal	system	manenan sinsula	(ACM)		mount pecify	20	_	5	m
In Facility (13)	Cas	(12)			surfa	cing, VA	T, or	•	SF	or LF)	Remova	Repair	Bodec	ıcloı
	1	.,	1		Outer t	niscellar	neous)				Val	=	Encapsulate	Enclosure
	Yes	No	N/A				~				L		Θ.;	-
Basement/LowerLevel			3	9":9	"As	loest	SFL	00-		- 7.				
				3 -O				IN)*/-SF	V				
		1	1					14	7 25	M	-		\vdash	
	-	+					and			-				
Name of Registered Waste Hauter	-	NJDEP W				cricy	Floor	Dest	- 37 - 2					
Quality Environmental Concepts	11	Hauler ID		of Wa	Audic Yards Name of Registered Landill FWaste Gloucester County Solid									
	- 0	_ 1	9710	94	4cy	Sch		was	te Co	mplex		1		
City, State Williamstown, New Jersey					Dispos	sal Date	1	City, Sta	le					
*			T	BD	}	Sout	hHa	rrison	Teur	N c	· L	1		
Completed by Edward Knorr	Signature Date													
	vice	rres	resident ED 22 14-201							.71				





State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT

y la	PAIL)	\ "T" I I"	100			New Jersey	regim grant \$5 is igner & \$11400	(n)	EC	[W			
(IAC.)				SBESTOS ABA AC 8:60 and 5:1					п				
Date of Notification (1)					Name	o of Ruildi	ng Owner/Operator	(2)		05	n 4	•	0047			
09 /	19 /	17					ssociates	Check #4	966 \$20	δE	۲ ۷	2	2017			
Agencies Notified	Type Notific	cation			Stree	t Address		THE PARTY OF THE P					-			
S EPA	☐ Initial				14	Cliffwoo	d Avenue, Suite	200		ASBES	TOS					
☑ DOLWD ☑ DHSS	Amendo	ed nent #		0	City,	State, Zip	Code	we manufacture and the second			JUE	10m	10			
C DCA	☐ Emerge				Ma	tawan, N	New Jersey 0666									
(NJAC 5:23-8)	justifica				Name	of Conta	ct	Marie Committee of the	Τε' '							
	Cancella	ation			Ru	ssell J.	Azzarello		E)							
					FA	CILITY I	NFORMATION	14.95 (1)								
Name of Facility Where Private Residence		Taking Pla	ice (3)			A STATE OF THE STA	Type of Facility School (K-12			.,					
Street Address					m.w			Subchapter 8	:) 3 (Other than I	K-12)						
0.000110000								Other (i.e., p homes, etc.)	rivate and con		uildin	gs.				
City (5)		**************************************			muumna			Square Feet	# of Floors	1 5	Bldg, Age					
Clark, New Jersey	07066							2,000	2		50 y					
County (6)			-		Cou	nty Code ((7)(STATE USE ONLY)	Current Use (Pri	1	molished)	y	13.				
Union							,,,	Private Res	A STATE OF THE PARTY OF THE PAR	nonanaa)						
Name of Monitoring Fire	n Hired by Bui	Iding Owne	er (8)) [/	ASCM	No.	Name of Abatem	ent Contractor (9)		and the second of the						
Brinkerhoff Enviro	nmenal Ser	vices, Inc	D.,				Lilich Corpo	The second secon								
Street Address							Street Address									
1805 Atlantic Aven	iue						606 McBride	Avenue								
City, State, Zip Code							City, State, Zip C		TO THE WORLD WAS A STATE OF THE WORLD WAS A ST							
Manasquann, New	Jersey 087	36						ark, New Jersey	v 07424							
Project Manager for Mor	iltoring Firm		T	Tele	ohone	No.	Telephone No.	License No	>							
Matthew R Mantley	/			73	2-223	-2225	973-225-8400	01104								
Start Date (10)	····	Scheduled	Con	nplet	ion Da	ite (11)	Name of OSHA N	Monitor								
10 / 04 /	17	10	1	19	_ / .	17	100 At 1000	mental Labs LL	.C							
Occupancy Status Durin	g Abatement ((Check only	y one	e)			Street Address	100000000000000000000000000000000000000		****************						
Facility Closed/Vacat	ed During Ent	ire Period o	of Ab	aten	nent		2333 Route 2	2 West								
Abatement Performed Time of Abatement: 1	d Outside of N	lormal Faci	lity F	lours	s - Des	cribe	City, State, Zip Co	ode								
		VIII-		AIVI			Union, NJ 07	083								
Scope of Work (Check a	ll that apply)						F2 F + 0									
☐ ≥3 sf or ≥3 if ☑ ≥160 sf or ≥260 if				vatio olition		,	☐ Mini-Enc ☐ Gloveba	tainment with Neg losure g Procedure mpted (*) and Nor								
2 20				ocatio			The state of the s				atem	ent T	урс			
Location Asbestos-Containing		AL U		rmall Solei		Ache	Description o		S	D.	70	m	l m			
TO BE ABA	ATED	l N		enan			estos Containing Ma		Amount (Specify	Remova	Repair	Encapsulate	Enc osure			
IN Facili (13)	ity	CL		iiai S 12)	taff?		surfacing, VAT,	or	SF or LF)	l lav	m	USC	365			
		Yes	······ Promi	No.	χιΛ		other miscellane	ous)				0	1.7			
Kitchen Throughout Interior]	X		dercoating compound		1(ea)	X						
Exterior Windows									3500 SF	- word of the same	ļЦ	Ш				
							w Glazing (Non F	riable)	350 LF							
Throughout Interior						Sheet \	/inyl		450 SF							
hroughout Interior		0] [Ø	VAT &	Mastic		425 SF				Li			
1 200						Vaste) No.	Cubic Yards of Waste	Name of Regist			***************************************	410	3 100			
- Torquitation							20	G.R.O.W.S.	Landfill							
City, State							Disposal Date	City, State			1.04		žines ,			
Woodland Park, New Jersey							10/19/2017	Morrisville,	Pennsylvar	nia						
Completed By (Print or Ty Adriana Olejarova	ype) ·	Title Presic	lent			Signature Date										

President





V \			(Pursuant to NJAC 8:60 and 5:16)										3 [
Date of Notification (1)		Name	of Building	, Ov	wner/Operator (2	(2)		INE		5	1 1	y L	=				
9/	18 /	17			Ric	hie Nicho	ols				IKI					Alternation of the last of the	
Agencies Notified	Type Notifica	ation			Street	Address						L	2 2	20	117	-11	
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□ DOLWD	☐ Amended				City. S	State, Zip C	ode	9								1	
⊠ DOH	Amendme				Lancing Co.	nsville, N				٠	AS 5	STC	SC	ONT	ROL	. &ı	
DCA	☐ Emergend justification		luding			of Contact				* 1	Talanhana N	110	F- 11 -	SING		ace by President	
(NJAC 5:23-8)	☐ Cancellat				Juc					127			•				
	canconat	.0			La come	•		DMATION		-				-		-	
Name of Facility Where A	hatement is T	akina	Place	(3)	FA	JILII T IN	FU	RMATION	Ta	Type of Facility (4)					_	
Residence	ibatement is i	akiliy	riace	(3)					1.3	School (K-12)							
Street Address		_					_		- [Subchapter 8	(Other than K						
Street Address										Other (i.e., pri homes, etc.)	vate and com	merci	al bui	lding	s,		
City (5)									-	Square Feet	# of Floors		Bld	g. Ag	10	_	
Pennsville									1	2,100	3		2.00	9.7	, ,		
County (6)		-			Cour	ty Code (7)	VST	ATE USE ONLY)	+	Current Use (Pric		oliehe	1 2	-		_	
Salem					Cour	ity Ooce (r)	HO1.	ATE OOL ONET	1	Residence	or in being den	Oliono	Juj				
Name of Monitoring Firm	Hired by Ruilo	ling O	wner /	8)	ASCM	No	Ns	ame of Ahateme	en	t Contractor (9)							
Management & Env					AGGIVI	140.		Shade Enviro									
Street Address	,00	-2		_	reet Address	-	inicital, LLO		_			-					
				76	623 Cutler Av	Ve	nue										
City, State, Zip Code	PO Box 341							ty, State, Zip Co		1000000						_	
Chesterfield, NJ 08	515							Maple Shade									
Project Manager for Mon	2000			Tele	phone	No		elephone No.	', '		License No.					_	
Bill Weisgarber	itoring r iiii				9-298			856-755-0099	9		00842						
Start Date (10)	15	Schedi	ıled C		eletion Date (11) Name of OSHA Monitor							24.20.0	12-17	-		-	
09 / 27 /	V22-200				28 / _ 17 EMSL Analytical, Inc.												
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☐ Abatement Performed	2.70					cribe		ty, State, Zip Co				_				_	
Time of Abatement: _								Cinnaminson									
Scope of Work (Check al	I that apply)							Cililaiiiiisoii	1,	140 00077		117.5					
Scope of Work (Check at	i tilat apply)									inment with Neg	ative Pressure						
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☐ ≥160 sf or ≥260 lf			∐ ⊅е	molitio	on					pted (*) and Nor	n-Friable Proce	dure					
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Asbestos-Containing		1)		d Sole intena				Containing Ma			Amount		Removal	Repair	nca	nclo	
TO BE ABA				todial	Staff?	(1.6.		ermal systems surfacing, VAT,			(Specify SF or LF)		oval	=	Encapsulate	Enclosure	
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Name of Registered Waste Hauler						NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste CPOWS North Landfill											
Freehold Cartage) No.		aste 1		GROWS No	orth Landfill						
City, State							Dis	sposal Date		City, State							
Freehold, NJ							(09/28/17		Morrisville,	PA						
Completed By (Print or Type) Title								Signature	-	10-	Date						
Christina Lynch	100 PM	Vi	ce Pr	eside	ent of	Operation	าร	(mxx	6	212	9/8/17						
ASB-41				5 30	0000 va	AVA: 0000		1 /11/2	30		12/0/1/						
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Date of Notification (1)



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	ALL STATES	SEP	2	2	2017		
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Date of Notification (1) 9-15-2017	Name of Building Owner/Operator (2) Christine Harasek SEP 2 2 2017										U	The Part of the last						
Agencies Notified	Type Notification		-	Street Ad	ddress					1	-							+
EPA DEP DOL DOL	Initial Amended Amendment Emergency (justification)		- [te, Zip Co City, N Contact)7					ASBE		S COI ENSIN	VG	DL &		Constitution of the last
DCA	Cancellation			Christin	ne Hara	sek												
				FACIL	LITY INFO	ORMAT	ION	_										
Name of Facility Where Residential Street Address	Abatement is Taking	Place (3))					Туре	Sch	ool (K-12)	er tha	ın K-12	!)			
								×	Otheto.		e. pri	vate 8	& con	nmercia	al buil	dings,	home	s,
City (5) Jersey City, NJ 07	307							Squa 109	6			2	f Floo		1	3ldg. A 17+	ge	
County (6) Hudson				County C (STATE L	Code (7) ISE ONLY,			Curr	ent l	Jse (Prior	if bei	ng de	molish	ed)			
Name of Monitoring Firm	n Hired by Building (ASCM	l No.		Name Gree							es, LL	С				
Street Address							Address Virginia Avenue											
City, State, Zip Code	***					100	State, Zip Code ey City, NJ 07304											
Project Manager for Mor	nitoring Firm			Telephor	ne No.		Telephone No. License No. 201-333-8855 01174											
Start Date (10) 9-18-2017		Schedule 9-18-20		npletion [Date (11)		Name o				tor							
Occupancy Status Durin	g Abatement (Chec	k Only One	e)				Street	Addre	ess									
	eated During Entire F ned Outside of Norm						City, St	tate, Z	Zip C	ode								
Scope of Work (Check A	All That Apply)										-							
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Name of Registered Wa Green Environment	F	Hauler ID 034889	No.	of Wa			1			Iorth			253-3112					
City, State Jersey City, NJ					9-18	sal Date			ity, S Aorr		le, P	PΑ						
Completed by Liliana Serrano		e Ma	nager			Signature	9 (,	,	, "N	160	bu	2 0	1 9-		017		-57	

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	Communicative Co	6106				TOTAL PROPERTY.
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of Facility	(4)					
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of Registe	red Landfill		Ш			
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9 / 18 /	17	17 Haddonfield Public Schools Board of Education											
Agencies Notified Type Notifi	ication			eet Addres				Manager and the second	UNUNCA RESIDENCE				
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_ Z / which do	ed ment # <u>1</u>		Cit	y, State, Zi	p Code		L	LICE	ENSI	NG	-		
DCA Emerge		dina			el, PA 08033								
(NJAC 5:23-8) justifica	tion)	uing		me of Cont									
☐ Cancella			10000000	ohn Dese			Telepho	ne Number					
			F		INFORMATION		_						
Name of Facility Where Abatement is	Taking Pl	ace (3)		AOILITI	INFORMATION	Type of Facil	th. (4)						
Haddonfield Memorial High So	chool - E	Wing	1			Type of Facil School (K							
Street Address						Subchapte	-12) er 8 (Other th:	an K 12\					
401 Kings Highway East						U Other (i.e.	, private and	commercial	build	inas.			
City (5)						nomes, et	(C.)		111011111111111111111111111111111111111	3-,			
Hadonfield						Square Feet	# of Flo	ors	Bldg.	Age			
County (6)			10-		(10)	26,000	2		50				
Camden			00	unty Code	(7)(STATE USE ONLY)	Current Use (Prior if being	demolished	i)				
Name of Monitoring Firm Hired by Build	ding Our	n= /C\	1400			school			200				
Epic Environmental Services,	LIC	ar (8)	ASCI	M No.	Name of Abateme								
Street Address	LLC				Plymouth En	vironmental	Co., Inc.						
1930 Brown Road					Street Address								
					923 Haws Av	e.							
City, State, Zip Code					City, State, Zip Code								
Newfield, NJ 08344					Norristown, F								
Project Manager for Monitoring Firm		Tel	ephone	e No.	Telephone No.	7 10401	111						
James Eberts		100		5-1077	610-239-9920		License	S100750					
1								00398					
	cheduled	Compl	etion D	ate (11)			00398	0					
Start Date (10) S	Scheduled 9				Name of OSHA M	lonitor							
9 / 11 / 17	9	/ _ 2		ate (11) 17	Name of OSHA M Plymouth Env	lonitor							
9 / 11 / 17 Decupancy Status During Abatement (Comparing Entire	9 Check only	one)	9_/	17	Name of OSHA M Plymouth Env	onitor vironmental (0					
9 / 11 / 17 Decupancy Status During Abatement (Cook Facility Closed/Vacated During Entire Abatement Performed Outside of No.	2 Check only e Period o	one) one)	ment		Name of OSHA M Plymouth Env Street Address 923 Haws Ave	onitor vironmental (0					
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Date of Notification (1) 09-14-2017			Building el Volpe	Owner/Operator (2) SEP 2 2 2017												
Agencies Notified	Type Notification		-	Street A					and Desir					+		
A. A										ASBEST	ros c	ONT	ROL	8		
X EPA X DEP X DOL	X Initial Amended		-	City, Sta	te, Zip Co	de				ASDES	ICEN	SING				
X DOL	Amendment		_	Union	NJ 070	83				And the state of t		-				
× DOH	Emergency justification)			Name of	Contact				Te	٠٠ -م						
DOH DCA	Cancellation			Micha	el Volpe											
				FACI	LITY INFO	DRMATI	ON									
Name of Facility Where Private Dwelling	Abatement is Takir	g Place (3)					Type of Facility	(4)							
Street Address								School (K-	12)	andhan IC d	2)					
Street Address								Other (i.e.	private	& commerc	∠) ial buil	dings,	home	es,		
Cit. (5)								etc.)								
City (5) Union NJ 07083								Square Feet N/A	# c	f Floors		ildg. A	ge			
County (6)				County (Codo (7)				Prior if being demolished)							
Union					JSE ONLY			Private Dwel		ing demons	neu)					
Name of Monitoring Firm	n Hirad by Building	Owner (8)		ASCN	1 No		Name	of Abatement Co		- (9)	-					
Standard Environm		Owner (0)		AOON	1110.		and Street and	x Contracting		(5)						
Street Address		-						Address				-				
2108 Fulton St, Su	ite 2A						30X 734									
City, State, Zip Code							State, Zip Code			_			-			
Brooklyn NY 11233	3					Woodland Park NJ 07424 Telephone No. License No.										
Project Manager for Mor	nitoring Firm		T	Telephor	ne No.		No.	-								
Kayode Adefisoye							692-6298	01266								
Start Date (10)		Schedule			Date (11)		Name	of OSHA Monitor								
09-25-2017		10-01-	2017			x Contracting	g LLC									
Occupancy Status Durin	ng Abatement (Che	ck Only On	e)	Street Address												
Facility Closed/Vac								30X 734								
Abatement Perform Other – Describe:		nal Facility	Hours	S			2233	State, Zip Code								
							Woo	dland Park N.	IJ 07424							
Scope of Work (Check A	All That Apply)						-	-								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova				212	i un contanin	inment with Negative Pressure							
≥160 ST OF ≥260 IT			emoli	lion			>	Glovebag Pro								
							2	Non-Exempte	d (*) ar	nd Non-Fria	ble Pro	12-01-1-1-1-1				
		ls	Locat	ion									ment pe			
Locatio			lorma d Sole				scription					1	PC			
Asbestos-Containing TO BE AB		Ma	intena	nce/				Material (ACM) s insulation,		Amount Specify	Z	_	Enc	Щ		
In Faci		Cust	odial ((12)	Staff?	(1.0.	surfa	cing, VA	T, or		F or LF)	Remova	Repair	Encapsulate	Enclosure		
(13)			(12)		5) 10	other r	niscella	neous)			oval	air	ulat	sure		
		Yes	No	N/A									Ф			
Basem	nent			Х		Pipe	Insula	ation	8	35 LF	Х					
Basem	nent			х			VAT		6	00 SF	Х					
	Dasement															
Name of Registered Wa	Name of Registered Waste Hauler				aste /	Cubic	Yards	Name of	Regist	ered Landfi	11					
Name of Registered Waste Hauler Amax Contracting LLC				lauler ID	No.	of Wa	ste	Fairles								
				036184	<u> </u>	10 C	-			5:						
City, State						1000	sal Date	/ ///		۸						
Woodland Park NJ 07424						10-10-2017 / Morrisville PA										
Completed by Title Tome Maslarkov Project M						3	Signature Date 09-14-2017									
, otto Madiation		110]6	OL IVI	anager			11	La	05-14-2017							
ASB-41 (R-06-08)							*/Do n	ot use this form fo	r asbes	tos licensu	re exe	npted	activi	ties.		



								,	115/1	degrade department	Alexandra and a		-			
Date of Notification (1) 09 /	19 /	_ 17				e of Buildir ant Realt	ng Owner/Operator	(2)	IIIII si	FB 2	D/ 3	R119	THE PROPERTY OF THE PARTY OF			
Agencies Notified EPA	Type Notifi	ication				et Address	. 22									
☑ DOLWD	☐ Amende	ed					100000		ASBES	STOS	CONT	ROL	2			
⊠ DOH	Amendr	ment #		-0		State, Zip		L		LICEN	SING		٠.			
DCA	☐ Emerge		cludin	g	-	750	NJ 07069						IN STREET			
(NJAC 5:23-8)	justifica Cancella				- Contraction	e of Contac egory Lic	Tion .		Telephone No	umber	_					
					FA	CILITY II	NFORMATION		.							
Name of Facility Where	Abatement is	Taking	Place	e (3)				Type of Facility (
Street Address								School (K-12		12)						
Street Address								Other (i.e., pr	ivate and comr	nercial h	ouildin	gs,				
City (5)								Square Feet	# of Floors	1	3ldg. A	an				
Lavallette								2000 sf	2		65	igo				
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Prid		olished)	10 20 32 0					
Ocean							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Residence	or it being dem	Jilot lou)						
Name of Monitoring Firm	Hired by Bui	ilding C	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)								
N/A							Guardian Contracting, Inc.									
Street Address							Street Address									
City, State, Zip Code							1889 Route 9, Unit 61									
oity, otato, zip oode							City, State, Zip Code Toms River, New Jersey 08755									
Project Manager for Mon	itorina Eirm			T-1	a le a con	N			so No							
1 Toject Manager for Mon	itoring Film			1 016	phone	No.	Telephone No. 732-349-9932		License No.							
Start Date (10)		Sched	uled C	omple	tion Da	ate (11)	Name of OSHA M	i de la companya del companya de la companya de la companya del companya de la co	00624							
09/29/						17	E.M.S.L. Anal									
Occupancy Status During							Street Address	,								
□ Facility Closed/Vacate	ed During Ent	ire Per	iod of	Abate	ment		1056 Stelton									
☐ Abatement Performed	Outside of N	lormal	Facilit	y Hou	s - Des	scribe	City, State, Zip Co	nde								
Time of Abatement: _	AM	PN	///	PM		_AM		New Jersey 088	54							
Scope of Work (Check all	that apply)															
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			arrena .	novat			☐ Mini-Encl	Procedure								
			la.	Locat				mpted (*) and Non	-Friable Proced							
Location	of			Vorma			Description of			A	batem	ent Ty	/pe			
Asbestos-Containing I	Material (ACN	۷)	Use	d Sole	ly by	Asbe	stos Containing Mat		Amount	Re	Repair	E	En			
TO BE ABA IN Facilit				intena todial		(i.e	., thermal systems i		(Specify	Removal	bair	caps	Enclosure			
(13)	J			(12)			surfacing, VAT, other miscellaned		SF or LF)	<u>a</u>		Encapsulate	иге			
			Yes	No	N/A			,				te				
exterior				\boxtimes		asbesto	s siding		2500 sf							
									Ī	П	П					
											\Box					
Name of Registered Wast		N	JDEP \	Vaste	Cubic Yards of	Name of Registe	ered Landfill			ш	_					
Guardian Contracting, Inc.						O No.	Waste 3	T.R.R.F.								
City, State					20223		Disposal Date	City, State								
Toms River, New Jersey							10/04/17	Tullytown, F	Pennsylvania	ı						
Completed By (Print or Ty	pe)	Title		-			Signature		0 1	Date	1	1	-			
Nicholas Fernicola		Pr	oject	Mana	iger				Date Gladin							