TOXEC 10 YOU TIZILLY

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

Arrended

. A . A i	7		NOT	IFIC	ATIC)N O	F AS	BESTOS A	BATEMENT						
1000	M		(F	Pursi	uant	to N	<u>I.J.A.</u>	<u>C.</u> 8:60 and	12:120)		E	CE		\mathbb{V}	
Date of Notification	(1) 9-21-	2018			Nam	e of B	uilding unty Co	Owner / Operat	or (2)						
Agencies Notified	Type I		ation			et Add		niege			S	EP 2	5 2	018	- 11
⊠ EPA					1 Co	llege l	Drive			1			Ŭ -		1
☐ DEP ☐ DOL		Initial	ded(working	hre)	City,	State	& Zip (Code			ACCO	0000	-		
☑ DOH		Emer	gency	1115)	Nam	e of C	r, NJ 0 ontact	8754		_		STOS (
☐ DCA		Canc	ellation			Bruno				Environment des		Telepho 732-255			er
Name of Facility Wh	nere Ah	ateme	nt is Taking I	Dlaca	F (3)	ACIL	ITY INF	ORMATION							
Ocean County Colle	ege-Nu	rsing B	uilding #4	lace	(3)			Type of Faci							
Street Address						le o tra		☐ Subcha	pter 8 (Other tha	n K-12)					
1 College Drive Buil	ding #4	1						Other (i.	.e. private & com	mercial	building	gs, hom	ies, e	tc.)	
City (5)			County (6)	C	nunty	Code	(7)	Square Feet 11,000	# of Floo	ors	В	Bldg. Ag			
Toms River NY)	Ocean		Julity	Ouc	(,)		(Prior if being de	emolishe	d)		48		
Name of Manitaria	F: 11		5 "" 6					Nursing Buil	ding		,				
Name of Monitoring Brinkerhoff Environr	rirm H nental	ired by Service	/ Building Ow	ner (8)	AS	CM No	. Name of Aba	atement Contrac	tor (9)					
Street Address		001110	30					Street Addre	anagement Grou	ip, LLC					
1085 Atlantic Avenu						2007			on Ave, Suite 20	2					
City, State & Zip Co. Manasquan, NJ 087								City, State &	Zip Code						
Project Manager for		ring Fi	rm	Tele	phone	Num	her	Trenton, NJ Telephone N		Ilio	ones M				
100 000 MET 100 MET 10			and the same	732-	223-2	225		609-914-427		Lic	ense N	0118	5		
Scheduled Start Dat 9-24-2018		S	cheduled Co			te (11)	Name of OS							
Occupancy Status D		hatem	ent (Check o		2018			J&S Environi Street Addre	mental Laborator	ries, Inc.					
	ed/Vac	ated D	uring Entire F	Period	of Ab	ateme	ent	2333 Route 2							
	erform	ed dur	ing regular or	peratir	ng Ho	urs:		City, State &	Zip Code						=
Describe: Facility Occu	o.ouam upied D	urina A	pm Abatement					Union, NJ 07	083						
Scope of Work (Che	ck all ti	nat app	oly)												-
≥3 sf or ≥3 If					Day	4.			Full Cont	ainment	with Ne	egative	Pres	sure	8
≥160 sf ≥260						novatio nolitio	2000 i		☐ Mini-Encl		duraa				
					50.	rionao			☐ Non-Exer			-Friable	Proc	edur	re
	cation				Locat			Description	n of	Amo	ount		teme		
Asbesto Mate	erial (A	taining CM)			nally olely			Asbestos-Con Material (A	taining	(Spe					
TO B	E ABA	TED		Main	tenan	ice or		(i.e., thermal s		SF o	r LF)	Re	70	Enc.	En
in	Facility (13)	/		Cust		Staff?	i	nsulation, surfac	cing, VAT			Remova	Repair	aps	Enclosure
	(13)			Yes	(12) No	N/A		or other miscell	aneous)			\a	=-	Encapsulat	ure
Rooms N116 & N1	17			П	П		Floor	tile & mastic		2.10) OF				
Room N118				П	H	X		tile & mastic		2,100 325			님	H	님
Room N118						Ø	-	tile & mastic		15	-		H	H	H
Room N116, N117 a	nd N11	9					_	Cove Base		300			計	ᆎ	Ħ
Name of Registered	Waste	Hauler			INI	DEBI	Mooto	Cubic Yards	N		1011				
						uler I		of Waste	Name of Regist	tered La	ndtill				
Resource Manageme	ent Gro	up, LL	С		003	35218		TBD	Grows Landfill						
City, State Trenton, NJ 08619								Disposal Date	City, State Morrisville, PA						
Completed By (Print	or Type	9)			Titl	e		Signature				Date			_
Mr. Brian Haney					1	siden	500 B	PALA	1/0/	,		9-21-2	019		
8.70								1///				5-Z 1-Z	010		
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State of New Jersey

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

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Date of Notification	9-6-2018 Ocean Cour								tor (2)							111
Agencies Notified	Type Notific	ation		Street	Addr	inty Co	ollege					SEP	25	201	8	1111
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□ DOL		nded	[]	Toms	River	, NJ 0	8754			1		ASBEST	25 CO	VTR	1.8	
□ DOH □ DCA		rgency				ontact				i,	harden and harm		Felepho	one l	lumb	oer
LI DCA	L Can	cellation	l,	/like B	runo							7	32-255	-0400)	
				FA	CILI	TY INF	ORM	ATION								
Name of Facility WI	here Abatem	ent is Taking F	Place (3)				pe of Fac	ility (4)					D-SUD		
Ocean County Colle Street Address	ege-Nursing	Building #4		-				School								
1 College Drive Buil	lding #4							Subcha	pter 8	(Other tha	n K-12	2)				
i conogo Brivo Buil	iding #4						S.	Other (i	.e. priv	ate & com	nmerci	al building	s, hon	nes,	etc.)	
City (5)	111	County (6)	Cor	inty C	ode	(7)		uare Feet ,000	Ł	# of Floo	ors	B	ldg. Ag			
Toms River NY	5	Ocean		, 0	000	(,)			(Prior	if being de	emolie	hed)		48		
							Nu	rsing Buil	ding	ii boilig ac	JIIIOIIG	icu)				
Name of Monitoring	Firm Hired b	y Building Ow	ner (8)		ASC	CM No	. Na	me of Ab	ateme	nt Contrac	tor (9)	***				
Brinkerhoff Environs Street Address	nental Service	ces								ment Grou	ıp, LLC					
1085 Atlantic Avenu	ie							eet Addre		0 1 00						
City, State & Zip Co								y, State &		e, Suite 202	2			-		
Manasquan, NJ 087								enton, NJ								
Project Manager for	Monitoring F	irm	Teleph			oer		lephone N			IL	icense Ni	ımber			
Cabaduladou ID	(40)		732-22		and the same of th		60	9-914-427	79				0118	5		
Scheduled Start Dat 9-24-2018		Scheduled Cor			e (11))		me of OS			W. 155					
Occupancy Status D		ment (Check o	10-8-2	018						Laborator	ries, In	C.			,	
	ed/Vacated I	During Entire F	eriod o	<i>)</i> f Ahat	teme	nt	1 8000	eet Addre 33 Route :	37,17,00	ct						
	Performed du	ring regular or	perating	Hour	s:	111		y, State &								
Describe:	8:30am - 5:0	0pm	•					ion, NJ 07		Juc						
Facility Occu Scope of Work (Che	upied During	Abatement														
scope of work (Che	ck all that ap	ipiy)								F 11.0						
≥3 sf or ≥3 lf	f		\boxtimes	Reno	vatio	n				Full Cont Mini-Encl		nt with Ne	gative	Pres	sure	
≥160 sf ≥260	O If			Dem						Glove Ba		edures				
									\boxtimes	Non-Exer	mpted	and Non-	Friable	Pro	cedu	re
	cation of		11	ocatio				Descriptio				nount			ent T	
	os-Containin erial (ACM)	g	Norma					estos-Cor		3		pecify				<u>, </u>
TO B	E ABATED		Mainte	lely by				faterial (A			SF	or LF)	Re	_	Enca	Щ
	Facility		Custo	dial St	aff?			thermal s ion, surfa					em	Rep	cap	Cla
	(13)			(12)				er miscell					moval	epair	apsulat	Enclosure
			Yes	No	N/A								=		at	.e
Rooms N116 & N1	17					Floor	tile &	mastic	///:1=0=		2.1	00 SF		П	П	
Room N118					\boxtimes	Floor	tile &	mastic				25 SF		Ħ	Ħ	
Room N118						Floor	tile &	mastic				5 SF				
Room N116, N117 a	nd N119					White	e Cove	e Base				00 LF		司	Ħ	ī
Name of Registered	10/2-1-11-1															
valle of Registered	vvaste Haule	er						Yards	Name	e of Regist	tered L	andfill				
Resource Manageme	ent Group, LI	LC			ler ID 5218	INO.	of Wa	ste	Grow	s Landfill						
City, State				10000				aal Data								
Frenton, NJ 08619							TBD~	sal Date		State sville, PA						
Completed By (Print	or Type)			Title			Signa	1.	IVIOITI	SVIIIE, FA			D :			
Mr. Brian Haney	o. 13pc)				ident		Signa	lure		YM	H		Date			
				ries	iuent		4	1/lh		/// W	/		9-6-20	118		
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

	121]]					Check #	1500			
Date of Notification (1		J L				ng Owner / Operator	(2)					
Agencies Notified	Type Notifica			_	DeSilva			TO BR	E	7//	E	1
Agencies Notified	Type Notifica	ition		Stree	t Address			117 6	<u> </u>	M	<u>L</u>	
EPA								1153				
DEP									. 0 -	2040	2	
DOL	☑ Initia	1		City.	State & Z	n Code		HI LI SEP	25	2018	1	1 - cor
	Ame	nded		1 mars 200 m	ham, NJ							
Дрон	Ame	ndment #			,	0.020		ASDEST	00.001	TT DE	~1 Q	٠ ٠
DCA	Cano	cellation		Name	of Conta	ct			Telephon			
								Control Charles and Control Control				- 1 14
				FA	CILITY	INFORMATION						
Name of Facility When	re Abatement	is Taking	Place (3)			Type of Fac	cility (4)					
Residence			1775			Schoo	I (K-12)					
Street Address						Subch	apter 8 (Other tha	an K-12)				
						○ Other	(i.e., private &	commercial building	ngs, hon	ne, e	tc.)	
						Square Fee			Bldg. Age			
City (5)						2,43		2 + Basement	8:	3 yea	ırs	
Chatham							(Prior if being de	emolished)				
County (6)		10	Yount O - 1	· /7\		Residence						
Morris		1	County Code USE ONLY	e (/)								
Name of Monitoring Fi	rm Hired by B				ASCM	No Name of Ah	atement Contrac	tor (0)				
			(0)		7100111	Synatech, I		.toi (9)				
Street Address						Street Addre						
Oit. Ot-1- 0 7: 0 1						829 Radio I	100000000000000000000000000000000000000					
City, State & Zip Code						City, State 8	NG 1000 #15 000000000000000000000000000000	-				
Project Manager for M	onitorina Firm		Te	lephone	Number	Telephone N	larbor, NJ 0808	License Nu	ımbor			
	4 7 1			icpiione	ramber	609-296-69		License No	0081	7		
Scheduled Start Date		Schedule	d Completi	on Date	(11)	Name of OS	HA Monitor					
October 2, 2				ber 5, 2	018	Synatech, I						
Occupancy Status Dur Facility Close	ing Abatemen	t (Check	only one)	A b =4=		Street Addre						
					nt	829 Radio F	20000000					
Abatement Pe		ide of No	rmal Hours	;		City, State 8						
Other – Descri						Little Egg F	larbor, NJ 0808	7				
Facility Occup		525C189950011 151000										
Scope of Work (Check	all that apply))					_					
п.,							Full Containme	ent with Negative Pre	ssure			
≥3 sf or ≥ 3 lf				Renovati			Mini-Enclosure	i e				
≥160 sf or ≥260	lf		Ш	Demolitio	on		Glovebag Proc	edure				
							Non-Exempted	d(*) and Non-Friable	Procedur	re		
	tion of	A O B # S			ally Used	Descrip		20 100120 100		atem	ent T	уре
Asbestos-Contain	ing Material (/ ABATED	ACIVI)		y Maintei dial Staff	nance or	Asbestos-0 Material		Amount (Specif	У			
	acility		Ousto	ulai Olali	: (12)	(i.e., therma		SF or LF)	\vdash			$\overline{}$
(13)					insulation, su					띄	П
						or other mise	cellaneous)		Remova	Repair	Encapsulate	Enclosure
									lova	pair	Ins	nsc
			Yes	No	N/A				=		ate	Гe
Basement				Х		Floor Tile	Mactic	500 SF	X			_
Garage				X		Duct \		80 SF				
			1			Duct	viap	00 3F	_ X			
									- 1			
Name of Registered W	aste Hauler		NJDEP V	Vacto	Cubic	ards of Waste	Mama of Dani	-td 1dEII				\bot
o. regiotered vv	asio i lauloi		Hauler ID		Cubic 1	aius di Wasie	Name of Regis	siereu Landiiii				
Synatech, Inc.				429	10		Fairless Hills					
City, State					Disposa	al Date	City, State					
ittle Eng Harbor N.I.					Man	h C 2040						
Little Egg Harbor, NJ Completed By		Title			Signatu	ber 6, 2018	Morrisville, P					
		Title			Jigilatti	1 /1/	ŧ	Date				
Diane Aloia		Executiv	ve Adminis	strator	1 44/	azz 121.00		September 21, 201	8			

Cholle	0	ı	тои	IFIC (P	ATIO ursua	n of as	BE	STOS ABA	TEMENT 6)	D) _r				\mathbb{V}		7
Date of Notification (1)	9				Nam	e of Parildin	100	wner/Operator	(2)							
	21 /	18	_		St	ate of Ne	w Je	ersey Divisio	n of Property	Manag	gemen	P& 20	ns	2018	ion	
Agencies Notified	Type Notifi	cation			Stree	et Address										-
⊠ EPA	☐ Initial				33	West Sta	ate S	Street, 9th Flo	oor		ASBEST	TOS C	On	TET	11.8.	
☑ DOLWD	Amende Amendr	1977 Lance			City,	State, Zip	Code	e	- L-	and the second	Manager at the Artist	emainement		e - Dise	L	
□ DCA	Emerge		ludin	7	Tre	enton, NJ	080	625								
(NJAC 5:23-8)	justifica		iddiri	9	Nam	e of Contac	ct			Tele	phone N	Number				
	☐ Cancella	ation			Ge	orgette E	Bund	ch		4	09-633-					
	-				FΑ	CILITYIN	VFO	RMATION					-			
Name of Facility Where A	Abatement is	Taking	Place	(3)				TAME TO TAKE	Type of Facility	(4)		- 1	-		-	
New Jersey Depart									School (K-12	12/2/200						
Street Address									Subchapter	8 (Othe	er than k	(-12)				
1 John Fitch Plaza									Other (i.e., p	rivate	and com	mercia	l bu	ildin	js,	
City (5)							-		Square Feet		of Floors		DI	4a A	70	
Trenton									50,000		12			dg. A 80	ge	
County (6)					Cou	nty Code (7	7VST	ATE USE ONLY)	Current Use (Pr			aaliaha		00		
Mercer						inty code (i)(01)	ATE OOL ONET)	Office Build		eing den	nolisne	u)			
Name of Monitoring Firm	Hired by Bui	ldina Ov	vner i	(8)	ASCM	No	No	ame of Abatom	ent Contractor (9)	_						
USA Environmenta					710011	140.			onmental, LLC							
Street Address	3		-				-	reet Address	offinerital, LLC							
344 West State Stre	ef				-		1000000	623 Cutler A								
City, State, Zip Code		0-2-24-37-3					-									
Trenton, NJ 08618							10000000	ty, State, Zip Co								
Project Manager for Moni	itorina Firm		10-000	Tolo	phone	No	-	Maple Shade	, NJ 08052							
William Weisbarger				0.00	09-656			lephone No.		1150000	ense No					
Start Date (10)		Schedul	lod C					356-755-0099		0	0842					
10 / _ 08 _ /						18		me of OSHA N								
			37.00			10	_	EMSL Analyt	ical, Inc.							
Occupancy Status During							Str	eet Address								
□ Facility Closed/Vacate □ Abatement Performed	Outside of N	ire Perio	od of A	Abate	ment		2	200 Route 13	0 North							
Time of Abatement: _	AM-	PM/	acility	PM-	s - Des	AM	Cit	y, State, Zip Co	ode				400			
							(Cinnaminson	, NJ 08077				-03110			
Scope of Work (Check all	that apply)							□ Eull Cont	ainment with Neg	estive C				1		
≥3 sf or ≥3 lf			Re	novati	on			☑ Mini-Encl	amment with Neg losure	ative F	ressure					
≥160 sf or ≥260 lf] Dei	molitic	on			☐ Glovebag		52255 69						
			L	1 1		T		☐ Non-Exer	mpted (*) and No	n-Friab	ole Proce	edure				
Location	of			Locat Iorma				D					Aba	teme	ent T	уре
Asbestos-Containing N		1)	Use	d Sole	ely by	Asbes	stos	Description of Containing Mat		Δ	Amount		Ze i	Re	En	Ε'n
TO BE ABA				ntena	nce/ Staff?		, the	ermal systems i	nsulation,	(5	Specify		Removal	Repair	cap	Enclosure
IN Facilit (13)	У		Oust	(12)	otan:			surfacing, VAT, her miscellaned		SI	F or LF)		<u>a</u>	1000	Encapsulate	ure
(1.5)		,	Yes	No	N/A	1	Oti	nei miscellane	ous)						te	
Basement Pipe Chase			Fitting/	Join	t Insulation			3 LF			П	П	П			
Penthouse Mechanica	al Room	0	3					t Insulation			6 LF	_				
												7	7	\exists		H
			5	П	t=							- -	5	귀		귀
Name of Registered Wast	e Hauler			IN	JDEP V	Vaste T	Cub	oic Yards of	Name of Regist	ered I	andfill		-			_
Freehold Cartage				17377	auler IE	No.	Was	ste	Fairless La		anum					
City, State					15939		1 Disp	posal Date	City, State				-			
Freehold, NJ								0/09/2018	Morrisville,	PA						
Completed By (Print or Ty	pe)	Title	-				-	Signature		***		Data				
Christina Lynch	r-/		Pro	ship	nt of C	Operation		Ola L				Date	- /)	
-,		*100		Jiue	01 (peration	3	MADIE	\mathcal{L}			9/	d.	110		

State of New Jersey

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Date of Notification (1) 09 /	21 /	18			Name	of Buildin	ng Ov	wner/Operator ((2) n of Property N	S.	EP 2	520	18_	-
							W Je	ersey Divisio	ii oi Froperty ii	nanagemeni	L & COII	struc	uon	1
Agencies Notified EPA	Type Notific	ation			120000-000000	t Address West Sta	ate S	Street, 9th Flo	or	ASSE	STOS C	ONT	90ŧ.	<u> </u>
□ DOLWD	☐ Amende					State, Zip				Contract Con	HODAG	MG	1566.41	
⊠ DOH	Amendm				1000	enton, N								
☐ DCA (NJAC 5:23-8)	☐ Emerger justificati		luding	3	_	of Conta				Telephone N	Jumher			
(110/10/0120/0)	☐ Cancella				1.000	orgette l		ch		609-633-				
								RMATION		000-000-			-	
Name of Facility Where A	hatement is	Taking I	Place	(3)	FA	CILITTI	NFO	RIVIATION	Type of Facility	(4)	7			
New Jersey State L		raking i	i iacc	. (5)					School (K-12	1.5				
Street Address	ibiai y								Subchapter 8		(-12)			
185 West State Stre	et								Other (i.e., pont)			uildin	gs,	
City (5)									Square Feet	# of Floors	E	Bldg. A	ge	
Trenton									20,000	4		80		
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pri	or if being den	nolished)	-		
Mercer									Library	J	•			
Name of Monitoring Firm	Hired by Build	ding Ov	vner ((8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9)					
Environmental Con	nection, Inc	c.							onmental, LLC					
Street Address				1				reet Address						-
120 North Warren S	treet							623 Cutler Av	/enue					
City, State, Zip Code							Cit	ty, State, Zip Co	ode				.1	
Trenton, NJ 08608								Maple Shade						
Project Manager for Moni	toring Firm		3.0	Tele	phone	No.		lephone No.	,	License No)			
Roland Jones					09-392		-	856-755-0099	i .	00842				
Start Date (10)		Schedul	led C	omple	tion Da	te (11)	-	me of OSHA M						
10 /08 /					_ / .		E	EMSL Analyt	ical, Inc.					
Occupancy Status During							Str	reet Address						
☐ Facility Closed/Vacate							2	200 Route 13	0 North	a				
Abatement Performed Time of Abatement: _							Cit	y, State, Zip Co	ode					-
Time of Abatement	AIVI	PIVI/				Alvi	(Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)							⊠ Full Cont	ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf		-	man Pinner	novat				☐ Mini-Enc	losure		T.			
☐ ≥160 sf or ≥260 lf		L	_ De	molitio	on				g Procedure mpted (*) and Nor	-Friable Proce	oduro			
		Т	ls	Local	ion			ZZ HOIT EXC	inpica () and ito	1-1 Habic 1 Tool		batem	ont T	· · · ·
Location	of		N	Vorma	lly			Description o	f			-	T	1
Asbestos-Containing N		1)		d Sole intena	, ,	Asbe	estos	Containing Ma	terial (ACM)	Amount	?em	Repair	inc	incl
TO BE ABA IN Facilit					Staff?	(i.e		ermal systems i surfacing, VAT,		(Specify SF or LF)	Remova	=	apsi	Enclosure
(13)	y			(12)				ther miscellane		SF UI LF)	1 2		Encapsulate	Гe
		,	Yes	No	N/A								Ф	
Basement Level 1 Me	chanical Rr	m [X			Cemen	titio	us Packing		8 LF				
		1												
]												
												П	П	П
Name of Registered Wast	e Hauler			IN	JDEP \	Vaste	Cul	bic Yards of	Name of Regist	ered Landfill		1=	_	
Freehold Cartage	energia de la contractión			H	auler II 15939		7.000	iste	Fairless La					
City, State						<u> </u>	Dis	posal Date	City, State					
Freehold, NJ							1	0/09/2018	Morrisville,	PA				
Completed By (Print or Ty	pe)	Title					1	Signature			Date			
Christina Lynch		Vic	e Pro	eside	nt of (Operatio	ns	Ohrsta	D)		9/2	1/1	?	

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

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Facility	(4)				
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Date of Notification (1)		_		Nan	ne of Buildin	ng Owner/Operator	(2)		CED	2	F /	0010	
	/18			N	ew Jersey	y Division of Pro	perty Managen	nent and Co	Histruc	tic	חלכ	2018	
	otification			Stre	et Address					- Marin			
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	ergency (ir	_	na	Tr	enton, N.	J 08625-0034	*				48		
	fication)		.5	Nam	ne of Contai	ct		Telephone I	Number	-			
☐ Can	cellation			Jo	seph Syp)		856-467					
				FA	ACILITY II	NFORMATION							
Name of Facility Where Abatemer		g Plac	e (3)				Type of Facility	(4)		_			
New Jersey State Museum							School (K-12						
Street Address							Subchapter 8	Other than I	K-12)				
205 West State Street							Other (i.e., pr homes, etc.)	rivate and con	nmercia	l bu	nibliu	gs,	
City (5)							Square Feet	# of Floors		RI	dg. A	an.	
Trenton							10,000	4			80	ige	
County (6)				Cou	inty Code (7)(STATE USE ONLY)			moliche		-		
Mercer					<i>a</i>	////	Museum	or it being der	HORSHE	u)			
Name of Monitoring Firm Hired by	Building C	Owner	(8)	ASCN	1 No.	Name of Abateme							
Brinkerhoff Environmental	Services	s				A CONTRACTOR OF THE CONTRACTOR	onmental, LLC						
Street Address				1	-10/10/10/1	Street Address	Jimental, LLO						
1805 Atlantic Avenue						623 Cutler Av	renue						
City, State, Zip Code						City, State, Zip Co							
Manasquan, NJ 08736						Maple Shade							
Project Manager for Monitoring Fire	m		Tele	phone	No.	Telephone No.	110 00002	License No		_			
Gary Fleming					3-2225	856-755-0099		00842).				
Start Date (10)	Sched	uled C			ate (11)	Name of OSHA M		00042					-
09 /24 /18					18	EMSL Analyti							
Occupancy Status During Abateme	100,000					Street Address							
☐ Facility Closed/Vacated During				ment		200 Route 130	North						
☐ Abatement Performed Outside of	of Normal	Facilit	y Hou	s - Des	scribe	City, State, Zip Co							000000
Time of Abatement:AM-	PN	A/	_PM		_AM	Cinnaminson							
Scope of Work (Check all that apply	v)					Cimalinison	, 143 08077			_			4
(☐ Full Conta	ainment with Nega	ative Pressure)				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati				osure	t)					
		□ ре	monte) I I		☐ Glovebag ☒ Non-Exen	Procedure npted (*) and Non	-Friable Proce	edure				
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Location of			Vorma	33.5		Description of			-				1
Asbestos-Containing Material (A TO BE ABATED	ACM)		d Sole intena		Asbes	stos Containing Mat	erial (ACM)	Amount	1	9	Repair	inca	ncl
IN Facility		Cust	todial	Staff?	(1.6.	, thermal systems in surfacing, VAT,		(Specify SF or LF)	, love	2	ai-	psu	Enclosure
(13)	-		(12)	Τ	-	other miscellaneo		0, 0, 2, ,	1 -	-		Encapsulate	ē
Elevator Mechanical Room		Yes	No	N/A		_							
					Elevator	r Drum Brake Pa	ds	2 SF	Σ				
Elevator Mechanical Room		\boxtimes			Insulato	r Panels		60 SF					
Name of Registered Waste Hauler		Viladeses		JDEP V		Cubic Yards of	Name of Registe	ered Landfill					
Freehold Cartage				auler II 1593 9		Waste 1	Fairless Lan	ndfill					
City, State				10000		Disposal Date	City, State						
Freehold, NJ						10/02/2018	Morrisville, I	PA					
Completed By (Print or Type)	Title					Signature			Date				
Christina Lynch	Vic	e Pre	eside	nt of C	Operation		Y					,	
SB-41)	9/2	4-	118		

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Date of Notification (1) 9-21-2018			Name	of Buildir	ng Owner	Operator	(2)	1.3	OC.		2	CUIU		100
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EPA X Initial DEP Amended					treet, S	uite 2		Lance .					zater i e	0.11,000
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Emergence	y (includin	g		of Contac										
DCA justification Cancellation				ael Kris					Telephon 201-72					
Name of Facility Where Abatement is Tak	ing Place	(2)	FAC	ILITY IN	FORMA	ION			1					
Commercial Building	ing Flace	(3)					Туре	of Facility (4		iri.				
Street Address		-					H	School (K-12 Subchapter 8	(Other the	o 1/ 1/	21			
255-259 Coles Street							×	Other (i.e. pri	vate & com	merci	al bui	ldings	, hom	nes.
City (5)							Squa	etc.) are Feet	# of Floor	S	1	3ldg.	Ane	
Jersey City, 07316							008		5	70	4.65	50+	igo	
County (6) Hudson			County (STATE	Code (7)) (Y)		Curr	ent Use (Prior	if being der	nolish	ned)			
Name of Monitoring Firm Hired by Building	Owner (9	3)	ASCI				-f A:							
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Project Manager for Monitoring Firm			T + 1 1					y, NJ 0730	4					
year manager for mornioning Firm			Telepho	ine No.		Telepho 201-3			Licer 0117	ise No	0.			
Start Date (10)	Schedu	led Co	mpletion	Date (11)			HA Monitor	0111	-				
10-01-2018	10-20-	-2018	3					vironmenta	I Services	s, LL	С			
Occupancy Status During Abatement (Che						Street A								
 Facility Closed/Vacated During Entire Abatement Performed Outside of Nor 	Period of	Abate	ement					ia Avenue				Option Interest		
Other – Describe:	mai r'acilit	y Hou	15			E (2800)		ip Code y, NJ 0730	4					
Scope of Work (Check All That Apply)						Jerse	y Cit	y, NJ 0730	4					
≥3 sf or ≥3 If × ≥160 sf or ≥260 If	_	Renov Demo				× × × ×	Mir	I Containment ni-Enclosure ovebag Proced n-Exempted (dure				е	
		Loca										Abate	ement	
Location of Asbestos-Containing Material (ACM)		Norma ed Sol	ally ely by	A	De	scription	of		1000			Ту	pe	ı — —
TO BE ABATED		inten:	ance/ Staff?	Asbe (i.e	stos Cont . thermal	aining Ma systems	aterial insula	(ACM)	Amount (Specify		R		Ē	m
In Facility (13)	Cus	(12)			surfa	cing, VAT niscellane	, or		SF or LF)		Removal	Repair	aps	Enclosure
150 A	Yes	No	N/A		SUICIT	ocnarie	.ous)				val	ajr.	Encapsulate	ure
Building # 1 - 4th Floor		X	1.07	Pin	e Insula	tion / C	ut &	Ran	687 LF		X		80	
Building # 1 - 4th Floor		X		· .p		VAT		Тар	21300 SF	-	X			
Building # 2 - 4th Floor		X		Pin	e Insula	tion / C	ut R.	Ran	89 LF		X			
Building # 2 - 4th Floor		X	-			ow Glaz			3300 SF					
Name of Registered Waste Hauler		_	NJDEP W	aste	Cubic		.iiig	Name of Re			X			
Green Environmental Services,		ł	Hauler ID 034889	No.	of Was			Grows No						
City. State	***************************************				-	al Date		City, State				-		
ersey City, NJ					100000000000000000000000000000000000000	-2018		Morrisville	, PA					
Completed by	Title				ß	ignature		7		Date	9			
iliana Serrano	Office	е Ма	nager		11	thece	w	Yerma	5		1-20	118		

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Date of Notification (1) 09/20/2018					ng Owner/	Operator	r (2)			SI	EP	25	201	8	
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Name of Facility Where Abatement is Taki	na Place	(3)	FAC	CILITY IN	FORMAT	ION	1 -							450	
PRIVATE	ng i lace	(5)					Ту	pe of Facility	2.2						
Street Address							H	School (K	-12)	ther than	. K 1	2)			
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City (5)							100 -00	etc.) uare Feet		of Floors			3ldg.		
PATERSON NJ								000	1 -500	2	3		97	Age	
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Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No.				batement Co							
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Street Address						Street									
City, State, Zip Code						1 10		1st. STRE	ET						
only, state, zip sode								, Zip Code BERGEN	NIO	7047					
Project Manager for Monitoring Firm			Telepho	ne No		Teleph			NJ U						
			rotopiic	ine No.				-0642		Licen 0130		0.			
Start Date (10)	Schedu	led Co	mpletion	Date (11)			SHA Monitor		0130					
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Occupancy Status During Abatement (Chec	ck Only O	ne)		=======		Street									
Facility Closed/Vacated During Entire	Period of	Abate	ment			2223	RT	. 22 WES	Т						
Abatement Performed Outside of Norr Other – Describe:	nal Facilit	y Hou	rs					Zip Code							
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						×	0	Glovebag Pro	cedure	l ad Nas F	-2-61	- D		20	
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(13)		(12)				iscellane			3	. OI LI)	0	Removal	Repair	Encapsulate	Enclosure
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RONX NY	T-				TBD			WAYNE	ESBU	RG OF	OIH				
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DOH Justification)		177517	Alke Be					m., , j.,,	973-219-751				
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Name of Facility Where Abstement is Taking P	aca (3)						Type of F	wity (4)		**		
Troy Hills Annax							Sen	01 (15-12	2)	9.			
Street Address							X Oth	rila or	6 (Other than K-12) Wate & commercia) I bulldb	vas, h	omes	6
509 South Severwyck Road						_	etc.						
City (5)						1	Square F	Met	# of Floors	60	g. Ági	ii.	
Parsippany		-		rda (71)	Commence of the last of the la	-		an Cina	e il being demoilsh	-			_
County (5) Morris		10	curry Co	性OMLV)_		_	Storag		K. III TAGHLIĞ EYMATOYLENI	uuj			
Name of Monkering Firm Hired by Building Ow	ner (R)	-	ASCM I	MA	- 10	Varna	-		tracior (9)		-		_
RJB Environmental	inci foli		Laws mickly	-			RSave	min see.	(4)				
Street Address							Address	-					_
56 East Bridge Street		٠				15 \$	omerae	Phice					
City, State, Zip Code							tels, Zip i			has Herebille			
Morieville, PA 19057						200	m, NJ	7012					
Project Manager for Monitoring Fifth		N	elephoni 809-20				470-02	٥	357	a,			
Richard Beach	->-4-1-						of DSHA	-	351				_
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9-18-18 Occupancy Status During Abatement (Check	Y Ø Y MONINO	Σ-	18_				Address	-		-04-	MICHIGAN TO A STATE OF THE PARTY OF THE PART	The Local Division in which the last	-
K Facility Closed/Vacated During Entire Pa Abstamont Performed Outside of Normal Other - Describe:	ried of A	balem	ant		-	City, 8	State, Zip	(doi)					
Scope of Work (Check All That Apply)						3 U	_					Anna and	unoe
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	-		+	11	NAME OF TAXABLE PARTY.	-	-	Prior -	120 55	X			\dagger
FLOOR	X_			Var		1617	115_		120 50				1
Name of Registered Waste Hauler ProGreen Mgmt			NJOEP V Hauter ID		Cubic of Wa		·		Registered Landi	THI .	<u>L</u> .		L
City, State East Brunswick, NJ					Dispo			City, St					
Completed by Kevin Stack	Title VP				8	1//	2		11	Date 9	219	-/	8

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te of Notification (1)		Nam	ne of Bull	ding Owner	rioperator IY & NJ	(2)			L/ PAS	EMIL U	BF()			
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DOH Emergency (incl	ngjuğ	Nor	ne of Co	ntacl				_ W	20.7	05 488	4]
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me of Facility Where Absternant is Taking P	acc (3)						Type of Fit							Ì
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eme of Montoring Firm Hired by Building Ox A of NY & NJ	ner (B)		ASCM N	٥.			r Abateme R/Says i		Tacior (9)					
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lers by City, NJ 07310 Polect Manager for Monitoring Firm		1 74	siephtria	No.	3,550		ona Na.		L	cense No	>,			\dashv
dr. Uday Mehta		(2	201) 59	5-4881			470-02		0.	357				
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Location of Aspestos-Containing Material (ACM) TO BE ABATED In Facility (13)	N Use Mai	intener code (12)	ly by nce/ Steff?	Asbasia (i.e.)	Descripts Containing the Containing Systems (Inc.) Surfacing other misc	ng tel	Matorial (/ mp inswitti /AT, or	DM.	(\$	nount secify or LF)	flemoval	Ty Repair	Encapsutati	Enclosure
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			-			_			-		-	+-	+	-
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Name of Registered Weste Habitet Pow/R/Save Inc.		1	Hauler 19 17132		of Waste				/s/feirle					
City, State Cilition, NJ					Disposs	10	eto	Bly, S Morr	iuw Isville, F	A				
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Sharon Hendec	PIE	alhat.	11.				71	Z				-	-	-

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* Da not use this first for papertos licensure exempted activities.

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Date of Notification (1)		Ц		f Building					- ' '	3			-
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Name of Facility Where Abatement is Taking	Place (3)		Market and the second			Type of Facility	(4)			170-150	or at they	COMPANY VV
Commercial Building							School (K-	12)					
Street Address								r 8 (0	Other than K	(-12)			
255-259 Coles Street							Other (i.e. etc.)	priva	te & comme	ercial bu	illain	js, non	nes,
City (5) Jersey City, NJ 07316							Square Feet 80000	1.69	# of Floors 5		Bldg 60+	. Age	
County (6) Hudson				Code (7) USE ONLY)		Current Use (Pr	ior if	being demo	lished)			
Name of Monitoring Firm Hired by Building O	wner (8))	ASC	ν No.		Name	of Abatement Co	ntrac	tor (9)				
							n Environmen			LLC			
Street Address							Address Virginia Avenu	ie					
City, State, Zip Code		-					tate, Zip Code				_		
							ey City, NJ 07:	304					
Project Manager for Monitoring Firm		T	Telepho	ne No.		Teleph	one No.		License	No.			
						201-3	333-8855		01174				
	Schedul 10-20-		npletion	Date (11)			of OSHA Monitor						
Occupancy Status During Abatement (Check							n Environmen	tal	Services, L	LLC			
	- AS - 151						^{Address} /irginia Avenu	0					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	riod of	Abatem / Hours	nent				tate, Zip Code						
Other – Describe:							ey City, NJ 07	304					
Scope of Work (Check All That Apply)							, , , , , , , , , ,						
≥3 sf or ≥3 If ≥ 160 sf or ≥260 If	_	Renova Demoliti				×	Mini Engloque		vith Negativ	e Press	ure		
						×	Glovebag Pro Non-Exempte	cedu	re	: D			
	le	Locati	0.0				1 Non-Exemple	u ()	and Non-Fr	lable Pr	7/6	ure atemer	nt
Location of		Location Normall			Dec	scription	- 4					Туре	"
Asbestos-Containing Material (ACM)		d Solel		Asbes			aterial (ACM)		Amount				
TO BE ABATED In Facility		todial S		(i.e.		systems cing, VA	insulation,		(Specify	Re	1 2	nca	Enc
(13)		(12)				niscellan			SF or LF)	Remova	Vehall	Encapsulate	Enclosure
	Yes	No	N/A							<u> </u>		ate	Ге
Building # 3 5th Floor		Х		Pipe	Insula	ition / F	Rap & Cut		37 LF	x			
Building # 3 5th Floor		X			Wind	ow Gla	zing	73	1100 SF	x			
Building # 3 5th Floor		X			Trans	site Par	nels		2250SF	x		+	\Box
Building # 2 5th Floor		X		Pipe	Insula	tion / F	Rap & Cut		764 LF	×	+	+	
Name of Registered Waste Hauler			JDEP W		Cubic		Control of the Contro	Reai	stered Land		1		
Green Environmental Services		0.0000	auler ID 34889		of Was	ste			th Landfill				
City, State Jersey City, NJ 07304		A Section			Dispos 10-20	al Date -208	City, Stat Morrisv		PA				
Completed by	Title				S	ignature				Date			
Liliana Serrano	Office	e Man	ager			Ille	allise	10		9-21-2	2018	}	

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an al	h								ESTOS A				E	GE		\mathbb{A}	E	7
IUU		(F	urs	sua	nt	to <u>N</u>	I.J.A	<u>.C.</u>	8:60 and	12:1	20)		1	E-Mo			_	displaying and
Date of Notification	1 /								ner / Operat	tor (2)	III		SI	EP 2	5	201	9	
Agencies Notified	9/4/18	fication					rgo B	ank										
EPA	Type Notif	ication		10000			ress	had	Street				ASSE	STOS	00	MTR	01.8	ell course
☐ DEP	Init	tial					& Zip					Logowan s.s.	Section 1975 in the	11CEN	481	10	erun.	11 6 Hart
□ DOL	⊠ Am	nended R#2- 9/2	20/18						19107									
☐ DOH☐ DCA		nergency		Na	ame	of C	ontact	t						Telep	pho	ne N	lumb	er
L DCA	☐ Ca	ncellation		G	ord	on I	/lcGil	I						732-	56	5-45	04	
Name of Equility W/h	Λ ! t -			(0)	FA	CILI	TY IN		RMATION									
Name of Facility Wh Wells Fargo NBO	iere Abatei C	ment is Taking F	Place	(3)					Type of Fac									
Street Address									10010-000	22	Other tha	an K_11	2)					
100 Fidelity Plaza	1								Other (i	.e. priva	ate & con	nmerci	al buildi	inas. h	ıom	es. e	etc.)	
									Square Feet		# of Floo			Bldg.			,	
City (5)		County (6)	(Cour	nty C	ode	(7)		75,00			2				45+		
North Brunswick		Middlesex							Current Use		f being de	emolis	hed)					-11.50.1
Name of Monitoring	Firm Hirad	by Building Ow	mor (0)		TAC	CM No		Banking O									
Environmental Co	onnection	n	nei (0)		AS	CIVI INC	55000	Name of Aba Bristol Env	atemen vironm	t Contrac	tor (9)						
Street Address	(144)					_			Street Addre		ieritai, ii	10.			_			
120 North Warren								_	1123 Beav									
City, State & Zip Coo Trenton, NJ 0801									City, State &									
Project Manager for		Firm	Tel	epho	one	Num	ber		Bristol, PA Telephone N			li	icense	Numb	or			
Rollie Jones					2-4		~ ~ .		(215)788-6				0509	Nullib	CI			
Scheduled Start Date	e (10)	Scheduled Co				e (11)		Name of OS									
9/20/18 Occupancy Status D	uring Abat	omant (Charles		21/1	8			_	Bristol Env		ental In	c.						
Facility Close	ed/Vacated	During Entire F	Perio	d of	Aba	teme	ent		Street Addre 1123 Beave	(Control of the Control of the Contr	of							
Abatement P	erformed (Outside of Norm	al H	lours	s – 7	am t	o 3pm		City, State &								0.50.754	
Describe: (Bristol, PA									9
Scope of Work (Che	ck all that	g Abatement																
coope of work (one	ok all tilat a	хрріу)								П	Full Cont	tainme	nt with	Menati	ive	Drae	cura	
≥3 sf or ≥3 lf			\boxtimes	F	Rend	vatio	on				Mini-Enc		THE WHEN	rvegati	IVC I	103	Suic	
≥160 sf ≥260	lf .				Dem	olitio	n				Glove Ba							
1.00	cation of		1	2 1 0	catio	vn.	1		Description		Non-Exe							
Asbesto	s-Containi	ng	5555		lly U			Α	Description sbestos-Con	n or itainina			mount pecify	A	√bat	eme	nt Ty	pe
	rial (ACM) E ABATED				ly b				Material (A	CM)			or LF)		_		m	Ш
	Facility	i)				e or taff?		(I.	e., thermal s lation, surfac	systems	ν_				Removal	Repair	cap	ncls
	(13)			(1	2)			or	other miscell	laneous	3)				ova	air	Encapsulate	Enclsoure
0.5.4.3		Ť.	Yes			N/A											te	10
Cafeteria				12		片			Pipe insula	ation		5	6 LF	D				
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			H	╁	$\dashv \dagger$	H					-				#	#	H	븜
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Name of Registered \	Waste Hau	ler							bic Yards	Name	of Regis	tered l	andfill					_
Service Transport	Inc.			- 10	209		No.		Waste	Mine	rva Lan	dfill						
City, State						Dis	posal Date	City, S	State			5-11						
New Castle, DE	- T			- 1.					1/18	Wayn	esburg	, Ohio)					
Completed By (Print o	or Type)			- 1	Title	ect			nature	,		,	'n	Dat				
o i izzigoili						iade Ject	r	1	UMA P	lm	13000	: /	M	9/2	20/	18		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120)

					l least			The second		
Date of Notification (1)	Name	of Building	Owner / Operate	or (2)			21. 17.			
9/4/18 Agencies Notified Type Notification		Fargo Ba Address	ank			U SE	P 25	2018	- 1	17
EPA Type Notification			ad Street			44			1	
☐ DEP ☐ Initial		tate & Zip (THE COLUMN SERVICE SER	ASBEST	TOS 002	MIRO	1 R.	Lending
□ DOL □ Amended R#1-9/1		lelphia, P			Laborance	1	ICEMSIA	C.	EC NAC	
□ DOH □ Emergency □ Cancellation	- 1	of Contact					Teleph	one N	umbe	er
☐ DCA ☐ Cancellation	Gordo	n McGill					732-56	5-450)4	
N (5 10 10 10 10 10 10 10 10 10 10 10 10 10	FAC	ILITY INF	ORMATION				1			
Name of Facility Where Abatement is Taking P	lace (3)		Type of Faci							
Wells Fargo NBOC Street Address			School		D.I	10)				
100 Fidelity Plaza			Other (i.		Other than K-		nas bon		to \	
, , , , , , , , , , , , , , , , , , , ,			Square Feet		# of Floors	ciai bullul	Bldg. Ag		10.)	_
City (5) County (6)	County Co	ode (7)	75,000	Neo I	2		Diag. As	45+		
North Brunswick Middlesex			Current Use		being demo	lished)		40.		-
			Banking O			,				
Name of Monitoring Firm Hired by Building Own	ner (8)	ASCM No				9)				
Environmental Connection Street Address			Bristol Env		ental, Inc.					
120 North Warren Street			Street Addre		-4					
City, State & Zip Code			City, State &							
Trenton, NJ 08010			Bristol, PA							
Project Manager for Monitoring Firm	Telephone N		Telephone N	lumber		License	Number			
Rollie Jones Scheduled Start Date (10) Scheduled Cor	609-392-42	0.000.00	(215)788-60			00509				
Scheduled Start Date (10) Scheduled Cor ON HOLD	npletion Date 9/15/18	: (11)	Name of OSI							
Occupancy Status During Abatement (Check or			Street Addre		ental inc.		11 West			
Facility Closed/Vacated During Entire P	eriod of Abate		1123 Beave		et					
Abatement Performed Outside of Norm	al Hours – 7a	am to 3pm	City, State &							_
Describe: 5:00PM to 1:30AM			Bristol, PA	19007						
Facility Occupied During Abatement Scope of Work (Check all that apply)										
coope of Work (Officer all that apply)					Full Containr	ment with	Negative	Proc	cura	5
≥3 sf or ≥3 lf	⊠ Reno	vation			Mini-Enclosu		ivegative	1 103	Suic	
≥160 sf ≥260 If	Demo	olition			Glove Bag P	rocedures	ő			
					Non-Exempte	ed and No	n-Friable	e Proc	edur	e.
Location of Asbestos-Containing	Is Location Normally Us	203	Description Asbestos-Con			Amount	Ab	ateme	nt Ty	/pe
Material (ACM)	Solely by		Material (A			(Specify SF or LF)			ш	3223
TO BE ABATED	Maintenance		(i.e., thermal s	systems		,	Rer	R	nca	Enc
in Facility (13)	Custodial Sta (12)	aff?	insulation, surfactor or other miscell				Removal	Repair	Encapsulate	Enclsoure
(1.5)		N/A	or other miscen	iarieous)	'		<u> </u>	1 1	ate	ō
Cafeteria		\sqcap	Pipe insula	ation		56 LF		\vdash	\neg	П
						OO LI		H	H	H
									Ħ	ΠI
Name of Degistered Wests Hell			12							
Name of Registered Waste Hauler		ler ID No.	Cubic Yards of Waste	Name	of Registere	d Landfill				
Service Transport Inc.	2099		1 CU YD	Miner	va Landfill	í				
City, State			Disposal Date	City, S						***
New Castle, DE			9/15/18		esburg, Ol	hio				
Completed By (Print or Type)	Title		Signature	1.	y = 0		Date			
Gino Pizzigoni	Proj		Geno to	10	ioni/	il	9/14	1/18		
	ivian	ager	Acres 14	back	000	//				- 1

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120)

		8271176		,	curi	10 (30	~
Date of Notification (1) 9/4/18	1	Name of Build Nells Fargo	ing Owner / Opera	tor (2)	MEGI	EVE	m
Agencies Notified Type Notification		Street Addres		-	11 /	AND THE RESERVE OF THE PARTY OF	
□ EPA			Broad Street	No.			
☐ DEP ☐ Initial		City, State & Z			SEP-	2 5 2018	1111
DOL DOL Amended		Philadelphia		1	1	2 5 2010	
□ DOH825 □ Emergency	,	Name of Conta	ect .		Noncommutation of the Contract	T	
DCA Cancellatio		Gordon McC		Ì	ASPENTO	Telephone Nu	4
		JOIGOII INICC	7111	Ĺ	The second	732-565-450	4
Name of Eagility Where Abetement :-	F-11 DI (6)	FACILITY	INFORMATION			Per 1 / July 100 / Jul	
Name of Facility Where Abatement is Wells Fargo NBOC	laking Place (3)	Type of Fac				
Street Address			School	629			
100 Fidelity Plaza			Subcha	pter 8 (Other	than K-12)		
100 Fidelity Plaza			Other (i	.e. private & c	commercial buildi		2.)
City (5) Coun	ty (6) Cou	inty Code (7)	Square Feet		loors	Bldg. Age	
	llesex	inty Code (7)	75,00		2	45+	
Wilda	nesex				demolished)		
Name of Monitoring Firm Hired by Build	li 0 (0)	140011	Banking O				
Environmental Connection	ing Owner (8)	ASCM	No. Name of Aba	atement Cont	ractor (9)		TABLE OF A PLANE
Street Address			Street Addre	/ironmental	, Inc.		
120 North Warren Street			1123 Beav	00.70.70			
City, State & Zip Code			City, State &				
Trenton, NJ 08010			Bristol, PA				
Project Manager for Monitoring Firm	Teleph	none Number	Telephone N		License !	Number	
Rollie Jones	609-3	92-4200	(215)788-60		00509	(dillibo)	
	uled Completion	Date (11)	Name of OS	HA Monitor			
9/14/18	9/15/1		Bristol Env	rironmental	Inc.		
Occupancy Status During Abatement (C	Check only one)		Street Addre	SS			
Facility Closed/Vacated During	Entire Period of	Abatement	1123 Beave				
Abatement Performed Outside	of Normal Hour	s - 7am to 3p					
Describe: 5:00PM to 1:30A			Bristol, PA	19007			
Facility Occupied During Abater Scope of Work (Check all that apply)	nent						
ocope of Work (Check all that apply)				- F.11.0			
≥3 sf or ≥3 lf	\bowtie	Renovation		Full Co	ontainment with N	Negative Pressu	ıre
≥160 sf ≥260 lf		Demolition		Annual Control of the	nclosure		
100 01 -200 11		Demonition			Bag Procedures		
Location of	leto	cation	Donorintia	☐ Non-E	xempted and Nor		
Asbestos-Containing		ally Used	Description Asbestos-Con		Amount	Abatemen	t Type
Material (ACM)		ely by	Material (A		(Specify SF or LF)		m
TO BE ABATED	Mainte	nance or	(i.e., thermal s	vstems	Or Or Erry	교	E 5
in Facility		ial Staff?	insulation, surface	cing, VAT		Repair	clso
(13)		12)	or other miscell	aneous)		val air	Enclsoure Encapsulate
2-6-4		No N/A					e C
Cafeteria			Pipe insula	ition	56 LF		
		4141					
		4141-					
Name of Registered Waste Hauler							
value of Registered Waste Hauter		Hauler ID No	te Cubic Yards	Name of Reg	gistered Landfill		
Service Transport Inc.		20990	of Waste	Minerva La	ndfill		
City, State			Disposal Date	City, State	anum		
lew Castle, DE			9/15/18	Waynesbu	ra Ohio		
Completed By (Print or Type)		Title	Signature		. 5, 01110	Date	
Bino Pizzigoni		Project	1 1	0 -	· 1000	9/4/18	
		Manager	Semo 1	the thirt	mi/gre	314110	
						1.11	1.0

ChlaoT			NOT	IFIC	ATTIO	VOF-AS	lew Jersey BESTOS ABA C 8:60 and 5:1	TEMENT 6)	DEC	E		<u> </u>	T. A. A.
Date of Notification (1)	21 /	18			1	e of Buildin	g Owner/Operator	(2)	SE SE	P 25	5 20	18	The state of the s
Agencies Notified	Type Notific	ation			Stree	t Address						***	
⊠ EPA						.,			ASRES	TOS O JOENS	ONT	304	Er.
	☐ Amende				City,	State, Zip	Code		a salah sa sa ja manang pilana		-		
□ DCA	Amendm Emerger	100			Lai	mbertville	e, NJ 08530						
(NJAC 5:23-8)	justificati		Gladini	3	Name	of Contac	at .		Telephone Nu	mber	6.4.111		-
	☐ Cancella	tion			To	m Ksiaze	k						
					FA	CILITY IN	FORMATION		1.				
Name of Facility Where Ab	atement is	Taking	Place	(3)				Type of Facility	(4)				
Residence								School (K-12					
Street Address								- ☐ Subchapter 8 ☐ Other (i.e., pr			uildin	as	
		li como de se						homes, etc.)	Trace and comm	or olar b	unum	90,	
City (5)								Square Feet	# of Floors	В	ldg. A	ge	
Lambertville								1887	3		128		
County (6)					Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if being demo	lished)			
Hunderdon								Residential					
Name of Monitoring Firm H			wner	(8)	ASCM	No.		ent Contractor (9)					
Indoor Environmenta Street Address	al Concept	ts						ronmental, LLC	;				
286 Sunset Road							Street Address						
City, State, Zip Code							150 Glenwoo						
Barrington, NJ 08007	7						City, State, Zip Co	oge Crossing, PA 1	9077				
Project Manager for Monito	Consession of the Consession o			Tol	ephone	No	Telephone No.	Crossing, PA 1					
Mike Menz	ang i iiii				09-502		215-313-7427	,	License No. 01225				
Start Date (10)	15	Sched	uled C	1 8	etion Da		Name of OSHA M		01225		0.0000000000000000000000000000000000000		
10 / _01_ / _					3_/	the state of the state of	same	iomioi					
Occupancy Status During A	Abatement (Check	only o	ne)			Street Address						
☐ Facility Closed/Vacated													
Abatement Performed C	Outside of No AM	ormal PN	Facility 1/	Hou_PN		cribe AM	City, State, Zip Co	ode					
Scope of Work (Check all t	hat apply)			-									
☐ ≥3 sf or ≥3 if ☑ ≥160 sf or ≥260 if			⊠ Re □ De					tainment with Neg losure g Procedure mpted (*) and Nor		ure			
				Loca						Ab	atem	ent Ty	уре
Location of Asbestos-Containing Ma		9\		lorma d Sol	ally ely by	Anha	Description o			Z.	R	m	Щ
TO BE ABAT		''	Ma	inten	ance/	(i.e	stos Containing Ma ., thermal systems	insulation,	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)			Cust	odiai (12)	Staff?		surfacing, VAT,		SF or LF)	val	,	sula	sure
(13)			Yes	No	T	1	other miscellane	ous)				te	
Crawlspace						Pipe ins	sulation		300 LF				
			П							Tim	П		П
					-	-				ᆜ			
Name of Paristers 1345	Hauter					<u></u>							Ш
Name of Registered Waste Service Transport Gr					NJDEP N Hauler ID		Cubic Yards of Waste	Name of Regist					
	oup				SW21		TBD	Minerva La	ndfill				
City, State							Disposal Date	City, State	011				
New Castle, DE		1					TBD	Waynesbur	g, OH		<i>i</i>	/	
Completed By (Print or Type Andre Gosek	e)	Title	niect	Man	anger		Signature	1 6		ate /	2//	//	0
			Joor	*AICII	411961		1//	Defe (1 9	//	1/	00	

UN 34	279	N	ΙΟΤΙ		ATION	VOF AS	lew Jersey BESTOS ABAT AC 8:60 and 5:1		DEG		\mathbb{V}	E	Manager Commence
Date of Notification (1) 09 /	21 /	18				e of Buildin	ng Owner/Operator (sidential	(2)	SEP,	25	201	8	F
Agencies Notified EPA DOLWD	Type Notifica ☑ Initial ☐ Amended					t Address	Codo	12	ASPESTO	08 GO 16M51		7 71.8	J.
☑ DOH☐ DCA(NJAC 5:23-8)	Amendme Emergen justification	cy (incli on)	uding		Ва	State, Zip of rnegat, Note of Contact	IJ 08005		Telephone Num	ber			
	☐ Cancellat	tion			Vic	tor			609-607-950	0			
					FA	CILITY I	NFORMATION	_	·#5	4			
Name of Facility When Residence	e Abatement is 1	Faking F	Place	(3)				Type of Facility School (K-1)	2)	5			
Street Address									8 (Other than K-12 private and commen		ilding	S,	
City (5)								Square Feet 2500 sf	# of Floors	-	dg. A	ge	
County (6)					Cou	nty Code (7)(STATE USE ONLY)	100000000000000000000000000000000000000	2 rior if being demolis	70	65		
Ocean					000	nty Code (I J(STATE USE UNLT)	Residence	nor ir being demons	sneu)			
Name of Monitoring Fi	rm Hired by Build	ding Ow	vner (8)	ASCM	No.	Name of Abateme)				
N/A								ntracting, Inc.					
Street Address							Street Address 1889 Route 9). Unit 61					
City, State, Zip Code							City, State, Zip Co	ode					
							Toms River,	New Jersey 08	3755				
Project Manager for M	onitoring Firm			Tel	ephone	No.	Telephone No. 732-349-9932	,	License No. 00624				
Start Date (10)	15	Schedul	led C	omple	etion Da	ate (11)	Name of OSHA N		00024				_
10/05	1				9_/		E.M.S.L. Ana						
Occupancy Status Dur Facility Closed/Vac			7.0	50.	ment		Street Address 1056 Stelton						
Abatement Perform Time of Abatement	ed Outside of No	ormal F	acility		rs - De	scribe _AM	City, State, Zip Co		3854				
Scope of Work (Check	all that apply)			-					7001				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			☐ Re ☑ De	novat moliti			☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure	re			
155 No.55	· Veria			Loca			w= 0 10 1			Ab	atem	ent Ty	ре
Locati Asbestos-Containir <u>TO BE A</u> IN Fa (13	Use Ma	inten	lely by ance/ Staff?		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
			Yes	No	-							Ф	
exterior						asbest	os siding		2600 sf				
					10					10			
		l I											
Name of Registered W	aste Hauler			-	NJDEP	Maste	Cubic Yards of	Name of Posi	stered Landfill				
Guardian Contrac					Hauler I	D No.	Waste 3	T.R.R.F.	Stored Landilli				
City, State Toms River, New	Jersey						Disposal Date 10/09/18	City, State Tullytown	, Pennsylvania				
Completed By (Print or	500 8	Title					Signature	// /	1,0000	ate /		1	\neg
Nicholas Fernico	la	Pro	ject	Mar	nager			1.7	1 1	9/	. 1	18	

Chille	27		NOTIF (F	ICATIÓ ursuan	N DE ASI	BESTOS 8:60 ar	ABATE nd 12:12	MEN	Т			CE	ם מ	_	2010
Date of Notification (1) 9/20/18					of Building nunity A		'Operator	r (2)			1.4	٥٤	F 2	5_	2018
Agencies Notified EPA	Type Notification				Address Church S	Street					A	GEES	IGEN	CALIF	HRO G
DEP × DOL	Amended Amendment		_		ate, Zip C Brunswi		08901						- 40 - 34 - 100 - 1		
DOH DCA	Emergency justification) Cancellation				of Contact Jersey C		ınity Ca	apital			ephone N 3-841-2		XT 3	34	
Name of Facility Where A	hatement is Takin	a Place (2)	FAC	ILITY INF	ORMAT	ION	-							
Street Address City (5)	Date Hent is Takin	y Flace (×	e of Facility (School (K-1 Subchapter Other (i.e. p etc.)	2) 8 (Oth rivate 8	& comme	-12) rcial bui	ldings	hom	ies,
Newark								137	are Feet '9	# 0	Floors	1	Bldg. A	Age	
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Name of Monitoring Firm	Hired by Building (Owner (8)		ASC	M No.				atement Con						
Street Address							Street 6 WH		ess DOVE CO	URT					
City, State, Zip Code			1172				City, S	state, 2	Zip Code						
Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph 732-6	none N	No.		License 1200	No.	= >>>>		
Start Date (10) 10/9/18		Schedule 10/12/		mpletion	Date (11)		D		HA Monitor D PROFE	SSIO					
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Scope of Work (Check All	That Apply)					_	LAKE	=WO	OD, NJ 08	3701					
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City (5) Lakewood							Squa 145	re Feet	# of Floo	rs	В	Bldg. A	.ge	
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Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	/ No.				atement Cont D PROFE		.S				
Street Address						Street 6 WI		ss DOVE CC	URT					10000
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Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-			Lice	ense No).			
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Scope of Work (Check All That Apply)														
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X DOH Amendmer Emergency justification Cancellatio	(including	-		of Contact					Telephor 973-84					
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Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.				atement Cont		S		32.00		
Street Address						Street 6 Wh		oss DOVE CO	URT					
City, State, Zip Code								Zip Code OOD, NJ 08	701					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6			Lice 120	nse No. 0				
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Scope of Work (Check All That Apply)												7-10-		
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Name of Registered Waste Hauler	Н	JDEP W auler ID \$509		Cubic of Was		-0	Name of Re	egistered La	andfill					
City, State NEWARK, NJ					Dispos 10/9/1	al Date 8	7	City, State BETHLE	НЕМ РА					
Completed by IOSEPH PERLSTEIN	Title	IER			Si	gnature		1		Date				

State of New Jersey - Notification of Asbestos Abatement E (Pursuant to N and 12:120-7) 8:60-7 SEP 25 2018 Date of Notification (1) Name of Building Owner/Operator (2) September 21, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☑ Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT EPA ■Amended Certification DCA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ☐ Emergency (including x DOL City, State, Zip Code DEP justification) PISCATAWAY, NJ 08854 DOH □ Cancelled Name of Contact Telephone Number Michael Smith ENV HEALTH & 848.445.2550 SAFETY FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Rutgers University- SCILS- Bldg # 3134 ☐ School (K-12) Street Address ☐Subchapter 8 (other than K-12) College Avenue Campus Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Unknown # of Floors: 4 Bldg. Age: 80 years City (5) County (6) County Code (7) Newark Essex (State Use Only) Current Use (prior if being demolished): Academic Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address 3 TERRI LANE **511 MAIN STREET** City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 Butler, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor October 5, 2018 October 8, 2018 Envirovision, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours -20-21, Bldg E Wagaraw Road Describe City, State, Zip Code ☑ Other - Describe: 5pm - 5am -24 hrs & Weekends as Needed Fairlawn, NJ Source of Work (Check all that apply) Full Containment with Negative Pressure $x \ge 3 \text{ sf or } > 3 \text{ lf}$ X Renovation Mini-Enclosure ≥ 160 sf or > 260 Demolition Glovebag Procedure xNon-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Material (ACM) in Facility (13) Amount Solely by Maint./Custodial Abatement Type (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) VAT, or other miscell.) Remove Repair Encap Enclose or LF) YES NO NA 216 X VAT 130 sf X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Cubic Yards of Waste: See Hauler Below # 1 & 2 Name of Registered Landfill See Below GROWS North Landfill 5 Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJ DEP # 12561 October 8, 2018 100 New Ford Mill Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551 Road, Morrisville, PA 19067 215-736-1700 Completed by (Print or Type) Signature Date Raymond C. Pedalino SENIOR PROJECT Raymond C. Pedalino/MG September 21, 2018 MANAGER

Ch4031

NOTIFICATION OF ASSESTED ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

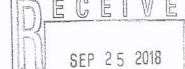
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City, State, Zip Code					City, State, Zip C		ICE ALE	-			
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Facility Closed/Vacate	7			nt							_
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Other - Describe:											
Scope of Work (Check al	I that apply)				D Euli Con	tainment with Ne	gative Procesure		N= WeEs		
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IN Facility		Staff (12			surfacing, VAT, other miscellaneous		SF or LF)	Remova	Repair	pst	Enclosure
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Ch4631

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



Date of Notification (1)	-71 -18			N		ing Owner/Operato	ורט (2)	J 14	tres	108	ÖÖT	190	4. 8.
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County (6)				TC	ounty Code (SE ONLY)	7) (STATE	Current Use	(Prior if b	eing demol	- - ished			
Name of Monitoring Firm (8)	Hired by Buildin	g Owne	r	ASC	M No.	Name of Abatem	nent Contractor	(9)					
Street Address	NIA			_		Street Address	MCO.	INC					_
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City, State, Zip Code						City, State, Zip C		ADE	M.	T	28	-05	 ->
Project Manager for Moni	toring Firm		Tele	phon	e No.	Telephone No. 856 719		Lice	ense No.	1.3	7	<u> </u>	
Start Date (10)	Sch	eduled (_	tion E)ate (11)	Name of OSHA N		N	👊	1=		`	
Occupancy Status During				· ·		Street Address	/						
Facility Closed/Vacated Abatement Performed					-	City, State, Zip Co	ode				_		=
Other - Describe:													
Scope of Work (Check all	that apply)						tainment with N	legative P	ressure				
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TO BE ABATEI IN Facility			stodial Staff?			hermal systems in: surfacing, VAT, o	sulation,	(Sp	ecify or LF)	Rei	R	Enca	Enc
(13)		ļ.,	(12)			other miscellaneou			1 (1)	Removal	Repair	Encapsulate	Enclosure
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MAPLE SH	HADE	W.	5			Disposal Date	City State	OBI		N	. T		
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)	-18	1		Sing Owner/Operato		LENT				-
	e Notification		Street Addres	ss			0.00		775	_
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Street Address					Subchapte	r 8 (Other than K-1 private & commercial	2)	Idina		34
					homes, etc	2.)				
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County (6)			County Code	(7) (STATE	Current Use (F	Prior if being demoli	shed)			=
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Name of Monitoring Firm Hired (8) IA (/ IA)	by Building Owner	AS	CM No.	1	nent Contractor (ENC.				
Street Address		_!_		Street Address	50-00					
				369	S. Spri	ICE AVE				
City, State, Zip Code				City, State, Zip C		DE M.T	08	30	57	
Project Manager for Monitoring	Firm	Telepho	ne No.	Telephone No.		License No.				_
				856-779		101	37	_ [_
Start Date (10)	Scheduled Co	mpletion	Date (11)	Name of OSHA N	Anitor					
Occupancy Status During Abate	ment (Check only o	ne)		Street Address						_
Facility Closed/Vacated Durin	g Entire Period of A	batemen	t							
☐ Abatement Performed Outsid☐ Other - Describe:	e of Normal Facility	Hours		City, State, Zip Co	ode					
Scope of Work (Check all that ar	volv)						_	_		=
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TO BE ABATED IN Facility	Sta	todial aff?	(i.e.,	thermal systems in surfacing, VAT,	or	SF or LF)	Removal	Repair	Encapsulate	Enclosure
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

SEP 2 5 2018

Date of Notification (1)	71-18			Na		ding Owner/Operato		ASEES	TOS	00	5170	- N 1		
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Name of Facility Where			ce (3)				Type of Facili	ty (4)						
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Street Address					+		Other (i.e.,	er 8 (Other than K-1) private & commerci		lding	s,			
City (5)							Square Feet	c.) # of Floors	TF	ildg.	Age			
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County (6)	MAY			Co	unty Code E ONLY)	(7) (STATE	Current Use (I	Prior if being demolis	shed)					
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Street Address						Street Address 369 5	SPRU	E AUE						
City, State, Zip Code						City, State, Zip C		W. T 08	305	- 7				
Project Manager for Mon	itoring Firm		T Tele	phone	No.	MAPCE Telephone No.	SHAPE	License No.	000			=		
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Facility Closed/Vacate	d During Entire P	enco or al Facilit	Abate y Hou	ment s	City, State, Zip Code									
Other - Describe:														
Scope of Work (Check al	I that apply)					□ Full Cont	tainmant with N	agative Process						
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Name of Registered Waste				DEP V	No.	Cubic Yards of Waste		A IA I I	1/	١		1		
	WC.		-11	790)([Disposal Date	City, State	C, 191, U	. 4	1		-		
City, State MAPLE 5H	ADE N	J						DBINE						
Completed By	Title					Signature	D1.	Date _	71	- (9	2			
MICHAEL KLE	NAM	SUP.				- Mary	y 100		6)			

CK 4632

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



Date of Notification (1)	71-18			Nam	ve of Buildin	ng Owner/Operator	CONSTR	UCTIDASPE	703	00	ME	OL.		
Agencies Notified	Type Notificati	on		Stre	et Address	5 WHI-		Easter & Property of	-		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	estado.		
DEP	Initial Amended			City,	State, Zip	Code		20 110				=		
⊠ DOF	Amendmen Emergency		ng			MONTAN	NIT	05037				_		
DOH □ DCA	justification Cancellation			Nam	e of Conta	ct _D()		Telephone Numb	er					
				FA	CILITY IN	FORMATION								
Name of Facility Where	Abatement is Tal	king Plac	æ (3)				Type of Facility							
	SIDEMC	<u>E</u>						8 (Other than K-12						
Street Address							homes, etc							
City (5)	A.1 C.	ity					Square Feet	# of Floors	1	dg. A				
County (6)	AU C					7) (STATE	Current Use (P	rior if being demolis	-	,,,,,				
CAPE	MAY		,		E ONLY)	T Name of Abatem	nent Contractor (9	CANT		-		=		
Name of Monitoring Firm (8)	Hired by Building	g Owner		ASCIV	No.	The first of the control of the cont		IWC				_		
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City, State, Zip Code						MA	PLE SH	ADE N.J	08	05	2	_		
Project Manager for Mon	itoring Firm		Tel	ephone	No.	Telephone No. 856-77	9-4177	License No.	371		-			
	10-5	reduled (- Comple	ation D	ate (11)	Name of OSHA						ન		
Start Date (10)		10-	_ (7-	18		NA					_		
Occupancy Status During	Abatement (Ch	neck only	one)	Street Address										
Facility Closed/Vacate Abatement Performed	d During Entire I	Period of nal Facili	Abate ty Hou	ement ers	ment City, State, Zip Code									
Other - Describe:	005500000000000000000000000000000000000								_			=		
Scope of Work (Check al	I that apply)						ntainment with Ne	egative Pressure						
≥3 sf or ≥3 lf			enovat emotitic			☐ Mini-End ☐ Gloveba	a Procedure							
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TO BE ABATI	ED (From)		ustodia Staff?	al	(i.e.,	thermal systems in surfacing, VAT,	or	SF or LF)	Remova	Repair	Encapsulate	Enclosure		
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City, State	111 7					Disposal Date	City State	1 BINIE 1	N,	5				
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NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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Street Address						Subchapt	er 8 (Other than K-	12)						
04-75						homes, e	, private & commer tc.)	cial b	utlakn	JS,				
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Project Manager for Monitoring Firm		Tele	phon	e No.	Telephone No.		License No.	- 0		_				
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Start Date (10) Sc	heduled	Comple	tion D	Date (11)	Name of OSHA M			42./1						
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(13)	-	(12)	_	9	ther miscellaneous	s)		Removal	air	Encapsulate	Enclosure			
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Name of Registered Waste Hauler		100000000000000000000000000000000000000	EP V	CONTRACTOR OF THE PROPERTY OF	ubic Yards	Name of Regis	stered Landfill				-			
KLEMCO INC.		Hau	er ID	Noy o	f Waste	CIA	u.c MI	1	1					
City, State					isposal Date	City, State	-1. (401.	<u>.</u>	П		=			
MAPLE SHADE	WI.	7					DRINE							
Completed By Title					Signature A		DOINE			_	=			
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) SEP 25 2018 9/4/18 Wells Fargo Bank Agencies Notified Type Notification Street Address ASBESTOS CONTROL & EPA One South Broad Street DEP Initial City, State & Zip Code X DOL \boxtimes Amended R#3-9/21/18 Philadelphia, PA 19107 \boxtimes DOH Emergency Name of Contact Telephone Number DCA Cancellation Gordon McGill 732-565-4504 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Wells Fargo NBOC School (K-12) Street Address Subchapter 8 (Other than K-12) 100 Fidelity Plaza Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 75,000 45+ North Brunswick Current Use (Prior if being demolished) Middlesex Banking Offices Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Connection** Bristol Environmental, Inc. Street Address Street Address 120 North Warren Street 1123 Beaver Street City, State & Zip Code City, State & Zip Code Trenton, NJ 08010 Bristol, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Rollie Jones 609-392-4200 (215)788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor ON HOLD ON HOLD Bristol Environmental Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 Beaver Street X Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: 5:00PM to 1:30AM Bristol, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure ≥160 sf ≥260 lf Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate Enclsoure Remova TO BE ABATED Maintenance or (i.e., thermal systems Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Cafeteria M Pipe insulation 56 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Service Transport Inc. 20990 1 CU YD Minerva Landfill City, State Disposal Date City, State New Castle, DE 9/21/18 Waynesburg, Ohio Completed By (Print or Type) Title Signature Date Gino Pizzigoni Project 9/21/18 Manager

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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		FΔC	II ITY IN	FORMATION									
Name of Facility Where Abatem	ent is Taking Place	(3)	71L11111	Type of Fac	rility (4)								
Wells Fargo NBOC	·	(-)		School									
Street Address		*	11		apter 8 (Other tha	ın K-12)							
100 Fidelity Plaza				Other (i.e. private & com	mercial buildi	nas. homes	etc.)					
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City (5)	N. C	County Co	ode (7)	75,00	0	2		5+					
North Brunswick	Middlesex			Current Use	(Prior if being de	emolished)	•						
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Name of Monitoring Firm Hired to	by Building Owner (8)	ASCM N		atement Contrac	actor (9)							
Environmental Connection Street Address					vironmental, Ir	ic.							
120 North Warren Street				Street Addre									
City, State & Zip Code				1123 Beav City, State 8									
Trenton, NJ 08010				Bristol, PA									
Project Manager for Monitoring F	irm Tele	ephone N	lumber	Telephone N		License I	Number	-					
Rollie Jones		-392-42		(215)788-6		00509							
Scheduled Start Date (10)	Scheduled Complet		(11)	Name of OS									
9/20/18	9/2	1/18			/ironmental In	C.							
Occupancy Status During Abater Facility Closed/Vacated I	ment (Check only or	ne) Nof Abote	omont	Street Addre									
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Describe: 5:00PM to	1:30AM	ouis – 78	iii to spr	City, State & Bristol, PA									
Facility Occupied During	Abatement			Distoi, FA	19007								
Scope of Work (Check all that ap	pply)												
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Name of Registered Waste Haule	er			Cubic Yards	Name of Regist	ered Landfill	The state of the s						
Service Transport Inc.		2099	er ID No.	of Waste 1 CU YD	Minorio Lond	14:11							
City, State		2000	0	Disposal Date	Minerva Land	ITIII							
New Castle, DE				9/21/18	City, State								
Completed By (Print or Type)		Tal.					Deta		_				
Gino Pizzigoni		Date											
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

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Date of Notification (1) 9/4/18					Owner / Operato	or (2)		SE	P 25	2018				
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☑ DOH☐ Emergency☐ Cancellation		Gordo							732-56					
		FAC	ILITY	/ INF	ORMATION									
Name of Facility Where Abatement is Takin	ng Place (3))			Type of Facil	ity (4)								
Wells Fargo NBOC					School (
Street Address					☐ Subchap	oter 8 (Othe	er than K	-12)						
100 Fidelity Plaza						e. private &			nas, hom	es, etc	;.)			
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Name of Monitoring Firm Hired by Building	Owner (8)		ASC	M No.			atractor (0)						
Environmental Connection	Owner (0)		1,000	W INO.	Bristol Env			9)						
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120 North Warren Street					1123 Beave									
City, State & Zip Code					City, State &		100000000000000000000000000000000000000							
Trenton, NJ 08010					Bristol, PA									
Project Manager for Monitoring Firm	Teleph	hone N	lumb	er	Telephone No			License	Number	37				
Rollie Jones	609-3				(215)788-60			00509						
Scheduled Start Date (10) Scheduled	Completion	n Date	(11)		Name of OSH	HA Monitor								
ON HOLD	ON HO				Bristol Env	ironmenta	al Inc.							
Occupancy Status During Abatement (Chec					Street Addres	SS								
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Name of Registered Waste Hauler					Cubic Yards	Name of F	Registere	d Landfill						
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Service Transport Inc.		2099	90		1 CU YD		Landfill							
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(4)								MA	=++	1-2	0			
Date of Notification	9/4/18		ı	Vame o	of Buildir	ng Owner / Oper	rator (2)		11 111						
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Environmental Co	nnection					Bristol Er	vironme	ntal. Inc.	(3)						
Street Address 120 North Warren	04 4					Street Addr	ess	,			_		_		
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Project Manager for M	ect Manager for Monitoring Firm lie Jones eduled Start Date (10) Scheduled Comp					Bristol, P	A 19007								
Rollie Jones					mber	Telephone			License	Number					
Scheduled Start Date	duled Start Date (10) Scheduled Comp 9/14/18					(215)788-6			00509						
9/14/18	9/14/18				11)	Name of OS Bristol En									
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Facility Close	d/Vacated D	uring Entire P	eriod of	Abaten	nent	1123 Boay									
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Describe: 5	:00PM to 1	:30AM				Bristol, PA									
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scope of work (Check	k all that app	oly)							42:						
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	mpleted By (Print or Type)				9/15/18 Waynesburg				g, Ohio						
o Pizzigoni				Title Signature Date											
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TICIOS		24	Manager Simo Physigoni / Il 9/4/18						357						
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			NOT	IFICA	State	of I	New	Jersey STOS ABA	TEM	ENIT	1	111			, ,			
		ريا	(Pursua	ant to N.	JAC	8:60	-7 and 12:	120-7)	.(M	3	2	60	12		
Date of Natification (4)					1	Nam	e of	Building (Owne	r/Operator	(2)	1	1					
Date of Notification (1)					I.	MER	RCK :	SHARP & I	DOHN	IE CORP.		Line	\ [II 107		
	18							dress					-	- U		<u> </u>		
	Votificatio				[1	26 I	E. LI	NCOLN AV	/ENUI	E, P.O. BO	X 2000, RY	28-414						
	nitial Noti			-024		City,	Stat	e, Zip Code	е	- P5 CYS (200 15-25) 5 1		111		0.5	5 0	- 000		
	mended ancellati		catio	n	ĮF.	RAH	WAY	, NEW JE	RSEY	07065		10.2	Ų	SE	7 2	5 2018		
	n Hold	011			h	Jam	e of	Contact	-		Tolophon	Alumb	-					
DCA	MERGE	NCY	NOT	IFICAT				A JOHNSO	N					DEO	TOO	CONTRO		
				F	ACILIT	YIN	IFOF	RMATION				(Other than K-12) ate & commcl. bldg # of Floors 2 being demolished RATORY AND OFF the Contractor (9) ITAL CORPORATI ROAD BRIK 10901 License N 1101 itor TORIES INC REET RK, NEW YORK 1 Pressure Amount (Specify SF or LF) O SF X And Amount (Specify SF or LF) O SF X And Amount (Specify SF or LF) O SF X				CALLET WAY		
Name of Facility Where Abateme	ent is Tal	king l	Place	(3)					Тур	e of Facilit	ty (4)	ATTOMAS OF A		Mar - sm.				
MERCK SHARP & DOHME CORP	0004710							(4)		School (K						4 1		
MERCK SHARP & DOHME CORP	ORATIO	IN								Subchapt	er 8 (Other	than K-	-12)					
Street Address		-							X	Other (ie.	private & co	ommcl.	bld					
126 EAST LINCOLN AVENUE - BI	UILDING	80 L							30	15,000	1	oors		Blo	lg. Ag 53	e		
	ounty (6)			C	ouni	ty Co	ode (7)	Cur		1000	demoli	sher	4)	55			
RAHWAY	NION				(ST	ATE	US	E ONLY)	RES	SEARCH LA	ABORATOR	Y AND	OF	FICE	FACII			
Name of Monitoring Firm Hired b ENVIRONMETAL HEALTH INVES	y Buildi	ng O	wner	(8)	S ETTINE		A	SCM No.	Nan	ne of Abate	ement Cont	ractor	(9)					
Street Address	TIGATIO	NS, 1	NC.					104				NTAL CORPORATION ROAD						
655 WEST SHORE TRAIL										et Address								
City, State, Zip Code						C 50		-		State, Zip					_			
SPART	A, NEW											901						
Project Manager for Monitoring Firm	Numbe	er				phone Num			nse l	Vumb	er							
WILLIAM S. KERBEL, CIH Expected State Date (10)	649				845-369-7500 1101													
10 / 5 /1		Sche		omple /	tion Da		11)	40		845-369-7500 1101 Name of OSHA Monitor								
Month Day Year	95	Мо	nth		Day	5		/19 Year	AME	RISCI LAB	BORATORIE	S INC)				
Occupancy Status During Abateme	nt (Chec	k only	one)				i cai	Stree	et Address			icense Number 101 NC #11480					
X Facility Closed/Vacated	During E	ntire	Perio	d of A	bateme	nt				EAST 30TH	STREET							
Abatement Performed C	outside of RIDAY -S	Nom	nal F	acility	Hours -	Des	cribe) :										
orici Describe.	NDAT -3	OND	AT /	AIVI- I Z	AIVI				City,	State, Zip		=\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	DIA	10010				
Scope of Work (Check all that apply	y)					D	X	Full Conta	I inmer	nt with Nea:	ative Pressi	Ire	m	10016)			
Demolition	X	Reno	vatio	n				Mini Enclo	,									
>3SF OR LF X >160 SF OR 260 LF						2	X	Glovebag								- 1		
Location of		le I	ocat	ion				Non-Friab										
Asbestos-containing				used				otion of Asi ing Materia			Amou			batem	ent T			
Material (ACM)			lely l					hermal sys			0.566	fv	Ĕ	REPA	ä	l l		
TO BE ABATED				todial		insi	ulatio	n, surfacir	ig, VA	T.		F)	Ò	A	¥	18 1		
in Facility (13)			aff (1			or	othe	er miscellar	neous)	53 8442	/	Σ	'n	ENCAPSUL	ENCLOSUR		
		Yes	No	N/A											7	\overline{\pi}		
2ND FLOOR MER				Х	DUCT II	NSU	JLAT	ION			3,600 SF		X					
														-				
		-												-	-			
		-				- 2074												
Name of Registered Waste Hauler	1	NJDE	P Wa	aste	Cubic Ya	ards	of V	Vaste	Name	of Registe	ered Landfill		_	1		\vdash		
FREEHOLD CARTAGE, INC.	H	Haule		No.			80		LYCC	MING CO	UNTY RESC	DURCE	E MA	NAG	EMEN	IT SE		
825 HIGHWAY 33 City, State		1	5939		D:				447 A	LEXANDE	R DRIVE/R	OUTE	15					
FREEHOLD, NEW JERSEY					Disposa 10/5 - 1/				City,	State//	DA 4775	,		,		7		
Completed by (Print or Type)	Title					TS	igna	ture /	AVION	JOUNERY	, PA 17/52	Date 2	9	/-	. /			
BENJAMIN SANCHEZ	DIREC	CTOR	OF	OPER	ATIONS	3	J	11	7	$\langle \cdot \rangle$	I	Date	1/	2	11	18		

	ΠΓ	OTIFICAT	TION C nt to N	e of New J OF ASBES JAC 8:60-	TOS ABAT 7 and 12:1	20-7)	CK	36	26	83	_ [
Date of Notification (7 11 1	<u>U</u>				Owner/Operator OOHME CORP.	(2)	7	E C	E	1 W			
9 /21 /18				Street Add	ress		10.7			and the latest and th				
Agencies Notified Type Notifi	cation			126 E. LIN	COLN AV	ENUE, P.O. BOX	(2000, RY28-4	14)			- 1			
DEP Amer	Notification nded Notification			City, State RAHWAY,		RSEY 07065	1		SE	P 2	5 2018			
X DOH On H	old RGENCY N	OTIFICAT		Name of C PATRICIA		N	Telephone Nu 732-594-7746	mber	SBES	TOS (IGEN	CONTRO			
		F	ACILIT	TY INFORI	MATION					-	The state of the s			
Name of Facility Where Abatement i MERCK SHARP & DOHME CORPOR.		ace (3)				Type of Facility School (K		K-12)						
Street Address				-		X Other (ie. Square Feet	private & comm	ncl. bld	gs., ho	mes, e				
126 EAST LINCOLN AVENUE BUILT		100				26,220	2			53				
City (5) Coun	ty (6)			ounty Co		Current Use (Pr								
Name of Monitoring Firm Hired by B		ner (8)	(5)	ATE USE	CM No.	RESEARCH LA			FICE	FACIL				
ENVIRONMETAL HEALTH INVESTIG	ATIONS, IN	C.		AO	104	PAR ENVIRON			ΓΙΟΝ					
Street Address 655 WEST SHORE TRAIL						Street Address 313 SPOOK RO	OCK BOAD							
City, State, Zip Code	JEW JEBSI	-V 07074				City, State, Zip	Code							
Project Manager for Monitoring Firm	NEW JERSE	elephone	Numb	or		SUFFERN, NE\ Telephone Num			N I h .					
WILLIAM S. KERBEL, CIH		73-729-56		Ci		845-369-7500	and the same of th		Numbe	el .	İ			
Expected State Date (10)		I. Comple		ate (11)		Name of OSHA		License Number 1101 ttor						
10 / 5 /18 Month Day Year		11 /		5	/18	AMERISCI LAB	ORATORIES II	1101 or						
Occupancy Status During Abatement (X Facility Closed/Vacated During Abatement Performed Outsi	ing Entire P	one) eriod of Al al Facility I	Hours -	ent	Year :	Street Address 117 EAST 30Th City, State, Zip								
Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF	X Renov	ation		X	Mini Enclo Glovebag	NEV inment with Nega	YORK, NEW	YORK	10016					
Location of		ocation			tion of Asl			A	Abatem	ent Ty	/ре			
Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)	sol Maint/	ally used ely by Custodial ff (12) lo N/A		(ie. Tł insulatio	ng Materia nermal sys n, surfacir er miscellar	stems ng, VAT,	Amount (Specify SF or LF)	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR			
2ND FLOOR MER ROOM		х	PIPE I	NSULATIO	ON		6 LF	х						
	++							+	+					
Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State	Hauler	ID No. 939		Yards of W	/aste	Name of Registe LYCOMING CO 447 ALEXANDE	UNTY RESOUR		ANAG	EMEN	T SE			
FREEHOLD, NEW JERSEY				al Date 11/5/2018		City, State MONTGOMERY	(PA 17752	50.00	-					
	Title	05 0050	17101	Signat	ture	120		ite C	1/2	1/	10			

Ch 1998	NOTIFICATION OF ASBEST OS ABATEMENT (Fursuant to NIAC 8 60 and 12 120)								EC			E			
Date of Notification (1) 9/14/2018	Name of Building Owner/Operator (2 Patricia Corchado							de la companya de la	SEP	25	201	8			
Agencies Notified Type Notification Type Notification Initial Amended Amendment			Street Ad City, Sta East E	ddress te, Zip Co Brunswic	de k NJ (08816		100 Tan	ASBESTOS CONTROL & LICENSING						
Emergency (i justification) DCA Cancellation	ncluding			Contact Stanko	Tel	enhone Nu	mber	7							
	DRMATI	ON													
Name of Facility Where Abatement is Taking Corchado Residence Street Address		Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,													
City (5) East Brunswick							etc.) Square Fee 1460	# o 2	f Floors		ldg. A 980	ge			
County (6) Middlesex			Current Use (Prior if being demolished) residence												
Name of Monitoring Firm Hired by Building C		Name of Abatement Contractor (9) Checkmark Industrial													
Street Address		Street Address 54 Morgan Dr													
City, State, Zip Code		City, State, Zip Code Sparta NJ 07871													
Project Manager for Monitoring Firm Telephone No.						Telephone No. License No. 973-570-2645 01334									
Start Date (10)		Name of OSHA Monitor Checkmark Industrial													
Occupancy Status During Abatement (Check		Street Address 54 Morgan Dr													
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of A al Facility	baterr Hours	ent		_	City, S	City, State, Zip Code Sparta NJ 07871								
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure												
		Abat							ement ype						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	ormal d Sole ntenar odial S (12)	ly by nce/		Description of tos Containing Material (A0 thermal systems insulation surfacing, VAT, or other miscellaneous)			Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure			
	No	N/A									ite	Ф			
basement		X			Ř	9"x 9"		10	1000 SF						
										-					
										-			9.1		
Name of Registered Waste Hauler Atlantic Carting NJDEP W Hauler ID						Cubic Yards Name of Registered Landfill of Waste Waste Management									
City, State Wayne NJ						posal Date City, State Tulleytown PA									
Completed by Corey Stankovic Title CEO						Signature Date 9/14/2018									

D&S Proj. #: 18-192 (Pursuant to NJAC 8:60 and 12:120) SEP 25 2018 Date of Notification (1) Name of Building Owner/Operator (2) 0 9 /1 7 /1 8 brookdale school ASPESTOS CON Agencies Notified Type Notification Street Address **EPA** Initial Amended 1230 broad street DEP City, State, Zip Code Amendment #: DOL **Emergency** bloomfield, nj 07003 DOH. (including Name of Contact Telephone Number justification) DCA tomas kusz 201-456-3738 Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) brookdale school Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 1230 broad street # of Floors Bldg. Age Square Feet City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) bloomfield Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. hillman consulting 11c #00023 D & S RESTORATION, INC. Street Address Street Address 20 California Ave. 1600 Route 22 East, Suite #107 City, State, Zip Code City, State, Zip Code union, nj 07083 Paterson, NJ 07503 Project Manager for Monitoring Firm Telephone Number License Number Phone Number 973-345-8020 01169 Vojislav Tesic 908-514-0620 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 09/21/18 10/19/18 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure 3 sf or > 3 IfRenovation Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of by maintenance/custodial е n asbestos-containing Description of asbestos-containing Amount n staff(12) m p C material (acm) to be (Specify SF or material (ACM) С 0 abated in facility (13) a а LF) Yes No N/A ٧ wall and ceiling plaster 700 sq ft room #311, #211 and Room 111 X Registered Waste Hauler Cubic Yards of Waste NJDEP Hauler ID# Name of Registered Landfill D & S RESTORATION, INC. 13506 10 yds TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 09/24/18 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date **BOGDAN JOLDZIC** PRESIDENT 09/17/2018 Do not use this form for ashestos licensure exempted activities ACD AA

NOTIFICATION OF ASBESTOS ABATEMENT (Fursuant to NJAC 8:60 and 5:16)

Date of Notification (1)			L	-	Name	of Buildin	g Owner/Operator (2)	-			THE COLUMN	www.			
	18					g Owner/Operator (Bank, N.A.	ME	CE		\mathbb{V}						
Agencies Notified	Type Notifica	ation			Stree	Address			11-4							
⊠ EPA	☐ Initial	411011				State Str	eet		777	0		010	1			
☑ DOLWD	☐ Amended	t				State, Zip (SEP 2	5 2	018	- 1			
☑ DHSS	Amendm	ent#_			100000000000000000000000000000000000000								al margarit			
□ DCA	☐ Emergen		cluding	3		ston, MA		1	STA		1 527					
(NJAC 5:23-8)	justificati					of Contac		Telephone Nu		15161	3	1.0:				
	☐ Cancellat	tion			Sus	san Peck	617-7 57- 5632									
Name - 6 F - 111 - 101					FA	CILITY IN	IFORMATION				G 1)					
Name of Facility Where A	Abatement is 1	akıng	Place	(3)			Type of Facility (4									
Santander Bank	(1)						School (K-12)		(0)							
Street Address							☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings,									
620 Main Road								homes, etc.)								
City (5)								Square Feet	# of Floors	je						
Towaco, NJ							2,000 2					45				
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demo	lished)	,					
Morris																
Name of Monitoring Firm	Hired by Build	ding O	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)								
Hillmann Consultin				622	52	JVN Restorat	tion Inc									
Street Address							Street Address						-			
1600 Route 22 East							47 Foster Ro	ad								
City, State, Zip Code							City, State, Zip Co						-			
Union NJ 07083							Staten Island									
Project Manager for Moni	itorina Firm			Tel	ephone	No	Telephone No. License No.									
						-6171	718-605-6256		00774							
Start Date (10) Scheduled Completion Date							Name of OSHA M		00774							
10 / 06 /					0 /		Testor Tech									
			75		_ ′											
Occupancy Status During						Street Address	120 m									
☐ Facility Closed/Vacate					- 16	10 59 Jackso										
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _AM-Saturday 2:00PM/12:00PM-Sunday							City, State, Zip Co									
12:00 am to 4:00 p	m	AM	10.000		<u>Jul</u>	.uuy	LIC NY 11101									
Scope of Work (Check all	I that apply)						M = 110									
≥3 sf or ≥3 lf		1	⊠ Re	novat	ion		⊠ Full Cont	tainment with Nega	ative Pressure							
≥160 sf or ≥260 lf			☐ De				☐ Glovebag	g Procedure								
							☐ Non-Exe	mpted (*) and Non	-Friable Proced	lure						
. 				Loca						Ab	Abatement Type					
Location Asbestos-Containing I	. 77 (5) a real and a r	1)			ely by	Ache	Description o stos Containing Ma		Amount	R	Re	ū	ū			
TO BE ABA		"			ance/	(i.e	., thermal systems	insulation,	Amount (Specify		Repair	cap	clo			
IN Facilit	Cust	todial (12)	Staff?		surfacing, VAT,	or	SF or LF)	Removal	_	Encapsulate	Enclosure					
(13)		Ī	Yes	No	N/A	1	other miscellane	ous)				ate				
Basement	×			Pipe Ins	sulation		30 LF		П	П	П					
Basement				-	ninated Soil		4 CY									
Dasement						Contain	illiated con		701							
						Masta	Cubic Yards of	Name of Desire	arad Landfill							
Newark Carting	ie nauler			1133	NJDEP I Hauler II		Waste	Name of Registe	ered Landfill							
					NJ-56		10									
City, State							Disposal Date	City, State	0.554							
Newark, NJ					10/15 /18	Bethlehem,	PA									
Completed By (Print or Type) Title							Signature Date									
Ralph Barnhardt Project Manager										09-	24	- 6.	3			

Cou	RTES	4	+	11	1N	(G-	///		NO 1	PAYN)E	n	7		
MM	State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)														
Date of Notification (1)	20 1 1	(2)	o,oly L	4	SI	ΕP	2 5	20	18						
	ype Notification Initial		9	Street City, S	Address State, Zip (M: 11 River REPRISTOS CONTROLI NY 10546 M: Cary Telephone Number 201-624-8949									
FACILITY INFORMATION															
Name of Facility Where Aba Future N Street Address 2419 Le		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age													
County (6) County Code (7)(STATE USE									Current Use (Pri	or if being der	molish	ed)			
Serger Name of Monitoring Firm Hi	Na	me of Abatem	nent	Contractor (0)			2	-							
Tiger Environ	Name of Abatement Contractor (9) Microtech Contracting Corp Street Address														
Street Address 2344 20th A	eet Address 3 8 Kea	ss lean St													
City, State, Zip Code	08724	1				City, State, Zip Code West Babylon, NY 11704									
Project Manager for Monitor Kelly Waltz Start Date (10)	No. 430/ le (11)	Telephone No. (031-243-5559 01021 Name of OSHA Monitor Same as Above													
Occupancy Status During Al		et Address													
Facility Closed/Vacated [Abatement Performed Or Time of Abatement:	City	ity, State, Zip Code													
Scope of Work (Check all th	☐ Mini-End	stainment with Negative Pressure closure ig Procedure empted (*) and Non-Friable Procedure													
			Local									Aba	ateme		
Location of Asbestos-Containing Ma TO BE ABATE IN Facility (13)		Use Ma	Norma ed Sole intena todial (12)	ely by nce/	Asbe (i.e	Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaned			ulation,	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes No N/A									775	00	N.		П	
Flashir	9				100	or	flash.		9	1/3-	21				
				H				-							
Name of Registered Waste I	ic Yards of ste	1	Name of Regis	Centro	i La	n	16	- 1	(
Proteck City, State	27		10	lauler ID	883	Disp	oosal Date	- (City, State	eVI, F	34				
New Have		Signature	City, State Pen Arg/1, PA Ulor 9/20/18												
Carolyn Morr	13 0	AC	en	101	agei		air	LE	024		1 7	100	9/	0	

TOM VYORHEES, 9/13/18 NOT			Sta	ate	of N	ew Jersey				
TIME HERES, 9/12/18 NOT	IFIC	AT/				BESTOS AE	BATE	MENT		
062130						8:60 and				TET VE
Date of Notification (1)		Na	me o	of Bui	ilding	Owner / Operato	or (2)			<u> </u>
9/13/18						nship Board		ıcation		deline to a constitution of the constitution o
Agencies Notified Type Notification		Str	eet /	Addre	ess					SEP 2 5 2018
DEP Initial						dministration	Bldg,	County Ro	ute 516	
□ DOL □ Amended		20000000			Zip C NJ 07				AS	BESTOS CONTROL 8
					ntact				F1631	Telephone Number
☐ DCA ☐ Cancellation		Mr	. Fr	ank	Frazz	itta				732-360-4507
		F	AC	ILIT	Y INF	ORMATION				
Name of Facility Where Abatement is Taking Torre Administration Building	Place	(3)				Type of Facil		ION OUR O		
Street Address		9				School (Other than K		8
4207 Route 516										ings, homes, etc.)
						Square Feet		# of Floors		Bldg. Age
City (5) County (6)		ount	ty Co	ode (7)	4000		1		40+
Matawan Middlesex						Current Use	(Prior i	f being demo	olished)	
Name of Monitoring Firm Hired by Building Ox		2)		400	MAL	School			(0)	
Environmental Connection	vner (a	5)		ASC	M No.	Name of Aba Bristol Env			(9)	
Street Address						Street Addres		critai, iiio.		
120 North Warren Street						1123 Beave				V
City, State & Zip Code Trenton, NJ 08010						City, State & Bristol, PA				
Project Manager for Monitoring Firm	Tele	pho	ne N	lumb	er	Telephone N			License	Number
Rollie Jones	609	-392	2-42	200		(215) 788-6	040		00509	110111001
Scheduled Start Date (10) Scheduled Co. 9/14/18		ion [5/18		(11)		Name of OSI Bristol Env				
Occupancy Status During Abatement (Check	only or	ne)	200			Street Addres	ss			
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr						1123 Beave				
Abatement Performed Outside of Norn Describe: 5:00PM to 1:30AM	nai H	ours	- /8	am to	3pm	City, State & Bristol, PA				
Facility Occupied During Abatement						Bristoi, I'A	13007			
Scope of Work (Check all that apply)						•				
≥3 sf or ≥3 lf		R	eno	vatio	n			Full Contain Mini-Enclosi		Negative Pressure
≥160 sf ≥260 lf				olition				Glove Bag F		
							200 200	_		on-Friable Procedure
Location of Asbestos-Containing		Loc				Description			Amount	Abatement Type
Material (ACM)		mall Solel				Asbestos-Con Material (A			(Specify SF or LF)	ш
TO BE ABATED	Mair	nten	ance	e or	2	(i.e., thermal s	ystéms		0. 0. 2. /	nca Re
in Facility (13)	Cus	todia (12		aff?	I	nsulation, surfactor or other miscelle	aneous	AT		Enclsoure Encapsulate Repair Removal
\	Yes			N/A		or ourse impoon	arroode	"		= ate e
Pipe Chase						ACM Pipe Fi	ttings		8 LF	
		1								
	14	1-	4	H						
	╁┼	┾	╬	H						
	Ħ	十	Ħ	ĦŦ						- - - - - - - - - -
Name of Registered Waste Hauler				EP W	Control of the Contro	Cubic Yards of Waste	Name	of Register	ed Landfill	
Service Transport Inc.		100	2099		25/15/2015	1/4 Cu Yd	Mine	rva Landfi	II	
City, State		-				Disposal Date	City, S			
New Castle, DE		1-	T:AI	State And		9/15/18	Wayı	nesburg, O	Н	
Completed By (Print or Type) Gino Pizzigoni			Fitle Proj	ect	-	Signature)		1001	Date
Cilio i izzigolii		100	-	ager	.	Dino P	My	igori/	19K	9/13/18
GI18205							10	0 /		

	2) (A)							BESTOS A C. 8:60 an			01.11#	£343	6		
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Date of Notification	⁽¹⁾ 9/13/18					of B		Owner / Oper	ator (2)	10,4	GE	Ш	\mathbb{V}	5
Agencies Notified	Type Notificati	ion		12000			ress								1/
□ EPA	N 1-141-1			-				AVENUE				SEP 2	5 2	2018	1
☐ DEP ☐ DOL		lad					& Zip								1
☑ DOH	☐ Emerg						ontact	I, NJ 08825			ASID	Telepho	26131	7.52/03	
DCA DCA	Cancel			1000000			ERRE	Ε			TCI.	202-25			
					FAG	CILI	TY INI	ORMATION							
Name of Facility Wh	ere Abatemen	t is Taking P	lace	(3)					ol (K-12	2)					
Street Address										3 (Other than k					
13 FRONT STREE	ΞT									ivate & comme				tc.)	
0.1 (2)	Т.							Square Fe		# of Floors		Bldg. Ag			
City (5)		County (6)		coun	ty C	ode	(7)	100		1		7	0 +		
FRENCHTOWN		IUNTERDO	IN						- 370	r if being demo	1.5				
NI	<u></u>			2)		1.5				SPACE/WAF					
Name of Monitoring CRITERION LABO			ner (8	8)		AS	CM No	BRISTOL	. ENVI	ent Contractor RONMENTA					
Street Address 400 STREET ROA	AD							Street Add		STREET					
City, State & Zip Coo BENSALEM PA 1				. 1.15-				City, State BRISTOL							
Project Manager for		m	Tele	epho	one	Num	ber	Telephone			License I	Number			
MIKE PANEPRES						300		215-788-6				0050	9		
Scheduled Start Dat 9/24/18	se (10) So	cheduled Cor		tion 26/1		e (11	1)	Name of O		lonitor RONMENTA	L INC				
Occupancy Status D	uring Abateme	ent (Check or	nly o	ne)				Street Add							
1000 mm	ed/Vacated Du	2.7						1123 BEA							
	Performed Outs	side of Norma	al H	ours	5 – 7	'am	to 3pm								
Describe:								BRISTOL	, PA 1	9007					
Scope of Work (Che	upied During A				-01										
acope of work (Cite	ck all that app	iy)								Full Contain	ment with I	Venative	Pres	SHIP	
≥3 sf or ≥3 lf				F	Ren	ovati	on		\boxtimes	Mini-Enclos		toganio		ouio	
≥160 sf ≥260			×			olitic				Glove Bag F					
									X	Non-Exemp			Pro	cedu	re
	cation of			s Lo				Descript			Amount	Aba	teme	ent T	уре
	os-Containing					lsed		Asbestos-C		ng	(Specify				
	erial (ACM) E ABATED			Sole		y ce or	.1	Material (i.e., therma		me	SF or LF)	R	חד	Enc	En
	Facility					taff?		insulation, sur				Remova	Repair	Encapsulate	Enclsoure
	(13)				2)			or other misc				val	Ħ.	ulat	ure
			Yes	N	lo	N/A							_	(b)	
Middle Bay - Men			Ц	L		\boxtimes		Vat/Ma			80 SF				
Main Entrance Ba						Ц		White p			8 SF		Ц	Ш	닏
Main Entrance Ba	-		닏			뭐	-	Pipe insu			3 LF		부	님	님
Rear Bay – Rear F	Room			12		님	-	White doo	or caul	lk	8 LF		님	님	님
			H	+	╣	님						ᆜH	님	님	믬
Name of Registered	Waste Hauler			14	NIII)ED	Masta	Cubic Yards	Nar	me of Register	od Landfill				Ш
					Нац	ıler l	D No.	of Waste		5.					
SERVICE TRANSI City, State	FURI GRUU	F, INC.			209	190		2 Disposal Date		NERVA LANI 7, State	UFILL				
NEW CASTLE, DE								TBD		YNESBURG	, OH 4468	38			
Completed By (Print					Title		N/00	Signature			02010	Date	40		
Patrick T. DeCaro	<u>.</u>				۲K	UJ.	MGR.	Patric	10. 7	DeCar	o/ Me	9/13/	18		

MCK Po) - (NOT		ATIO	N OF AS	New Jersey BBESTOS ABA ⁻ AC 8:60 and 5:1		DEC	E					
Date of Notification (1)					Name	e of Buildin	ng Owner/Operator	(2)							
	30 /	18			Ve	rizon Co	mmunications	and the second	U U SEP	25	201	3	11		
Agencies Notified	Type Notific	ation		17	Stree	t Address							1		
⊠ EPA					51	Old Led	gewood Road		ASSESTO	8 00	NTIN.	NI p	J		
⊠ DOLWD						State, Zip		L	1 17.		77				
⊠ DOH	Amendm	Section of the second			1 1172		IJ 07836					-2-			
DCA (NJAC 5:23-8)	☐ Emerger justificati		ciudin	g	Name	e of Conta	ct		Telephone Num	ber					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Cancella				Ma	rk Jenki	ns		215-365-587						
				31-22	FA	CILITY	NFORMATION								
Name of Facility Where A	batement is	Takino	Place	e (3)		OILIT I	THE ORIGINATION	Type of Facility	(4)						
Verizon Netcong C.		88						School (K-12	285089						
Street Address								☐ Subchapter 8	8 (Other than K-12	2)					
51 Old Ledgewood	Road							Other (i.e., p homes, etc.)	rivate and comme	rcial bu	uilding	js,			
City (5)								Square Feet	# of Floors	BI	ldg. A	ge			
Flanders, NJ 07836								+-10,000	1		+-50				
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)					
Morris								Verizon							
Name of Monitoring Firm				(8)	ASCM	No.	Name of Abatem	ent Contractor (9)							
USA Environmental	Managem	ent, I	nc.				BRISTOL EN	ENVIRONMENTAL, INC.							
Street Address							Street Address					7(B)((c)			
8436 Enterprise Ave	9						1123 BEAVE	EAVER STREET							
City, State, Zip Code							City, State, Zip C	ode							
Philadelphia, PA 19							BRISTOL, PA								
Project Manager for Monit	toring Firm			Tele	ephone	No.	Telephone No.	o. License No.							
Mark Jenkins						5-5870	215-788-6040		00509						
Start Date (10) 8 / 13 /					etion Da	ite (11)	Name of OSHA N	HA Monitor ENVIRONMENTAL, INC							
Occupancy Status During							Street Address	VIICONIIIENTA	NMENTAL, INC						
☐ Facility Closed/Vacate			Action of the second	0.00000000	ment		1123 BEAVE	DOTREET							
						scribe									
Time of Abatement:							City, State, Zip Co BRISTOL, PA								
Scope of Work (Check all	that apply)		Section 1				⊠ Full Con	tainment with Neg	ative Pressure						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re				☐ Mini-End	losure	,						
△ 5100 \$1 01 5200 II			□ ре	moliti	on			g Procedure mpted (*) and No	n-Friable Procedu	ire					
		100 II = 20 II	Is	Loca	tion	1		p.tod () dild 110	ii i nabio i roccae		atem	ant T	vne		
Location of	7. ()			Vorma			Description of	of			1		T		
Asbestos-Containing N TO BE ABA		1)		d Sol			estos Containing Ma		Amount	Remova	Repair	inca	Enclosure		
IN Facility				todial	Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	ova	¥	psu	nso		
(13)	5)			(12)	1		other miscellane		O. O. L.)	-		Encapsulate	- G		
Ice #7 Fios Room			Yes	No	N/A)/AT/84					<u> </u>		_		
Fios Maintenance Roc	om #6					VAT/M			350 SF						
SSADC Room #5	JIII #0					VAT/M			300 SF						
CFO Office #2		_	П			VAT/Ma			250 SF						
Name of Registered Waste	a Hauler				IJDEP I		Cubic Yards of	I Name of Desire	300 SF	\boxtimes		П	Ш		
SERVICE TRANSPO		, INC	:.	10.00	lauler II 20990	No.	Waste	Name of Regist							
City, State					20000		Disposal Date	City, State							
NEW CASTLE, DE							TBD	WAYNESB	URG, OH		•				
Completed By (Print or Type) Title							Signature		Da	ate					
Dillan DeCaro		Es	timat	or			Dillan	DeCaro/	me o	7-1	3-	18	e .		

MCCP9.	2		NOT		MOITA	OF ASI	ew Jersey BESTOS ABAT IC 8:60 and 5:1		DEG	E			0 1 1
Date of Notification (1)	30 /	18					g Owner/Operator ((2)	SEP	2 5	20	18	
Agencies Notified EPA DOLWD DOH	Type Notific Initial Amende Amendm	d	4-9/13	/18	51 City, \$	State, Zip C			ASPEST	08.0		Pr 4	8
DCA	☐ Emerger	ncy (in			2000	nders, N.							
(NJAC 5:23-8)	justificat	1.5				of Contac			Telephone Num				
	Cancella	ttion				rk Jenkin			215-365-587	0			
A1 5 F 104 104 A1		-		(0)	FA	CILITY IN	IFORMATION	T=	700				
Name of Facility Where Al Verizon Netcong C.0 Street Address 51 Old Ledgewood F	0.	Taking	g Place	(3)					2) 8 (Other than K-12 crivate and comme		uildin	gs,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	000000
Flanders, NJ 07836								+-10,000	1		+-50		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			
Morris								Verizon					
Name of Monitoring Firm I				(8)	ASCM	No.	Name of Abatem						
USA Environmental	Managem	ent, I	nc.				BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Street Address					->	-11310
8436 Enterprise Ave							1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip C						V=11111
Philadelphia, PA 191							BRISTOL, PA	19007					
Project Manager for Monit	oring Firm				phone		Telephone No.		License No.				
Mark Jenkins					15-365		215-788-6040		00509				
Start Date (10)		12	1 1	omple	tion Da	ite (11)	Name of OSHA N						
8/13/			N	10			BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During		*		A CONTRACTOR OF THE PARTY OF TH			Street Address						
☐ Facility Closed/Vacated ☐ Abatement Performed						!	1123 BEAVE						
Time of Abatement:						cribe	City, State, Zip C						
							BRISTOL, PA	A 19007					
Scope of Work (Check all to ≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	тпат арріу)			molitic	on		☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure				
Location o	.e		100	Locat Vorma			5			Ab	atem	ent T	ype
Asbestos-Containing M TO BE ABAT IN Facility (13)	laterial (ACN ED	Л)	Use Ma	d Sole intena	ely by		Description of stos Containing Ma , thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Room #1				П		VAT/Ma	etic		150 SF		1		
Construction PPM Roo	om #13					VAT/Ma			200 SF			H	
Hallway				П		VAT/Ma			320 SF				
Room 15				П		VAT/Ma			220 SF				
Name of Registered Waste	e Hauler			IN	JDEP \		Cubic Yards of	Name of Regis					
SERVICE TRANSPO		P, INC	.	Н	auler II	30000000000000000000000000000000000000	Waste	MINERVA					
City, State				_	20990)	Disposal Date	City, State			-		
NEW CASTLE, DE							TBD	WAYNESE	URG, OH				
Completed By (Print or Typ	oe)	Title			******		Signature			ate			
Dillan DeCaro	50%	1010072	stimat	or			Dillan	DeCaro	1 ()-	7-1	3-	18	
ASB-41 JAN 13 DD 1806 0		* 1	Do not	use th	is form	for asbesto	os licensure exemp	oted activities.					

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Date of Notification (1)	30 /	18					g Owner/Operator (2)		SEP 2	5 2	2018			
Agencies Notified	Type Notific	cation		21112	Street	t Address					-				
⊠ EPA					51	Old Ledg	gewood Road	Ī	-	ASPESTOS	γή-		1 /		
⊠ DOLWD		The same and the same	14014	0	City, S	State, Zip (Code								
☑ DOH ☐ DCA	Amenar ☐ Emerger	nent # <u>4-9</u>	111111111111111111111111111111111111111	8	Fla	nders, N	J 07836			27 W 52 - 154					
(NJAC 5:23-8)	justificat		inig		Name	of Contac	et		T	Telephone Numb	er				
	☐ Cancella	ation			Ma	rk Jenkir	าร			215-365-5870					
			//		FA	CILITY IN	NFORMATION								
Name of Facility Where A	Abatement is	Taking Pl	ace (3	3)				Type of Facilit	ty (4)	E					
Verizon Netcong C	.0.							School (K-	- Common						
Street Address										Other than K-12)					
51 Old Ledgewood	Road							homes, etc		ate and commerc	cial bu	ildin	gs,		
City (5)								Square Feet	J.,	# of Floors	BI	dg. A	ne.		
Flanders, NJ 07836								+-10,000	1 +-50						
County (6)		United States		_	Cour	nty Code (7	7)(STATE USE ONLY)	+-10,000 1 +-50 Current Use (Prior if being demolished)						_	
Morris	Morris						HOTHIE GOL ONET)	Verizon							
Name of Monitoring Firm	Hired by Buil	Idina Own	er (8)		ASCM	No	Name of Abateme								
USA Environmenta	10.75				7100W	140.	BRISTOL EN	and the state of t							
Street Address	· managem						Street Address	VINCINIVIENT	NTAL, INC.						
8436 Enterprise Av	۵						1123 BEAVE	CTDEET							
City, State, Zip Code	<u> </u>	-					The state of the s	STORY OF THE STORY							
	14.52						City, State, Zip Co								
Philadelphia, PA 19				T 1			BRISTOL, PA	19007							
Project Manager for Moni	itoring Firm				ephone		Telephone No.			License No.					
Mark Jenkins		0 1 1 1			15-365		215-788-6040			00509					
Start Date (10)8 /13 /		Scheduled A	d Con	nple	etion Da	te (11)	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC								
Occupancy Status During	Abatement ((Check on	ly one	e)			Street Address								
☐ Facility Closed/Vacate							1123 BEAVER	RSTREET							
Abatement Performed						cribe	City, State, Zip Co	de				-			
Time of Abatement: _	AIVI	PM/ <u>5</u> :	00PN	VI- <u>2</u>	:00AM		BRISTOL, PA	19007							
Scope of Work (Check all	that apply)						11/11/2007							-	
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		-	Reno Demo				☐ Mini-Encl	Procedure		ive Pressure Friable Procedure	•				
			Is Lo						T		T	atem	ent T	уре	
Location	77		No.		ally ely by	92,1529	Description of					-			
Asbestos-Containing I TO BE ABA			Maint				stos Containing Mat ., thermal systems i			Amount	Remova	Repair	nca	Enclosure	
IN Facilit		C			Staff?	(1.6	surfacing, VAT,			(Specify SF or LF)	ova	=	psu	unsc	
(13)				12)	N/A	-	other miscellaned	ous)		≥905 3800 TTÄD€	_		Encapsulate	e.	
Yes No									_						
Room 12															
LP Storeroom															
											П				
											П				
						EP Waste Cubic Yards of Name of Registered Landfill									
SERVICE TRANSPO		P, INC.		1	lauler ID	The state of the s									
City, State					20990		Disposal Data	1535-5100-01-050-023							
NEW CASTLE, DE							Disposal Date TBD	City, State	Diir	O O U					
Completed By (Print or Ty	ne)	Title					Signature	WAYNES	DUI						
Completed by (Fillt Of TV	pc)	LILLE					Dignature			Dat	0				

JAN 13 DD18060

Dillan DeCaro

Estimator

Signature

lan DeCaro/ De

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

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Date of Notification (1)			0.00				g Owner/Operator (2)		SEP 2	5 0	2019		1
7 / _	30 /	18			Ver	izon Cor	nmunications	-	17 L	OLI C	J	.010		-1
Agencies Notified	Type Notific	ation			Street	Address		-		ASHECTOR				
⊠ EPA		2			51	Old Ledg	jewood Road			Asimbo (1)			÷	
☑ DOLWD ☑ DOH	Amended Amendm		2-9/10	118	City, S	State, Zip (Code		de monte	representation of the second				- "
□ DCA	☐ Emergen			100000	Fla	nders, N	J 07836							
(NJAC 5:23-8)	justificati		oldanig		Name	of Contac	t		Te	lephone Numbe	er			
	☐ Cancellat	tion			Mai	k Jenkir	ns		1	215-365-5870				
	**************************************				FAG	CILITY IN	FORMATION							
Name of Facility Where A		Taking	Place	(3)				Type of Facility						
Verizon Netcong C.	.0.							School (K-1		horthan K 12)				
Street Address			2000					Subchapter Other (i.e.,		ner than K-12) e and commerc	ial bu	ildinas		
51 Old Ledgewood	Road							homes, etc					,	
City (5)								Square Feet	#	of Floors	Blo	dg. Ag	е	
Flanders, NJ 07836								+-10,000		1	.	⊦-50		
County (6)					Cour	ty Code (7	7)(STATE USE ONLY)	Current Use (P	rior if	being demolish	ed)			
Morris	Morris Name of Monitoring Firm Hired by Building Owner (8)							Verizon						
				8)	ASCM	No.	Name of Abateme							
USA Environmenta	nc.					NVIRONMENTAL, INC.								
Street Address							Street Address							
8436 Enterprise Av					1123 BEAVE	R STREET	ET							
City, State, Zip Code							City, State, Zip Co							
Philadelphia, PA 19	Part of the second						BRISTOL, PA	19007						
Project Manager for Moni	itoring Firm				phone		Telephone No.		L	icense No.				
Mark Jenkins					5-365		215-788-6040			00509				
Start Date (10)	10000000					te (11)		me of OSHA Monitor						
8 / _13_ /	18	1	0_ /	1	_ / -	18	BRISTOL EN	VIRONMENTA	AL, IN	IC .				
Occupancy Status During	Abatement (Check	only o	ne)			Street Address							
☐ Facility Closed/Vacate	1000						1123 BEAVER	RSTREET						- 1
						cribe	City, State, Zip Co	ode						
Time of Abatement			m <u>5.00</u>	- IVI- <u>Z.</u>	OUAIVI		BRISTOL, PA	19007						
Scope of Work (Check all	that apply)						N 5		41	D				
☐ >3 sf or >3 lf			⊠ Re	novati	on		☐ Mini-Enc	ainment with Ne losure	gative	e Pressure				
≥160 sf or ≥260 lf			☐ De				☐ Glovebag	Procedure						
						1	☐ Non-Exe	mpted (*) and N	on-Fri	able Procedure	-		10875	
Location	of			Locat Iorma			Description o	£			Ab	ateme	nt Ty	/pe
Asbestos-Containing I		1)	Use	d Sole	ly by	Asbe	stos Containing Ma			Amount	Rer	Repair	Enc	Enc
TO BE ABA				intena odial S		(i.e	., thermal systems i	nsulation,		(Specify	Removal	bair	aps	Enclosure
IN Facilit (13)	У		Ousi	(12)	man:		surfacing, VAT, other miscellane			SF or LF)	<u> 22</u>		Encapsulate	ure
(/			Yes	No	N/A			, ac,					6	
Ice #7 Fios Room					\boxtimes	VAT/Ma	estic			350 SF	\boxtimes			
Fios Maintenance Room #6						VAT/Ma	estic			300 SF				
SSADC Room #5					\boxtimes	VAT/Ma	stic			250 SF	\boxtimes			
CFO Office #2					\boxtimes	VAT/Ma	stic			300 SF	\boxtimes			
Name of Registered Wast	e Hauler				JDEP V		Cubic Yards of	Name of Regi	stere	d Landfill				
SERVICE TRANSPO	RT GROUP	, INC	: .	1	auler ID 20990		Waste	MINERVA	LAN	DFILL				
City, State							Disposal Date	City, State						
NEW CASTLE, DE						TBD	WAYNES	BURG	G, OH					
Completed By (Print or Type) Title						Signature			Date		1			
Dillan DeCaro		Es	stimat	or						1-1	P			
							MARKINI	1 2000	~	1 //	, ,	. 1	V	

19.2			NOT				BESTOS ABA AC 8:60 and 5:1		01.1.7	2		2 U	22	
Date of Notification (1)									THE PO	C	77	MT:		
	30 /	18	1		1000000		ng Owner/Operator mmunications	(2)			<u> </u>	/ _A /	5	
Agencies Notified	Type Notifi	cation			Stree	et Address			111111111111111111111111111111111111111		- 0	240		
⊠ EPA					51	Old Ledg	gewood Road		III III SEF	2	5 21	718		
⊠ DOLWD		110000	0 014		City,	State, Zip	Code						- 1	
⊠ DOH	Amendr				8736	anders, N			ASPEST	03.0	16 75 81	13431		
☐ DCA (NJAC 5:23-8)	☐ Emerge justifica		cludin	g		e of Contac			Telephone Num				400	
(140/10 0.20 0)	☐ Cancella					ark Jenkir	•		215-365-587			****		
							NFORMATION		213-363-367	U			777000	
Name of Facility Where A	batement is	Taking	Place	e (3)				Type of Facility	(4)			-	-	
Verizon Netcong C.	0.	7						School (K-12	J. 53					
Street Address				-				Subchapter 8	er 8 (Other than K-12) , private and commercial buildings,					
51 Old Ledgewood	Road									cial b	uildin	gs,		
City (5)				-				homes, etc.)						
Flanders, NJ 07836								Square Feet	# of Floors	В	ldg. A			
County (6)					10-	-4 0 - 1 - 1	N/07475 / 105 04# 14	+-10,000	1		+-50			
Morris					Cou	nty Code (/	7)(STATE USE ONLY)	Lancas and the second	or if being demolis	hed)				
				-7-5/1				Verizon						
Name of Monitoring Firm				(8)	ASCN	No.	Name of Abateme							
USA Environmental Management, Inc. Street Address							BRISTOL EN	VIRONMENTAL	_, INC.					
							Street Address							
8436 Enterprise Ave					1123 BEAVE	R STREET								
City, State, Zip Code							City, State, Zip Co	ode						
Philadelphia, PA 19							BRISTOL, PA	19007						
Project Manager for Monit	oring Firm			Te	lephone	No.	Telephone No.		License No.					
Mark Jenkins				2	215-36	5-5870	215-788-6040	040 00509						
Start Date (10)		Sched	uled C	ompl	etion Da	ate (11)	Name of OSHA M	Monitor						
_ 8 / _13 /	18	_1	0_ /		1/	18	BRISTOL EN	NVIRONMENTAL, INC						
Occupancy Status During	Abatement	(Check	only	one)			Street Address							
☐ Facility Closed/Vacated							1123 BEAVER	R STREET						
Abatement Performed							City, State, Zip Co	ode						
Time of Abatement:	AM	PN	1/5:00	PM-2	2:00AM		BRISTOL, PA							
Scope of Work (Check all	that apply)				A Sallacio									
☐ >3 sf or >3 lf			N D					ainment with Neg	ative Pressure					
			⊠ Re	nova molit			☐ Mini-Enci	osure Procedure						
							☐ Non-Exer	mpted (*) and Nor	n-Friable Procedur	е				
	355			Loca						T -	atem	ent T	vne	
Location o		S0 1		Norm:			Description of	f			7		-	
Asbestos-Containing M TO BE ABAT		/1)			ely by ance/		stos Containing Mat		Amount	em	Repair	nc	inc	
IN Facility					Staff?	(i.e.	 thermal systems i surfacing, VAT, 		(Specify SF or LF)	Removal	air.	sde	Enclosure	
(13)		-		(12))		other miscellaned		Of Of Elij	=		Encapsulate	Te	
			Yes	No	N/A							е		
Room #1					\boxtimes	VAT/Ma	stic		150 SF					
Construction PPM Roo	om #13				\boxtimes	VAT/Ma	stic		200 SF					
Hallway					\boxtimes	VAT/Ma	stic		320 SF					
Room 15					\boxtimes	VAT/Ma	stic		220 SF		П	П	П	
Name of Registered Waste	Hauler			1,000	NJDEP I		Cubic Yards of	Name of Regist	ered Landfill					
CERTICE TRANSFORT GROOF, INC.					lauler II 20990	2000	Waste	MINERVA L						
City, State							Disposal Date	City, State			2225	A 11.000		
NEW CASTLE, DE							TBD	WAYNESBU	JRG, OH					
Completed By (Print or Type) Title							Signature		Dat	e				
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7 / 3	0 / _	18		V	erizon Co	mmunications		. 114			C/
	pe Notificat	ion		Stre	et Address				>==		
	Initial			5	1 Old Led	gewood Road		THE S	SEP :	25	2018
☑ DOLWD ☑	Amended Amendmer	+ #2 014	0/40		, State, Zip						
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(NJAC 5:23-8)	justification	1)	iig		ne of Conta			Telephone N	- J H	to constant	
	Cancellatio	n		M	ark Jenki	ns		215-365-5			
				F	ACILITY II	NFORMATION		210-000-0	7070		
Name of Facility Where Abat	ement is Ta	king Pla	ce (3)		.0121111	THE OTHER PROPERTY.	Type of Facility	v (4)			
Verizon Netcong C.O.		Ü					School (K-1				
Street Address			-				☐ Subchapter	r 8 (Other than K-	-12)		
51 Old Ledgewood Ro	ad						Other (i.e.,	private and comr	nercial	buildir	ıgs,
City (5)							homes, etc				
Flanders, NJ 07836							Square Feet	# of Floors	1	Bldg. A	
County (6)				I Co	inty Codo /	7)(STATE USE ONLY)	+-10,000	1		+-50)
Morris				1000	inty Code (I J(STATE USE UNLY)	AND COMMON	Prior if being dem	olished))	
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USA Environmental Ma			(0)	ASUN	I INO.	Name of Abateme					
Street Address	anagemen.	i, 1116.					VIRONMENTA	AL, INC.			
8436 Enterprise Ave						Street Address					
City, State, Zip Code						1123 BEAVE					
Philadelphia, PA 19153						City, State, Zip Co					
						BRISTOL, PA	19007				
roject Manager for Monitorin	g Firm			ephone		Telephone No.		License No.			
Mark Jenkins			2	15 26	5-5870	245 700 0040	38-6040 00509				
test Data (40)	1-							00509			
		eduled (Comple	etion D	ate (11)	Name of OSHA M	onitor				
8 /13 /18	8	10	Comple /1	etion D	ate (11)	Name of OSHA M BRISTOL EN					
8 / 13 / 18 Decupancy Status During Aba	8	10 eck only	Completion (etion D	ate (11)	Name of OSHA M BRISTOL EN	onitor VIRONMENTA				
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State of New Jersey

		NOT				BESTOS ABAT C 8:60 and 5:16		MEGE	<u>J</u>	W/	Æ	7	
Date of Notification (1)				Name	of Building	g Owner/Operator (2	2)		5 U	W.		7	
	30 / 18	3		Ver	izon Con	nmunications		050					
Agencies Notified ⊠ EPA	Type Notification ⊠ Initial				Address			SEP 2	5	2018	-		
☑ DOLWD	☐ Amended					ewood Road	-		918 11 11 21				
☑ DOH	Amendment #	2-9/5/1	8		State, Zip C			ASSISTED					
☐ DCA	☐ Emergency (in	ncluding			nders, N.		-1				ā		
(NJAC 5:23-8)	justification) Cancellation				of Contac	A		Telephone Numb					
	Cancellation				rk Jenkin			215-365-5870					
Al 6 E 10 140 A		51	(0)	FAG	CILITY IN	IFORMATION							
Name of Facility Where A		g Place	(3)				Type of Facility						
Verizon Netcong C.	U. 						☐ School (K-1	8 (Other than K-12)					
Street Address	Dand					*	Other (i.e.,	private and commerc	ial bu	ilding	S,		
51 Old Ledgewood	Koad	-			-		homes, etc						
City (5)							Square Feet	# of Floors	- 1	dg. Ag	ge		
Flanders, NJ 07836				Το		VOTATE 1105 011114	+-10,000	1		+-50			
County (6) Morris				Coun	ity Code (/)(STATE USE ONLY)		rior if being demolish	ned)				
Name of Monitoring Firm	Hirad by Building	Owner /	0\ T	ASCM	Na	Name of Abotem	Verizon						
USA Environmental	1.50	- 2	0)	ASCIVI	INO.	Name of Abateme		(1)					
Street Address	management,					Street Address	VIICOMMENTA	AL, ING.					
8436 Enterprise Ave	1					1123 BEAVER	RSTREET						
City, State, Zip Code						City, State, Zip Co				_	-		
Philadelphia, PA 19	153					BRISTOL, PA							
Project Manager for Monit			Tele	phone l	No.	Telephone No. License No.							
Mark Jenkins				5-365		215-788-6040 00509							
Start Date (10)	Sche	duled C	omple	tion Da	te (11)	Name of OSHA M	lonitor						
8 /13 /	18 **	10_/	1	/	18	BRISTOL ENVIRONMENTAL, INC							
Occupancy Status During	Abatement (Chec	k only c	ne)			Street Address							
☐ Facility Closed/Vacate						1123 BEAVER	R STREET						
Abatement Performed					cribe	City, State, Zip Co	ode				-		
Time of Abatement:	AMP	M/ <u>5:00</u>	PM- <u>2:</u>	00AM		BRISTOL, PA	19007						
Scope of Work (Check all	that apply)												
☐ >3 sf or >3 lf		⊠ Re	novati	on				egative Pressure					
≥160 sf or ≥260 lf		-	molitic			☐ Glovebag	Procedure						
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Asbestos-Containing N		Use	d Sole	ly by	Asbe	Description o stos Containing Mar		Amount	Rer	Repair	Enc	E	
TO BE ABA	-		intena odial S			., thermal systems i	insulation,	(Specify	Removal	oair	caps	Enclosure	
IN Facility (13)	у		(12)	J		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	иге	
		Yes	No	N/A							Ö		
Ice #7 Fios Room					VAT/Ma	stic		350 SF					
Fios Maintenance Roo			VAT/Ma	stic		300 SF	\boxtimes						
SSADC Room #5				\boxtimes	VAT/Ma	stic		250 SF					
CFO Office #2					VAT/Ma	stic		300 SF					
Name of Registered Wast			100000	JDEP V		Cubic Yards of	Name of Reg	istered Landfill	-				
SERVICE TRANSPO	RT GROUP, IN	C.	"	auler ID 20990		Waste	MINERVA	LANDFILL					
City, State			-			Disposal Date	City, State						
NEW CASTLE, DE					//dama-	TBD	WAYNES	BURG, OH					
Completed By (Print or Ty			,			Signature	000	/ Dat	e ,	1			
Dillan DeCaro	E	stimat	or			Dillan	. D'Car	i/-il	9/	5/,	18		
ASB-41 0019061	2	Wes						1/		/	-		

ASB-41
JAN 13 DD/8060* Do not use this form for asbestos licensure exempted activities.

* $\rightarrow VOTE$: BACKON SITE 9/5/18

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Date of Notification (1) 7 / 30				Nam	e of Buildin	g Owner/Operator (2)					
7 / 30	/18	3				mmunications	-)	SEP 2	5 2	018		1
Agencies Notified Type I	Notification			Stree	et Address							
				2000000		gewood Road	ļ	Arthrensey				
	ended				State, Zip (10	
	endment #				anders, N			the second second				
DCA Em	ergency (in tification)	ncludin	9		e of Contac			Telephone Numi	205			
	ncellation			100000000000000000000000000000000000000	rk Jenkir			215-365-587				
				E	CILITYIA	NFORMATION		210-000-007				
Name of Facility Where Abateme	nt is Takin	a Place	(3)	T F	CILITIN	NFORMATION	Type of Facility	(4)				
Verizon Netcong C.O.	io i citiii	9 1 1000	(0)				School (K-1					
Street Address							☐ Subchapter	r 8 (Other than K-12))			
51 Old Ledgewood Road							Other (i.e., homes, etc	private and commer	cial b	uildin	gs,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Flanders, NJ 07836							+-10,000	1		+-50		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (F	Prior if being demolis	hed)			
Morris							Verizon					
Name of Monitoring Firm Hired by			(8)	ASCN	l No.	Name of Abateme		33V				
USA Environmental Mana	gement,	nc.				BRISTOL EN	VIRONMENTA	AL, INC.				
Street Address 8436 Enterprise Ave						Street Address			-35			
City, State, Zip Code						1123 BEAVE						
Philadelphia, PA 19153						City, State, Zip Co						
Project Manager for Monitoring Fi	irm		Tal		NI-	BRISTOL, PA	19007					
Mark Jenkins				ephone	NO. 5-5870	Telephone No.		License No.				
Start Date (10)	School	lulad C			ate (11)	215-788-6040		00509				
<u>8</u> / <u>13</u> / <u>18</u>						Name of OSHA M		N. INC				
Occupancy Status During Abatem	1. 350					BRISTOL EN	VIRONWENTA	AL, INC				
☐ Facility Closed/Vacated During				mont		Street Address						
	of Normal	Facility	/ Hou	ırs - De	scribe	1123 BEAVER						
Time of Abatement:AN	/IPI	и/ <u>5:00</u>	PM- <u>2</u>	2:00AM		City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that app	oly)											
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		⊠ Re □ De			T.	☐ Mini-Encl ☐ Glovebag	osure Procedure	egative Pressure on-Friable Procedur				
		Is	Loca	tion		_	() 4.14 ()	This is a second	1	atem	ont T	
Location of			lorma	ally ely by		Description of				-		T .
Asbestos-Containing Material TO BE ABATED	(ACM)			ance/	Asbes	stos Containing Mat ., thermal systems i	erial (ACM)	Amount	em	Repair	nca	ncl
IN Facility		Cust		Staff?	(1.6.	surfacing, VAT,		(Specify SF or LF)	Remova	ai-	psu	Enclosure
(13)		Yes	(12) No	N/A		other miscellaned	ous)	,	-		Encapsulate	Te
Room #1				\boxtimes	VAT/Ma	stic		150 SF				
Construction PPM Room #13	3				VAT/Ma	stic		200 SF				
Hallway					VAT/Ma	stic		320 SF		П	П	П
				П							$\overline{}$	
Name of Registered Waste Hauler			200	NJDEP 1	Naste	Cubic Yards of	Name of Regi	stered Landfill				Ш
SERVICE TRANSPORT GR	OUP, INC	: .	H	lauler II	7-3 DECEMBER 19	Waste		LANDFILL				
City, State				20990)	Disposal Date	City, State					
NEW CASTLE, DE						TBD	WAYNESE	BURG OH				
Completed By (Print or Type)	Title					Signature		none and an annual				
Dillan DeCaro	100000	stimat	or			Dille	n De Ca	w/yl g	/	-/,	18	-

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17 v. 18 - common com 1	-								

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Date of Notification (1)	12 14			- 1		ng Owner/Operator	(2)		- 104	1 (- /	201	U
7 / 30	/1	8		Ve	erizon Co	mmunications		-			ranne a li lige		
	Votificatio	n		Stree	et Address	, , , , , , , , , , , , , , , , , , ,			ACCES	200	C.Y.	- 1	1 L
⊠ EPA ⊠ Init	770			51	Old Led	gewood Road		kozer com					·
☑ DOLWD ☑ Am	ended endment	#1_8/2	0/49	City,	State, Zip	Code							
	ergency (Fla	anders, N	J 07836							
(NJAC 5:23-8) jus	ification)	moluum	19	Nam	e of Conta	ct		Telepho	ne Numi	ber			
☐ Car	cellation			Ma	ark Jenki	ns		E	365-587				
				FA	CILITY	NFORMATION							
Name of Facility Where Abateme	nt is Taki	ng Plac	e (3)				Type of Facility	(4)					
Verizon Netcong C.O.							School (K-12	50.00					
Street Address							Subchapter 8	Other th	an K-12)			
51 Old Ledgewood Road							Other (i.e., pr homes, etc.)	rivate and	commer	cial b	uildin	gs,	
City (5)							Square Feet	# of Flo	2010		lala. I		
Flanders, NJ 07836							+-10,000	1	JUIS	B	ldg. A		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being	demolis	hed)	1-00		
Morris							Verizon			,			
Name of Monitoring Firm Hired by	_		(8)	ASCM	No.	Name of Abateme	ent Contractor (9)						-
USA Environmental Manag	gement,	Inc.					VIRONMENTAL	., INC.					
Street Address						Street Address							
8436 Enterprise Ave						1123 BEAVE	R STREET						
City, State, Zip Code						City, State, Zip Co	ode						-
Philadelphia, PA 19153						BRISTOL, PA	19007						
Project Manager for Monitoring Fi	m		Tel	ephone	No.	Telephone No.		License	No.				
Mark Jenkins			190	15-365		215-788-6040		0050	19				
Start Date (10)					te (11)	Name of OSHA M	- 1 al 1 de 15 5 16 de 7 al 1 de 16 de 16 de 16 al 16 al 16 al 16 al 16 de 16 d						
8 / 13 / 18				04		BRISTOL EN	VIRONMENTAL	, INC					
Occupancy Status During Abatem				=***		Street Address				-			-
☐ Facility Closed/Vacated During	Entire Pe	eriod of	Abate	ment		1123 BEAVER	RSTREET						
Abatement Performed Outside Time of Abatement:AM	of Norma	M/5.00	y Hou	rs - Des	scribe	City, State, Zip Co	de						
			21 1VI <u>2</u>	.00/101		BRISTOL, PA	19007						
Scope of Work (Check all that app	ly)					N F. 11 Ct							
≥3 sf or ≥3 lf			novati			☐ Mini-Encl	ainment with Nega	ative Press	sure				
≥160 sf or ≥260 lf		☐ De	molitic	on		☐ Glovebag	Procedure						
		I le	Locat	ion		□ Non-Exer	npted (*) and Non	-Friable P	rocedure	=			
Location of		1	Vorma			Description of				Ab	atem	ent T	уре
Asbestos-Containing Material (ACM)		d Sole		Asbe	stos Containing Mat		Amou	ınt	Re	Re	En	m
TO BE ABATED IN Facility			intena todial			., thermal systems in	nsulation,	(Spec	cify	Removal	Repair	cap	Enclosure
(13)			(12)	otan.		surfacing, VAT, other miscellaned		SF or	LF)	/al		Encapsulate	sure
		Yes	No	N/A		other miodellance	100)					ate	
Ice #7 Fios Room				\boxtimes	VAT/Ma	stic		350 \$	SF.	\boxtimes	П	П	
Fios Maintenance Room #6					VAT/Ma	stic		300 8	SF.				
SSADC Room #5					VAT/Ma	stic		250 8					
CFO Office #2			П		VAT/Ma			300 8					
Name of Registered Waste Hauler			I N	JDEP V	The second second	Cubic Yards of	Name of Registe				Ш	Ш	Ш
SERVICE TRANSPORT GRO	UP, INC	D.	H	auler ID	No.	Waste	MINERVA LA						
City, State				20990		Disposal Date	City, State						
NEW CASTLE, DE						TBD	WAYNESBU	RG OH					
Completed By (Print or Type)	Title					Signature		, 011	I Dat				
Dillan DeCaro		stimat	or				De Caro	1001	Date		d	./0	>
CD 44						1 Weller	Decarro,	1/1	- 8	-1	0-	10	

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Date of Notification (1)	0 /	18			- 1		ing Owner/Operator	(2)	- Care		SEI	P 2	5 2	018	
					V	erizon Co	mmunications				-				
Name .	ype Notifio I Initial	cation				et Address				AS	SEET	00	KW	777	1.8
	Amende	ed					gewood Road		L						
⊠ DOH	Amendn	nent #1	-8/20)/18	1000	, State, Zip									
] Emerger	ncy (inc	ludin	g	-	anders, f									
(NJAC 5:23-8)	justificat Cancella					ne of Conta ark Jenki	W.				ne Num				
		0011	_						2	15-36	65-587	70			
Name of Facility Where Abat	tement is	Tokina	Disas	(2)	F	ACILITY I	NFORMATION	-							
Verizon Netcong C.O.		raking	Place	(3)				Type of Facility	400000000						
Street Address								School (K-1)	2) 8 (Otl	ner the	n K.11	2)			
51 Old Ledgewood Ro	ad							Other (i.e., phomes, etc.	rivate	and c	comme	rcial b	ouildir	gs,	
City (5)		-	- 100					Square Feet		of Floo	ors	TE	Bldg. A	100	
Flanders, NJ 07836								+-10,000		1	,,,		+-5(
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if I	peina d	demoli	shed)	50		
Morris								Verizon							
Name of Monitoring Firm Hire				8)	ASCN	No.	Name of Abatem	ent Contractor (9)							-
USA Environmental Ma	anageme	ent, Ind	Э.				BRISTOL EN	VIRONMENTA	L, IN	C.					
Street Address				15.15			Street Address			-					
8436 Enterprise Ave							1123 BEAVE	R STREET							
City, State, Zip Code							City, State, Zip Co								
Philadelphia, PA 19153				1			BRISTOL, PA	19007							
Project Manager for Monitorin Mark Jenkins	ig Firm			1	ephone		Telephone No.	3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3	Lie	cense	No.				
Start Date (10)		Schedule	od C			5-5870	215-788-6040			00509	3				
_8 / _13 / _18	8	01	1	L	1010	(11) (0)	Name of OSHA M BRISTOL EN	lonitor VIRONMENTAI	_, IN	С					
Occupancy Status During Aba							Street Address								
Facility Closed/Vacated Du	uring Entir	re Perio	d of A	Abate	ment		1123 BEAVER	R STREET							
Abatement Performed Outs Time of Abatement:	Side of No _AM	ormal Fa PM/ <u>5</u>	cility :00F	Hou M- <u>2</u>	rs - De: :00AM	scribe	City, State, Zip Co		3 - 2 - 3 - 3						
Scope of Work (Check all that	apply)					,	BRISTOL, PA	19007							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Ren						ative	Pressi	ıre				
			Den	nolitio	on	ille and the second	☐ Glovebag ☐ Non-Exer	Procedure npted (*) and Nor	n-Fria	ble Pro	ocedur	e			
1				ocat								Ab	atem	ent T	vpe
Location of Asbestos-Containing Mater	rial (ACM))			ly by	Ashe	Description of stos Containing Mat	erial (ACMA)				1000000			_
TO BE ABATED	,,				nce/ Staff?	(i.e.	, thermal systems in	nsulation.		Amour Specif		Removal	Repair	Encapsulate	Enclosure
IN Facility (13)				(12)	otan:		surfacing, VAT, other miscellaned	or		F or L		val	-	Insc	sure
		Y	es	No	N/A	1	other miscenariet	lus)						ate	· w
Room #1]		\boxtimes	VAT/Ma	stic		1	50 SI	F		П	П	П
Construction PPM Room a	#13				\boxtimes	VAT/Ma	stic		2	00 SI	F				
Hallway]]		\boxtimes	VAT/Ma	stic		3	20 SI	F				П
												П			$\overline{\Box}$
Name of Registered Waste Hau SERVICE TRANSPORT OF		INC			JDEP V		Cubic Yards of Waste	Name of Registe			ı			Ш	ш
City, State					20990			MINERVA L	AND	FILL					
NEW CASTLE, DE							Disposal Date TBD	City, State WAYNESBU	IRG.	ОН					
completed By (Print or Type)	1-	Title					Signature				Date	0			
Dillan DeCaro		Estin	nato	r				DeCaro	10	2		->	Λ-	10	

	*		NO.				SBESTOS AB AC 8:60 and 5		NT [[Cha	#	3	41	4
Date of Notification (1) 7 /	30 /	18	В				ng Owner/Operato	or (2)	The state of the s		ا_ جاا	1 /		7
Agencies Notified EPA 9395	Type Notific	cation		10		et Address Old Led	gewood Road		100	SEF	25	-20	8	11
DOLWD 9319 DOH \$206	Amende Amenda	nent#		_	City,	State, Zip	Code	******	and an all an al	ASBERT	ng cir		- 1 5	1
DCA (NJAC 5:23-8)	☐ Emerger justificat		ncludir	ng		e of Conta	a contract of the contract of		I	Telephone N		·		
(143/10/3.23-0)	☐ Cancella	- 5				ark Jenki				Telephone N 215-365-5				
							NFORMATION			210-305-5	0070			
Name of Facility Where A	Abatement is	Takin	n Plac	e (3)		ACILITT	NFORMATION	Type	of Facility (4)				
Verizon Netcong C.		, ann	9 1 100	· (0)				1 100000	nool (K-12)	9/2				
Street Address			· ·					── Sul	ochapter 8	(Other than K	(-12)			
51 Old Ledgewood	Road							· 🛛 Oth	ier (i.e., pri mes, etc.)	ivate and comi	mercial I	ouildi	ngs,	
City (5)				-				Square	TO LANCE OF THE PARTY OF THE PA	# of Floors	- 1	Olda	^	
Flanders, NJ 07836									0,000	1	1	3ldg. +-5	0.70	
County (6)	And the second second			-5.7	Cou	inty Code (7)(STATE USE ONLY		*	or if being dem	oliched	1000		
Morris						,	,,,,,,,,	Veri		or in being derin	ionsileu)			
Name of Monitoring Firm	Hired by Buil	lding (Owner	(8)	ASCN	1 No.	Name of Abate							
USA Environmental	Managem	ent, l	lnc.				BRISTOL E			INC.				
Street Address							Street Address					75 - TO 15		
8436 Enterprise Ave	Э						1123 BEAV	ER STRE	EET					
City, State, Zip Code		2.105					City, State, Zip	Code						
Philadelphia, PA 19	153						BRISTOL, F	A 19007						
Project Manager for Monit	toring Firm			Te	lephone	No.	Telephone No.			License No.				
Mark Jenkins					215-36	5-5870	215-788-604	10		00509				
Start Date (10)	15	Sched	iuled C	Comp	letion Da	ate (11)	Name of OSHA	Monitor						
_8 / _13 / .	18	8	8_ /	3	31 /	18	BRISTOL E	NVIRON	MENTAL	, INC				
Occupancy Status During	Abatement (Check	k only	one)			Street Address							
☐ Facility Closed/Vacated							1123 BEAV	ER STRE	ET					
Abatement Performed Time of Abatement:	Outside of No AM	ormal PN	Facilit /// <u>5:00</u>	y Ho PM-	urs - De: 2:00AM	scribe	City, State, Zip (
Scope of Work (Check all	that apply)						DIGITOL, I	A 13007	-					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	11.405.4		⊠ Re				☐ Mini-Er ☐ Gloveb	iclosure ag Proced	lure	ative Pressure				
			Is	Loca	ation	T		empted () and Non-	-Friable Proce				
Location of				Vorm			Description	of				-	nent T	1
Asbestos-Containing M TO BE ABAT		1)			lely by ance/	Asbe	stos Containing M	aterial (A	CM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility				todia	Staff?	(1.6	., thermal systems surfacing, VA		n,	(Specify SF or LF)	lova	a-	apsı	losu
(13)		1		(12	1	-	other miscellan	eous)		0. 0. 2. /	-		late	le l
Ice #7 Fios Room			Yes	No	N/A	VAT/Ma	stic			350 SF				
Fios Maintenance Roo	m #6					VAT/Ma			-			1		
	111 #0			_						300 SF				
SSADC Room #5						VAT/Ma				250 SF				
CFO Office #2				Ц		VAT/Ma				300 SF				
Name of Registered Waste SERVICE TRANSPOR		, INC		1.00	NJDEP N Hauler II 20990	O No.	Cubic Yards of Waste			red Landfill ANDFILL				
City, State					20000		Disposal Date	City, S	tate					
NEW CASTLE, DE							TBD	- 1 - 5 to	YNESBU	RG, OH				
Completed By (Print or Typ	e)	Title					Signature				Date			
Dillan DeCaro		Es	timat	or				u D	eCano	/gr /	7-	30	-18	>

Page 2

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Date of Notification (1)	18	3		19		ng Owner/Operator mmunications	(2)			5 U	201 10000 2014040	
Agencies Notified Type Noti	fication				et Address			SE SE	EP 2	2 5	201	8
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☑ DOH Amend	lment #		_		State, Zip			ASIBES	STOS	00	N 7 1 1 1 1	71 R
□ DCA □ Emerg		ncludin	ng		anders, N				115			/ / O
(NJAC 5:23-8) justific					e of Conta	TX.		Telephone Num		W214-57	- Inguistration	CV-Line and
Cance	liation			IVIE	ark Jenki	ns		215-365-587	0	77		
	P20122-2212			FA	CILITY	NFORMATION						
Name of Facility Where Abatement i	s Takin	g Plac	e (3)				Type of Facility	1				
Verizon Netcong C.O.							School (K-12	2)				
Street Address 51 Old Ledgewood Road							Other (i.e., p	8 (Other than K-12 rivate and commer) rcial b	uildin	gs,	
City (5)							Square Feet	# of Floors	TR	ldg. A	100	
Flanders, NJ 07836							+-10,000	1	1	+-50		
County (6)				Cou	nty Code (7)(STATE USE ONLY)		ior if being demolis	hod)	00	/ :	
Morris					,		Verizon	ior ii being demons	ileu)			
Name of Monitoring Firm Hired by Bu	uilding C	Owner	(8)	ASCM	l No.	Name of Abateme	ent Contractor (9)					
USA Environmental Manager	1773				1.01.50		VIRONMENTAL					
Street Address	•					Street Address	THO THIND THE	L, 1110.				
8436 Enterprise Ave						1123 BEAVE	RSTREET					
City, State, Zip Code						City, State, Zip Co						
Philadelphia, PA 19153						BRISTOL, PA						
Project Manager for Monitoring Firm			Te	ephone	No.	Telephone No.		License No.				
Mark Jenkins			2	15-365	5-5870	215-788-6040		00509				
Start Date (10)	Sched	luled C	ompl	etion Da	ate (11)	Name of OSHA M	lonitor		1757			
_8 / _13 / _18_				1_/	18	BRISTOL EN	VIRONMENTAL	L, INC				
Occupancy Status During Abatement						Street Address						
☐ Facility Closed/Vacated During Er ☐ Abatement Performed Outside of						1123 BEAVE						
Time of Abatement:AM	PN	// <u>5:00</u>	PM-2	:00AM	scribe	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that apply)						⊠ Full Cont	ainment with Neg	ative Pressure				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re				☐ Mini-Encl	osure Procedure	n-Friable Procedure				
		Is	Loca	tion	1		Tipica () and No.	i-riiable Procedur	1			
Location of			Norma			Description of	f			atem	T	уре
Asbestos-Containing Material (AC	M)			ely by ance/	Asbe	stos Containing Mat	erial (ACM)	Amount	Removal	Repair	Enc	Enclosure
TO BE ABATED IN Facility				Staff?	(I.e	., thermal systems i surfacing, VAT,		(Specify SF or LF)	VOL	ai-	aps	losi
(13)	-		(12)	_		other miscellaned		SF OI LF)	1 20		Encapsulate	JI'e
Room #1		Yes	No	N/A	VAT/Ma	entia			_	_	Ф	
Construction PPM Room #13					VAT/Ma	45 (1000)		150 SF				
Hallway					VAT/Ma			200 SF				
					VAIIIII	SUC		320 SF				
Name of Registered Waste Hauler				JDEP V	Nacto	Cubic Yards of	Nome of Decid			Ш	Ш	
SERVICE TRANSPORT GROU	P, INC			lauler IE	No.	Waste	Name of Registe MINERVA L					
City, State				20990		Disposal Date	City, State					
NEW CASTLE, DE						TBD	WAYNESBL	JRG, OH				
Completed By (Print or Type)	Title					Signature		Date	9	-		
Dillan DeCaro	Es	timat	or				DeCaro	190 T)-3	0-	18	>

chuk# 3435

Date of Notification (1)					Name	of Building	g Owner/Operator (2)		3 F	ם ב	7.7	
9 /	13 /	18	_				stwood Co		ID)E	7 [W	
Agencies Notified	Type Notifica	ation	-		Street	Address			IM				
⊠ EPA					175	Broadw	ay		IIIIII CE	p :	5	201	Ω
⊠ DOLWD	☐ Amended				City, S	State, Zip C	Code		11111 01		<u> </u>	CUI	0
⊠ DOH	Amendme		ludia a		Hill	sdale, N.	J 07642			T THE SAME IN	Section 1		
DCA (NJAC 5:23-8)	☐ Emergeno		luuing		Name	of Contac	t		Telephone Numb	erOS	CO	VIR	OL 8:
,	☐ Cancellati				Rer	nzo Cont	reras		973-951-0542	ICE.	VISIV	10	ATLANC.L.
					FA	CILITY IN	FORMATION						
Name of Facility Where A	Abatement is T	aking l	Place	(3)		012111111	ii Ortini trioit	Type of Facility ((4)				
Verizon Westwood				V-7				School (K-12	Sec.				
Street Address								☐ Subchapter 8	(Other than K-12)				
175 Broadway								Other (i.e., pr homes, etc.)	ivate and commerc	ial bu	ilding	js,	
City (5)				-11/11/0-E				Square Feet	# of Floors	Bl	dg. A	ae	
Hillsdale								32,775	3	- 1	+-50	3-	
County (6)					Cour	ity Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
Bergen								Verizon Con	nmunications				
Name of Monitoring Firm	Hired by Build	ling Ov	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
TTI Environmental,	Inc						BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address							Street Address			600			
1253 North Church	Street						1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode	_				
Moorestown, NJ 08	057						BRISTOL, PA	19007					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Telephone No.		License No.				
Kris Smith				60	9-313	-8218	215-788-6040	ř.	00509				
Start Date (10)						te (11)	Name of OSHA N	lonitor		n-dar ditt			
10 / 1 /	18	11	/	2	/ .	18	BRISTOL EN	VIRONMENTAL	., INC				
Occupancy Status During	Abatement (C	Check	only c	ne)			Street Address						
☐ Facility Closed/Vacate							1123 BEAVE	R STREET					
Abatement Performed						cribe	City, State, Zip Co	ode					
Time of Abatement: _		PIVI/	5:00	PIVI-Z	UUAIVI		BRISTOL, PA	19007					
Scope of Work (Check al	I that apply)						57.5.0		. 2				
☐ ≥3 sf or ≥3 lf		ľ.	XI Re	novati	on			tainment with Neg losure	ative Pressure				
⊠ ≥160 sf or ≥260 lf				molitic				g Procedure					
							☐ Non-Exe	mpted (*) and Nor	n-Friable Procedure	1			
Location	of			Locat Norma			Description			Ab	atem	1	T
Asbestos-Containing		n	Use	d Sole	ly by	Asbe	Description o stos Containing Ma		Amount	Rer	Repair	Enc	Enc
TO BE ABA	ATED	"		intena todial			., thermal systems	insulation,	(Specify	Remova	air	aps	Enclosure
IN Facili	ty		Ousi	(12)	otan :		surfacing, VAT other miscellane		SF or LF)	<u>a</u>		Encapsulate	лге
()			Yes	No	N/A	1						(D)	
Basement Boiler Roo	om					Exterio	r Boiler Insulatio	on	90 SF				
Basement Boiler Roo	om				\boxtimes	Duct In	sulation		90 SF				
Basement Boiler Roo	om					Pipe Fit	ttings		60 LF				
Basement Boiler Roo	om				\boxtimes	Pipe Ins	sulation		315 LF				
Name of Registered Was	te Hauler			0.70	JDEP 1		Cubic Yards of	Name of Regis	tered Landfill				
SERVICE TRANSPO	ORT GROUP	, INC.	•	H	20990		Waste	MINERVA I	LANDFILL				
City, State			-126-11				Disposal Date	City, State		c=Firet			
NEW CASTLE, DE							TBD	WAYNESB	URG, OH				
Completed By (Print or T	ype)	Title					Signature	A SECTION AND A	Dat				
Dillan DeCaro		Es	tima	tor			Dillan	1 DeCaro	19n 9	-/-	3-1	18	

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(*)	F								60 and 5:1			É	W IS	P	F	7 1	// [9	
Date of Notification (1)					Nar	ne of	Building	g Own	er/Operator	(2)		Π	1-1-	<u> </u>	Ь	1	7 [-,
9 / _	13 /	18	_		V	erizo	on Wes	stwoo	od Co									1
Agencies Notified	Type Notifica	ation					ddress	2000				111	4	SEP	25	20	18	
⊠ EPA ⊠ DOLWD	☐ Initial				1	75 B	roadwa	ay				-						Market
☑ DOLWD	Amended Amendme	Z-100 mm			City	, Stat	te, Zip C	Code					ACD	ESTO	9.00	55.177	3231	J.,
□ DCA	☐ Emergen		cluding		H	illsd	lale, NJ	J 076	42				L(C)	18	TAIR		17.55	G:
(NJAC 5:23-8)	justification				Nan	ne of	Contact	t				Tele	phone	Numb	er	-0.7 4 -75	-	C.F.C.
	☐ Cancellat	tion			R	enzo	o Contr	reras				97	3-951	-0542				
					F	ACIL	LITY IN	IFOR	MATION					2500000000				
Name of Facility Where A	batement is T	Taking	Place	(3)						Ту	pe of Facility ((4)						
Verizon Westwood	C.O.										School (K-12)							
Street Address											Subchapter 8					:1-1:	_	
175 Broadway											Other (i.e., pr homes, etc.)		and cor	nmerc	iai bu	liaing	S,	
City (5)		EL HARRON								Sq	uare Feet	# 0	f Floors	3	Blo	lg. Ag	ge	
Hillsdale										3	32,775	3			4	50		
County (6)					Co	unty	Code (7)(STAT	E USE ONLY)	Cu	rrent Use (Pri	or if be	eing de	molish	ed)			
Bergen										1	/erizon Con	nmun	icatio	ns				
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)																		
TTI Environmental, Inc BRISTOL ENVIRONMENTAL, INC.																		
Street Address		et Address		1002 M Pres 14 - 14 10 H M M M M M M M M M M M M M M M M M M														
1253 North Church	Street							11	23 BEAVE	RS	TREET							
City, State, Zip Code		-2:01/2						City,	State, Zip C	ode								
Moorestown, NJ 08	057							BF	RISTOL, PA	A 19	007							
Project Manager for Moni	toring Firm			Te	lephon	e No).	Tele	phone No.			Lice	ense N	0.				\neg
Kris Smith					609-3	13-82	218	21	5-788-604	0		0	0509					
Start Date (10)		Sched	uled C	omp	letion [Date	(11)	Nam	e of OSHA	Monit	or							\neg
10 / _1_ /	18	1	1_ /		2_ /	1	18	BF	RISTOL EN	IVIR	ONMENTAL	., INC	:					
Occupancy Status During	Abatement (Check	only o	ne)				Stree	et Address					Hele beco				
☐ Facility Closed/Vacate								11	23 BEAVE	RS	TREET							
Abatement Performed							be	City,	State, Zip C	ode								
Time of Abatement: _	AM	PN	1/5:00	PM-	2:00A	M		BF	RISTOL, PA	A 19	007							
Scope of Work (Check all	that apply)								M = 110									
☐ >3 sf or >3 If			⊠ Re	nova	ation				☐ Mini-En		nent with Neg ire	ative F	ressu	re				
≥160 sf or ≥260 lf				moli					Gloveba									
						_			☐ Non-Exe	empte	ed (*) and Nor	n-Friat	ole Pro	cedure	-			
Location	-6				ation nally				Danadatian						Aba		ent Ty	/pe
Asbestos-Containing I	7.0	1)	Use	d Sc	olely by		Asbes		Description on taining Ma		al (ACM)	P	Amoun	t	Rer	Repair	Enc	Enc
TO BE ABA	TED				nance/ I Staff'	,		., then	mal systems	insu		(Specify	,	Removal	pair	aps	Enclosure
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(13)			Yes	No	1	A		Otri	er miscellane	eous,	'						te	
Basement Power Roc	om					V	/AT/Ma	stic				2,	200 S	F	\boxtimes			
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SERVICE TRANSPO		P, INC).		Hauler 209	IDN	20,000	Was	c Yards of te	IN	MINERVA L							
City, State								1.15	osal Date		ity, State							
NEW CASTLE, DE								TE	BD		WAYNESB	URG,	ОН					
Completed By (Print or Ty	/pe)	Title							Signature		0 0	,	<u></u>	Dat		_	1-	
Dillan DeCaro		Es	stimat	or					Della	en	De Car	0 /	Me	0	-/	3	18	

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Date of Notification (1) 9/20/18				of Buildir en Villa	g Owner/0	Operato	r (2)				SI	:p	25	201	10
Agencies Notified Type Notifica	tion			Address					in !	lank .	UL	-1	40	20	0
				S. Main	St.				-	AC	31350	1770			
∑ EPA	d		City, St	tate, Zip	Code				+	Ro	SBES			11/1/20	/ M A
× DOL Amenda	nent # ncy (includin		Many	/ille, NJ	08835						-14		11		
DOH justificati	on)	g	7-5-37	of Contac	ct					lephone					
DCA Cancella	tion			n Villa					90	08-295	5-754	48			
Name of Facility Where Abatement is Ta	aking Place	(3)	FAC	ILITY IN	FORMATI	ON	Tvr	oe of Facility (4)						
Store Front Business							I	0 5383							
Street Address							Н	School (K-1 Subchapter	8 (Oth	er than	K-12)			
202 S. Main St.							×	Other (i.e. p etc.)	orivate o	& comn	nercia	ıl bui	ldings	, hom	ies,
City (5) Manville							100000000	uare Feet	7.1	f Floors	5	V.	Bldg.		
ounty (6)			County	Code (7)			80		3		-11 1		70 +/	-	
Somerset			(STATE	USE ONL	n			rent Use (Pricore Front B			nolish	ed)			
lame of Monitoring Firm Hired by Buildi	ng Owner (8	3)	ASCI	M No.		Name	1577-0155	patement Con							
Project Manager								es Abateme		2050 di					
treet Address						Street									
ity, State, Zip Code						2000		fidland Ave	9.						
, sidio, 21p 0000								Zip Code Brook, NJ 0	7663						
roject Manager for Monitoring Firm			Telepho	ne No.	-	Teleph			7 000	Licens	se No	ß			
								-3184		0130		•			
lart Date (10) 10/6/18	Schedu 10/11		mpletion	Date (11)	Name	of OS	SHA Monitor							
ccupancy Status During Abatement (C	2000					Ctront	۸ ما ما م								
Facility Closed/Vacated During Enti						Street	Adare	ess							
Abatement Performed Outside of N Other – Describe:	ormal Facilit	y Hour	S			City, S	tate, 2	Zip Code						- C Toron (1977)	
cope of Work (Check All That Apply)		10-3										-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renova Demoli	ation tion			×	M	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					e	
		Locat											Abate	ement	
Location of Asbestos-Containing Material (ACM)		Norma ed Sole		A-b-		cription			2200	72	-		Т	ре	
TO BE ABATED		intena todial			stos Conta . thermal s	systems	insul			nount pecify		R	71	Enc	Ē
In Facility (13)		(12)	otan.		surfaci other mi	ng, VA		,	SF	or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A				,					/al	T.	ilate	ure
Bridal Shop		X			,	VAT			1.6	13 SF		×			
2nd FI Living Area		Х				VAT			100/11-00	3 SF	-	×			
2nd FI Hallway/Bedroom		X				VAT			500.00	0 SF	-	×			-0.50
2nd Fl Kitchen		Х		·		/AT				8 SF	-	×			
ime of Registered Waste Hauler	-	N	JDEP W		Cubic Y	ards		Name of R				•			
Stages Abatement			lauler ID 036592		of Wast	е		Grand C	200			Lan	dfill		
y, State addle Brook, NJ					Disposa TBD	I Date		City, State Pen Arg							
impleted by	Title				Sig	nature	11	/ /			Date				
ichard Cristofol	Pres	ident				111					9/20		3		

no ch			ICATIO	tate of Nev N OF ASB t to NJAC	ESTOS	ABATE					<u> </u>	<u>C</u> [V	6
Date of Notification (1) 9/19/2018				of Building ers Unive		Operator	(2)				S	EP	25	201	8
Agencies Notified Type Notification			Street /	Address (nightsbri		Suad	0.000		\dashv	A:	99E	STO'	(0)	riir)	(1) <u>B</u>
EPA Initial DEP X Amended Amendment #	+ 2		City, St	ate, Zip Co	de							i Ka	Maria	***	-
Emergency (in justification)	ncluding	,	900000000000	taway,N.	088	O4 			Tel	ephone	Nun	nher			
DCA Cancellation				Fritzen						8-445					
Name of Facility Where Abatement is Taking	Place (3)	FAC	ILITY INFO	ORMAT	ION	Туре	of Facility (4)						
Language Laboratory Bldg 3036 Street Address 20 Seminary Place				Die exal				School (K-1 Subchapter Other (i.e. p	2) 8 (Oth				dings	, hom	es,
City (5) New Brunswick								etc.) re Feet)	# 01	f Floors	,		ildg. A	Age	
County (6) Middlesex				Code (7) USE ONLY)				ent Use (Pri	or if bei	ng dem	olish	ed)			
Name of Monitoring Firm Hired by Building O ATC Group	wner (8)	ASCI	M No.		Name Yann	of Aba	tement Cor Environm	ntractor	(9) Servi	ces	Inc			-2
Street Address 3 Terri Lane						Street	Addre			-		1110.			
City, State, Zip Code Burlington, NJ 08016	Hallon Foot 1	050 P (05 + 5				City, S	tate, Z	ip Code NJ 07405							
Project Manager for Monitoring Firm		T	Telepho	ne No.		Teleph	one N	0.		Licen).			
			pletion	Date (11)		908-2 Name	33	HA Monitor		0122	.8				
10/1/2018 Occupancy Status During Abatement (Check	10/15/							Environm	ental	Servi	ces,	Inc.			
➤ Facility Closed/Vacated During Entire Pe	eriod of	Abatem	ent			Street /		is Ion Rd St	uite 10)2					
Abatement Performed Outside of Norma Other – Describe:	l Facilit	y Hours			_	2/11/2011		p Code NJ 07405	;						
Scope of Work (Check All That Apply)												-			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demoliti				×××	Min Glo	Containme i-Enclosure vebag Proc	edure						
	Is	Location	on				I INOI	n-Exempted	(*) and	Non-F	nable			e ement	
Location of Asbestos-Containing Material (ACM)		Normalled Sole				scription							Ту	ре	
TO BE ABATED In Facility (13)		intenar todial S (12)		(i.e. t	hermal surfa	taining Ma systems cing, VAT niscellane	insula Γ, or		(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
V. 11 D III -	Yes	No	N/A											ite	Ф
Mailbox Room, Womens Rest Room			X			VAT				03 sf		X			
Through out			X			TSI				00 If		X			
Corridor 100, Boiler Room			X		TS	I fitting	S		12	25 If		X			
& Bathroom Name of Registered Waste Hauler		LN	JDEP W	/to I	0.1.	V I-									
Yannuzzi Group, Inc.		Ha	auler ID 467		of Wa	Yards ste		Name of F Growa/							
City, State Kinnelon, NJ					Dispos	sal Date		City, State Fairless		PA					
Completed by John Mucha	Title Sr. P	roject	Mana			ignature	N				Date 9/1	9/20	18		
						100		3							

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

Print Form



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Date of Notification (1)	<i>u u</i>	L	محصا		Maria	(D. 11-11	0 10	:		- 120			-
9 /	20 /	18					ng Owner/Operator (ublic Library	(2)	11D) LE U			\mathbb{V}	
Agencies Notified	Type Notific	cation			Stree	t Address			I pres				- 11
☐ EPA ☑ DOLWD	Initial □ Amende						field Ave		∐ ∐ SE	P 2	5 %	2018	And the second second
☑ DOH	Amendr				City,	State, Zip	Code						
□ DCA	☐ Emerger		udino	1	Ca	ldwell, N	J 07006		ASBES	TOR	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	207375	
(NJAC 5:23-8)	justificat	ion)		,	Name	of Conta	ct		Telephone Num				1 10
	☐ Cancella	ation			Ma	tthew Ba	ittle		201-927-911	8			
					FA	CILITY II	NFORMATION						
Name of Facility Where A		Taking F	Place	(3)				Type of Facility (4	1)				
Caldwell Public Lib	rary							School (K-12)					
Street Address				7.7				☐ Subchapter 8 ☐ Other (i.e., priv	(Other than K-12) roial bu	ildin	~~	
268 Bloomfield Ave								homes, etc.)	vate and comme	Clai Di	allalli	y 5,	
City (5)								Square Feet	# of Floors	В	dg. A	ge	-
Caldwell		65						+-20,000	2		+-75		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Prio	r if being demolis	hed)			
Essex								Library					
Name of Monitoring Firm	CONTRACTOR SERVICE	ding Ow	mer (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Environmental Con	nection						BRISTOL EN	VIRONMENTAL,	INC.				
Street Address							Street Address						
120 North Warren S	treet						1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode					
Trenton, NJ 08608							BRISTOL, PA	19007					
Project Manager for Monit	toring Firm			Tele	phone	No.	Telephone No.		License No.	100	-		-
Dominick Dercole				60	9-392	-4200	215-788-6040		00509				
Start Date (10)		Schedule	ed Co	omple	tion Da	te (11)	Name of OSHA M	onitor					-
10 / _8_ /	18	_10	_ /	_ 26	_ /	18	BRISTOL EN	VIRONMENTAL,	INC				
Occupancy Status During	Abatement (Check o	nlv o	ne)			Street Address				1		
☐ Facility Closed/Vacated					nent		1123 BEAVER	STREET					
☐ Abatement Performed	Outside of No	ormal Fa	acility	Hour	s - Des	cribe	City, State, Zip Co						
Time of Abatement: 8:	<u>00</u> AM- <u>4:00</u> F	PM/	PN	Λ	AM		BRISTOL, PA						
Scope of Work (Check all	that apply)												-
☐ ≥3 sf or >3 If		×	7 Rer	novati	on			ainment with Nega	tive Pressure				
≥160 sf or ≥260 lf			= -	nolitic			Glovebag						
¥							Non-Exer Non-Exer	mpted (*) and Non-	Friable Procedur	е			
				Locat						Ab	atem	ent T	уре
Location of Asbestos-Containing N		1)		lormal d Sole	-	Acho	Description of		* 100 125 (1951 - 4 10	R	Z,	Ш	ш
TO BE ABAT				ntena			stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	ıcap	Clo
IN Facility	/		Custo	odial 8 (12)	Staff?		surfacing, VAT,	or	SF or LF)	val	-	Encapsulate	Enclosure
(13)		Y	/es	No	N/A		other miscellaned	ous)				ate	U
Basement Corner Offi	ces					ACM M	astic		625 SF				
Basement Server Roo	m					VAT & I	Vlastic		80 SF				
Basement Bathroom V	Vall				\boxtimes	ACM G	ue Daubs		20 SF	\boxtimes			
Basement Janitors Cla	oset				\boxtimes	VAT & I	Vlastic		20 SF		П	П	П
Name of Registered Waste	e Hauler			N.	JDEP V	Vaste	Cubic Yards of	Name of Registe					
SERVICE TRANSPO	RT GROUP	, INC.		0.90.00	auler ID 20990		Waste	MINERVA LA					
City, State							Disposal Date	City, State					
NEW CASTLE, DE							TBD	WAYNESBU	RG, OH				
Completed By (Print or Typ	oe)	Title					Signature		Dat	e	-		
Dillan DeCaro		Esti	mate	or				Doparol		-2	11-	-18	



Data Chi iii		-	Manager 1						11171						
Date of Notification (1)	20 /	18	3				ng Owner/Operator ublic Library	(2)	J. S	EP	25	20	18		
The state of the s	Type Notific ☑ Initial	cation			Stree	et Address	10.500		ASSE	STO	3 00	1477	YN A		
	☐ Amende	ed				State, Zip	2122			1.0		117			
⊠ DOH	Amendn			_0	10000	ildwell, N							(000 2)		
DCA (NJAC 5:23-8)	☐ Emerge justificat	ncy (ir	ncludin	g		e of Conta			T~						
	☐ Cancella				0.000	atthew Ba			Telephone Num						
									201-927-9118						
Name of Facility Where Ab	atomont in	Tokin	a Dian	- (2)	FA	CILITY	NFORMATION	-							
Caldwell Public Libra		rakin	g Place	e (3)				Type of Facility							
Street Address	i y							School (K-12	2) 8 (Other than K-12	Y					
268 Bloomfield Ave								Other (i.e., p homes, etc.)	rivate and commer	cial b	uildin	gs,			
City (5)								Square Feet	# of Floors	IB	ldg. A	Age			
Caldwell								+-20,000	2		+-75	200			
County (6)					Cou	nty Code (7)(STATE USE ONLY)	y) Current Use (Prior if being demolished)							
Essex								Library							
Name of Monitoring Firm Hi		lding (Owner	(8)	ASCN	No.	Name of Abatem								
Environmental Conne	ection						BRISTOL EN								
Street Address							Street Address								
120 North Warren Str	eet				11000		1123 BEAVE	R STREET							
City, State, Zip Code						549	City, State, Zip C								
Trenton, NJ 08608							BRISTOL, PA	19007							
Project Manager for Monitor	ring Firm				ephone		Telephone No.		License No.						
Dominick Dercole Start Date (10)		0 1			09-392		215-788-6040								
						ate (11)	Name of OSHA N		0.000	-24:1					
					0 /	18		VIRONMENTAL	_, INC						
Occupancy Status During A Facility Closed/Vacated I							Street Address 1123 BFAVER STREET								
Abatement Performed O	utside of N	ormal	Facility	Abate v Hoi	ement irs - Des	cribe	1123 BEAVER STREET								
Time of Abatement: 8:00	0AM-4:00	PM/	P	M	AM	SCIDE	City, State, Zip Code								
Scope of Work (Check all th	at apply)						BRISTOL, PA 19007								
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re				 ⊠ Full Containment with Negative Pressure □ Mini-Enclosure □ Glovebag Procedure 								
						1	Non-Exe Non-Exe	mpted (*) and Nor	n-Friable Procedure	Э					
Location of				Loca Norma			D			Ab	atem	ent T	уре		
Asbestos-Containing Ma	terial (ACN	1)	Use	d Sol	ely by	Asbe	Description o stos Containing Ma	terial (ACM)	Amount	Re	Re	Ē	E		
TO BE ABATE IN Facility	<u>.D</u>				ance/ Staff?	(i.e	., thermal systems i	nsulation,	(Specify	Removal	Repair	caps	Enclosure		
(13)			55570550	(12)			surfacing, VAT, other miscellane	or ous)	SF or LF)	<u>a</u>		Encapsulate	ure		
			Yes	No	N/A			,				e e			
Basement Stairwell Lan					\boxtimes	VAT ON	ILY		112 SF	\boxtimes					
Basement Mechanical R	Room				\boxtimes	Plaster	Wall		14 SF						
										П	П	П			
Name of Registered Waste H					JDEP I	원사 (시간) 전 (시간)	Cubic Yards of	Name of Regist	ered Landfill						
SERVICE TRANSPORT			lauler II 20990	5300000000	Waste MINERVA LANDFILL										
City, State							Disposal Date	City, State							
NEW CASTLE, DE							TBD	WAYNESBU	JRG, OH						
Completed By (Print or Type))	Title					Signature		Date	e					
Dillan DeCaro		Es	timat	or			Dillan	Decaro 1	De 9	-5	0-0	-10	2		

B & G proj. #:

State of NJ Notification of Asbestos Abatement

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

Check # 9194 Date of Notification (1) Name of Building Owner/Operator (2) 0 9 1/12 11 1/11 18 Peter Capodice Type Notification Agencies Notified Street Address SEP 2 5 2018 ☐ EPA Initial DEP City, State, Zip Code Amendment X DOL Union, NJ 07083 ASPESTOS CONTROL X DOH Name of Contact Telephone Number Cancellation ☐ DCA Peter Capodice **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Peter Capodice Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Union, NJ 07083 Union Residential Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm License Number Telephone Number Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 10/04/2018 10/05/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Full Containment w/negative pressure >3 sf or >3 If Mini-enclosure Non-friable procedure 2160 sf or ≥260 lf Is location normally used solely E Location of E by maintenance/custodial е n Amount asbestos-containing Description of asbestos-containing m staff(12) C (Specify SF or material to be material (ACM) 0 a a abated in facility (13) LF) Yes No N/A p X basement boiler room, laundry pipe insulation 57 If room, storage area & closet under the stairs Cubic Yards of Waste | Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# Grand Central Landfill B & G Restoration, Inc. 19563 Disposal Date City, State City, State Lincoln Park, NJ 10/05/2018 Pen Argyle, PA Completed by (Print or Type) Signature Cordana Luna Gordana Luna Secretary/Treasurer 09/21/2018

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

Check # 9193 Date of Notification (1) Name of Building Owner/Operator (2) 0 9 1/12 11 1/11 18 Fran Goggin Agencies Notified Street Address ☐ EPA SEP 2 5 2018 Initial DEP City, State, Zip Code Amendment DOL Paramus, NJ 07652 ASBESTOS CONTROL & X DOH Name of Contact Telephone Number Cancellation ☐ DCA Fran Goggin **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Fran Goggin Subchapter 8 (Other than K-12) Street Address M Other (Private/Commercial Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Paramus Bergen Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Phone Number License Number (973)696-6869 00378 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 10/01/2018 10/05/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition X Renovation Full Containment w/negative pressure Glovebag procedure >3 sf or >3 lf X ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of E е by maintenance/custodial asbestos-containing Amount Description of asbestos-containing m staff(12) p C (Specify SF or material to be material (ACM) C 0 a a abated in facility (13) Yes No N/A V L e finished basement side X VAT / mastic (2 layers) 425 sf X Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# B & G Restoration, Inc. 19563 Grand Central Landfill City, State Disposal Date Lincoln Park, NJ Pen Argyle, PA 10/05/2018 Signature Completed by (Print or Type) Date Gordana Luna Gordana Luna Secretary/Treasurer 09/21/2018

D&S Proj. #: 18-190 Date of Notification (1) 0		Name of Bui martin gro itreet Addre	(Pursu		esto 860	s Abatement 2 and 12:120)		SEP 2	5 20	118	The state of the s	
DOL Amendment # □ Emergency (including justification □ DCA □ Cancellatio		clifton, n clifton, n ame of Con martin gr	j 07012 tact				Telephon	e Number				
Name of facility where abatement martin grosso Street Address	is taking pla	ace (3)	FAC	ILITY INFORM	AOITA		Subch Other (4) I (K - 12) apter 8 (Of Private/Co	mmer c.	cial	12) g. Ag	ge .
City (5) clifton Name of Monitoring Firm Hired by	PA	SSAIC er (8)		ASCM No.		inty Code (7) ite use only) Name of Abatement	Current Use (P					
Street Address City, State, Zip Code Project Manager for Monitoring Firm	n	Pho	one Numb	er		D & S RESTOR Street Address 20 California A City, State, Zip Code Paterson, NJ 07 Telephone Number	ve.	License	Numbe	er		
Start Date (10) 09/24/1818 Occupancy Status During Abateme Facility closed/vacated during Abatement performed outside Describe:	10/19 nt (Check o	nly one) od of abater	ment.	1)		973-345-8020 Name of OSHA Mon D & S Restorati Street Address 20 California Av City, State, Zip Code	on, Inc.	01	1169			<u> </u>
Other-Describe: NORMAL I Scope of Work (check all that appl ≥3 sf or >3 If ≥160 sf or ≥260 If Location of asbestos-containing material (acm) to be abated in facility (13)	y) Renovation Demolition Is location			1			Full Containment w Mini-enclosure Glovebag procedur Non-Exempted (*) Amount (Specify S LF)	e and Non-fi			E n c a	E n c L
BASEMENT Registered Waste Hauler		Hauler II		PIPE INSU		ON Name of Registered	100 l ft		e			
D & S RESTORATION, INC. City, State PATERSON, NJ 07503 Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	506 	2000	yd Oate	vasit	TULLYTOWN, City, State TULLYTOWN	RESOURCE RE	Date 09/14/1				_

Chi	52	SLP
Date of Notification	n (1)	
09	_ / _	20

M.	E	C	E		\mathbb{V}	M
M	į	SEP	2	5	2018	

Det of No. 15 . 15	7					- 400	CORPO .	Ontenessor		11111		SEP	2	2 6	UTŁ		
Date of Notification (1) 09 /	20 /	12						ner/Operator (an Renewal	75								
			_		wu	nemberg	OID	ali Kellewai	, LLC		ACR	ESTO	0.0	Y 75.1	777	11 0	
Agencies Notified	Type Notifica	ition			Street	Address						LIC				1. C.	
⊠ EPA	☐ Initial				2 B	road Stre	et, S	Suite 400		Longrenication		Tarento asse	dreter	e we	gric Lawyer	-	
⊠ DOLWD					City, S	tate, Zip C	ode							-	-		
☑ DOH ☐ DCA	Amendme		ludina	. 1	Blo	omfield,	NJ 0	7003									
(NJAC 5:23-8)	justification	on)	iuuiiig	'	Name	of Contac	t	VA 10 10 10 10 10 10 10 10 10 10 10 10 10		Telephoi	ne Nui	mber		_			
,	☐ Cancellati	100			Wai	rren Spra	ke			908-6							
					FAC	CILITY IN	FOR	MATION		1							
Name of Facility Where A	batement is T	aking	Place	(3)) LII I II	. 01	MATION	Type of Facility (4)							-	
Commercial		9		(0)						School (K-12)							
Street Address									☐ Subchapter 8	(Other th							
1200 Randolph Roa	d- Buildina	2-3								Other (i.e., private and commercial buildings, homes, etc.)							
City (5)				-		- 1			Square Feet	# of Flo	nors	11	Rlda	. Age	2	-	
Plainfield									oquaio i cut	1 201110	2010	1	Jiug	. , .9.	•		
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pri	ior if being	demo	lished)					
Union										Ü							
Name of Monitoring Firm	Hired by Build	ling Ov	wner (8)	ASCM	No.	Name of Abatement Contractor (9)										
Bio Terra Solutions									PRO MANAGEMENT LLC								
Street Address							Stre	et Address									
P.O. Box 1224							2	7 Outwater									
City, State, Zip Code								, State, Zip Co								-	
Union, NJ								arfield, NJ									
Project Manager for Moni	torina Firm			Tele	phone	No		ephone No.	0.020	License	e No			_		-	
Rick Eustaguio					3-494			73-928-4888		1188							
Start Date (10)	Is	chedu	iled C		ion Da			ne of OSHA M		1100						-	
09 /17 /					1		ALL PRO MANAGEMENT LLC										
Occupancy Status During							Street Address							_			
☐ Facility Closed/Vacate					nent		200		Lone								
☐ Abatement Performed						cribe			Outwater Lane							_	
Time of Abatement:	AM	PM	/	_PM-		AM		, State, Zip Co								- 1	
Scope of Work (Check all	that annly)							arfield, NJ	07026	M						_	
	triat appry)							☐ Full Con	tainment with Neg	ative Pres	sure						
☐ ≥3 sf or ≥3 if				novatio				☐ Mini-End	losure								
≥160 sf or ≥260 lf		ı	XI De	molitio	n				g Procedure mpted (*) and No	n-Friable F	Proced	lure					
		T	Is	Locati	on			ES HOLLENO	Inplot () talla i to	II I IIGDIC I	10000		hate	eme	nt Ty	ine	
Location				Normal				Description of	of							-	
Asbestos-Containing I)		d Sole				Containing Ma		Amo	S0101730	É	, -	Repair	inc	nc	
TO BE ABA IN Facilit				todial S		(i.e		rmal systems urfacing, VAT		(Spe		Kelllova		₽	apsi	Enclosure	
(13)		- 1		(12)	_			ner miscellane		0, 0,	,	=	1		Encapsulate	6	
			Yes	No	N/A		-						1	_	(D		
1st Floor- Building 2					\boxtimes	VAT				400	SF						
2 nd Floor- Building 2						VAT				100	SF	D] [
2nd Floor- Ceiling- Br	\boxtimes	Pipe In:	sulat	tion- Wrap a	ind Cut	238	LF	D	3 [
Basement- Building 2	I ☑ Pipe Insulation- Wrap and Cut 238 LF ☑ I ☑ TBD ☑					1											
Name of Registered Waste Hauler NJDEP \							Cub	oic Yards of	Name of Regis Minerva Ente	stered Land	dfill.			-1			
ATC/ Century Wast				H	auler II		Wa		Minerva Ente Fairless Land		ROW	S Nort	n La	indfi	111/		
City, State								posal Date	City, State			- 10 - 20 - 20					
Shirley, NY/ Elizabeth, NJ							TBD Waynesburg, OH/ Morrisville, PA										
Completed By (Print or Ty	/pe)	Title						Signature				Date					
·																	
	Monchik Project Manager Allen Monchik 9/20/18																

DECEIVE

SEP 25 2018

ASPESTOS CONTROLA

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET

	_	1		1200 Randolph Rd, Plainfield, NJ		Abateme	nt Type		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No.	Is Location Normally Used Solely by Maintenance/Cust odial Staff (12)		Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i	E n c a p s u l	E n c l o s u r
0.500-2-700 mass-0	Yes	No	N/A						
Building 3- 1st Floor			Х	VAT	18,000 SF	Х			
Building 3- 1st Floor			Х	Pipe Insulation- Wrap and Cut	1,160 LF	Х			
Building 3- 1st Floor			X	Elbows	47	Х			
Building 3- Basement			Х	TBD	TBD	Х			
-		-							
			-						

Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature: Allen Monchik	Date: 9/20/18	
--	--------	-----------------	-----------------------------	---------------	--

Date of Notification (1) Date of Notification (1) O 9 / 1 7 / 1 8 Agencies Notified Type Notificat DEP Amended Amendment #: DOL Emergency	ion	Name of Bu jeanette jo Street Addre City, State, 2 rahway,	(Purse	State (pation of Ash ant (a) WAO er/Operator (2)	ASE	SEP (Aller	TROI	8:							
DOH (including justification)		lame of Cor	ntact					Telephon	e Numbe	er			_			
DCA Cancellation		jeanette.					_									
Name of facility and a second		(0)	FAC	ILITY INFORMA	TIOI	N .	_									
Name of facility where abatement in jeanette johnson Street Address	s taking pl	ace (3)					=	Subcha	4) I (K - 12) apter 8 (0 Private/0 Homes, (Other to		-12)				
								dg. Ag	ge							
City (5)	Cou	nty (6)				unty Code (7) ate use only)		Current Use (Pr	ior if beir	if being demolished)						
rahway Name of Monitoring Firm Hired by I			1	ASCM No.	1	Name of Abatem	nent Contractor (9)									
						D & S REST		50,757								
Street Address						Street Address										
City, State, Zip Code					_	20 California City, State, Zip Co		2.			-					
ony, ototo, aip oodo						Paterson, N.		03								
Project Manager for Monitoring Firm		Ph	one Numb	er	7	Telephone Numb	er	03	License (Numb 1169	er					
Start Date (10)	Sched	d. Completio	n Date (11)	=	Name of OSHA										
09/27/18	10/19					D & S Resto Street Address	ratio	n, Inc.								
Occupancy Status During Abatemen		3-0-475-0-2-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-				20 California		nue								
Facility closed/vacated during Abatement performed outside						City, State, Zip Co	ode									
Describe: NORMAL H	OURS				-	Paterson, NJ	075	03								
Scope of Work (check all that apply	')		-				F	ull Containment w	/negative	press	ure					
 ≥3 sf or >3 lf ≥160 sf or ≥260 lf 	Renovation Demolition						⊠G	lini-enclosure lovebag procedur on-Exempted (*)		-friable	Droce	edure				
Location of asbestos-containing material (acm) to be		n normally u enance/cust		Description		sbestos-containing		Amount		R e m	Rep	E n	E n			
abated in facility (13)	Yes	No	N/A	material (A	.CM)			(Specify Si	r or	o v e	a i	a p	C L			
BASEMENT				PIPE INSUL		ION		100 1 ft		X						
BASEMENT BOILER		X		boiler insulat	ion			40 sq ft		X			旦			
4						COM COLORES CONTRACTOR	and the same			井	님	무	H			
										#	뮈	H	H			
Registered Waste Hauler D & S RESTORATION, INC.	NJDI 135	EP Hauler II 506		ubic Yards of Way yds.	aste	Name of Registe		andfill ESOURCE RE	COVE	 RY						
City, State			Disposal D			City, State			***************************************							
PATERSON, NJ 07503 Completed by (Print or Type)	Title		09/28/13	Signature	_	TULLYTON	/N, I	PA .	Date							
BOGDAN JOLDZIC	PRESID			7.					09/17/	/2018						
ASB-41 *	Do not us	e this form f	or asbesto	s licensure exer	npte	d activities.				1000						

0 11							*		C		P W	rint F
10 Ch			66 G								U	
Date of Notification (1) 9/5/2018		2	2 Par	of Building Owne agon Drive	r/Operato	r (2)			SEP	25	201	8
Agencies Notified Type Notification EPA Initial	1	1	Par	Address agon Drive				AS	BESTO	S OC	MTP.	OL. 8:
DEP X Amended Amendmen Emergency		N	/lont	ate, Zip Code /ale, NJ 0764	5				MARKET 1: TO STOP THE	-sureti		erum (
DOH justification) DCA Cancellation)			of Contact Schaevitz				Telephone 201-391		r		
Name of Facility Where Abatement is Takir	ng Place (3)	FAC	ILITY INFORMA	TION	Tue	e of Facility (4	1			-	
Former A & P Headquarters	.9000 (0	,				Typ	School (K-1:	*				
Street Address 2 Paragon Drive						×	Subchapter	8 (Other than ivate & comm	K-12) nercial b	uilding:	s, hom	ies,
City (5) Montvale, NJ						200	uare Feet 0,000	# of Floors		Bldg. 50+	Age	
County (6) Bergen		(S	TATE	Code (7) USE ONLY)		Ab	rent Use (Prio andoned B	uilding	nolished)			
Name of Monitoring Firm Hired by Building N/A Street Address	Owner (8)		ASC	M No.	Yanr	nuzz	atement Con i Environme		ces, Ind).		
					Street Address 135 Kinnelon Rd Suite 102							
City, State, Zip Code							Zip Code , NJ 07405		William III			
Project Manager for Monitoring Firm		Те	elepho	ne No.	Teleph 908-2		No. 0880	Licen:	se No.			
Start Date (10) 9/19/2018	Schedule 10/5/20		letion	Date (11)			SHA Monitor i Environme	ental Service	ces, Inc	 :.		
Occupancy Status During Abatement (Chec	100	220			Street Address 135 Kinnelon Rd Suite 102							
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of Alnal Facility	batemen Hours	nt		City, S	tate,	Zip Code	te 102				
Scope of Work (Check All That Apply)					NIIII	eion	, NJ 07405					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Property.	enovation emolition			×	M G	ull Containmer ini-Enclosure lovebag Proce	dure				
Location of		Location ormally				1 14	on-Exempted) and Non-F	-nable Pr	Abat	re ement ype	i
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	Solely batenance odial Staf (12)	e/	Asbestos Cor (i.e. therma surf		lateria insu T, or	lation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes		N/A						<u>n</u>		ate	re
Foundation		Х		Mastic			1900 sf	X	-			
Name of Registered Waste Hauler		NJD	EP W	aste Cubic	c Yards	24	Name of Re	egistered Lan	dfill			
annuzzi Group, Inc.	Haule 1746	No. of Wa	f Waste 6			onnection I						
City, State Kinneon, NJ 07405				osal Date /2018		City, State Bethlehe	m, PA					
Completed by ohn Mucha	Title Sr. Pro	oject M	lanag		Signature	A	171	-	Date			

Pg.l

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

CMC#3443

Date of Notification (1)					IN	lam	e of Buildin	g Owner/Operator	(2)			AND THE PARTY OF T	_		COMPANIE OF THE SECOND			
9/	21 /				'	Pri	inceton U	Iniversity-Office	of Design	na	Est Cet					M		
Agencies Notified ⊠ EPA ⊠ DOLWD	Type Notif ☑ Initial ☐ Amend	led				20	t Address O Elm Dr. State, Zip (All fact to the fact of the fa	M	SEP	2.5	20)18	1000			
⊠ DHSS	Amend			_		250	nceton, I			et lea					1			
□ DCA (NJAC 5:23-8)	☐ Emerge justifica	ency (i	ncludir	ng	N		of Contac		- I	-	1		*****	The second	<u>.</u>			
(**************************************	☐ Cancel	550 355 mmg -			1,000		bert Orte	-3)			Velephone				Gt.			
								****	has	WM.wiziy	-609-258	-1841	W FT# 1	and the con-	Henry	n cetto)		
Name of Facility Where A	hatement is	Takir	na Plac	0 (3)		FA	CILITYIN	IFORMATION	T- (5 W)									
Princeton Universit									Type of Facil		30							
Street Address	,		. 110						☐ School (K-12) ☐ Subchapter 8 (Other than K-12)									
Washington Rd					#1				Other (i.e. homes, et	, priv	vate and cor	mmerc	ial b	uilding	js,			
City (5)									Square Feet		# of Floors	S	В	ldg. A	ge			
Princeton														70				
County (6)					0	Cour	nty Code (7)(STATE USE ONLY)	Current Use (Prio	r if being de	molish	ed)					
MERCER									Office/Cla		ooms							
Name of Monitoring Firm		ilding	Owner	(8)		СМ		Name of Abatement Contractor (9)										
TTI Environmental I	nc				0	000	03	BRISTOL ENVIRONMENTAL, INC.										
Street Address								Street Address										
1253 North Church	Ka							1123 BEAVE	RSTREET									
City, State, Zip Code								City, State, Zip Co	ode									
Moorestown, NJ 080								BRISTOL, PA	19007									
Project Manager for Monit Michael Keehn	oring Firm				elepho		This work.	Telephone No.			License No	0.						
Start Date (10)		Caba	1 1 10				-8800	215-788-6040			00509							
10/_8_/	18		2_ /		3		te (11) 19	Name of OSHA M BRISTOL ENV	WINDOWS AND	AL,	INC.							
Occupancy Status During								Street Address										
☐ Facility Closed/Vacated	During Ent	ire Pe	riod of	Aba	temen	ıt	200	1123 BEAVER STREET										
Abatement Performed Time of Abatement: 7:	00AM-3:30	PM/_	Facilit P	y Ho M	urs - [Des AM	cribe	City, State, Zip Code BRISTOL, PA 19007										
Scope of Work (Check all	that apply)		*															
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			⊠ Re					 ⊠ Full Containment with Negative Pressure □ Mini-Enclosure □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure 										
20					ation					T			Ab	ateme	nt T	vne		
Location o Asbestos-Containing M		/ /\		Norm	ially ilely b	v I	0 - 1	Description of				ŀ						
TO BE ABAT	ED	,	Ma	inter	ance/		(i.e.,	tos Containing Mat thermal systems in	erial (ACM) esulation		Amount (Specify		Remova	Repair	Encapsulate	Enclosure		
IN Facility (13)			Cus	todia (12	Staff	?		surfacing, VAT,	or		SF or LF)		oval	=	nsq	nus		
(10)			Yes	No	1	/A		other miscellaneo	us)						ate	(D)		
Workarea #1(Labs 472	, 473 & 47	4)	\boxtimes			-	Floortile	and mastic		+	620 SF			П	П	П		
Workarea #2(Labs 468	, 469 & 47	6)	\boxtimes			1	Floortile	and mastic		\dagger	2,260 SF							
Workarea #2(Labs 468, 469 & 476)							Pipe sad	dles			4 ea		\boxtimes					
Workarea #3(Lab 462)							Floortile	and mastic			100 SF			П	П			
								Cubic Yards of	Name of Reg	ister	ed Landfill		_			-		
ING.					Haulei 187			Waste	FAIRLES									
BRISTOL, PA 19007								Disposal Date	City, State	SALIT COLUMN								
								A THE RESERVE OF THE PARTY OF T	FAIRLESS	S HI	LLS, PA							
Completed By (Print or Type) Brian Scafiro Title Estimator								Signature Bulana	Scalino	/	nc	Date G		1-1	18			

Pg.2

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

Chu# 3443

Date of Notification (1)				_	Name	of Buildin	a O:	umar/Onaratar /	(2)	In	EC) E	1	W	E			
9 /	21 /	18						wner/Operator (of Design and (Description of the last of the		<u>u</u>					
Agencies Notified								cronty-Office	or Design and V	JUISA								
⊠ EPA	Type Notific	ation				t Address					SE	P 2	5	2018	Lavin			
⊠ DOLWD	☐ Amende	d				Elm Dr.												
☑ DHSS	Amendm	ent#_			D 35333	State, Zip (-	ASPER	TOS	001	repe	LL.			
☑ DCA	☐ Emerger		luding			nceton, N		18544		1		I ICT		-	et, etk			
(NJAC 5:23-8)	justificati Cancella					of Contac	-			CONTRACTOR OF THE CONTRACTOR	one Num		1107.75	**********				
	Cancella	LIOIT				bert Orte	_			609-258-1841								
Name of Facility Where A	hatamant is "	Talsian	Diana	(2)	FA	CILITY IN												
Princeton Universit									Type of Facility (4									
Street Address	y-Jauwiii n	lall 4"	F100	r 					☐ School (K-12) ☐ Subchapter 8		han K-12)						
Washington Rd									Other (i.e., pri	vate and	comme	cial bu	uildin	gs,				
City (5)									homes, etc.)	T					-			
Princeton									Square Feet	# of FI	oors		ldg. A	ge				
County (6)					Cour	nty Codo /7	7\/07	ATE USE ONLY)	Current Head Dela	- 15 1 - 1 -	70							
MERCER					Cou	nty Code (/)(31)	ATE USE UNLT)	Current Use (Price Office/Class)		g demolis	nea)						
Name of Monitoring Firm	Hired by Build	ding O	vner (8)	ASCM	No	No	ome of Abatama		ooms			-15.70					
TTI Environmental I		unig O	,,,,,,,	0)	000		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC.											
Street Address					000		-		VIRONWENTAL	, INC.								
1253 North Church	Rd						255000	Street Address 1123 BEAVER STREET										
City, State, Zip Code				-	-		-	ty, State, Zip Co										
Moorestown, NJ 080	057							BRISTOL, PA										
Project Manager for Monit				Tel	ephone	No	_	lephone No.	10001	Licens	e No							
Michael Keehn				1	09-386		1	215-788-6040		005								
Start Date (10)		Schedu	led Co	mpl	etion Da	ite (11)		me of OSHA M		000	-		-					
10 /8 /					3 /		E	BRISTOL EN	VIRONMENTAL	. INC.								
Occupancy Status During	Abatement (Check	only o	ne)			Street Address							Sille				
☐ Facility Closed/Vacated	d During Enti	re Perio	od of A	Abate	ement		1123 BEAVER STREET											
☐ Abatement Performed	Outside of No	ormal F	acility	Ηοι	ırs - Des	scribe		y, State, Zip Co										
Time of Abatement: 7:	00AM- <u>3:30</u> F	PM/	PN	Λ- <u> </u>	AM			BRISTOL, PA										
Scope of Work (Check all	that apply)					951/100-5-30	_								-			
☐ >3 sf or >3 lf		r	⊠ Rer	201/0	lion				ainment with Nega	tive Pre	ssure							
≥160 sf or ≥260 lf			☐ Der					☐ Mini-Encl										
									mpted (*) and Non-	-Friable	Procedur	е						
• 2000				Loca orma								Ab	atem	ent T	уре			
Location of Asbestos-Containing N		n			ely by	Asha	etne	Description of Containing Mat		۸۰۰۰		Re	Re	ш	m m			
TO BE ABAT	TED	"			ance/	(i.e	., the	ermal systems i	nsulation,	Amo (Spe		Removal	Repair	icap	clos			
IN Facility (13)	У		Custo	(12)	Staff?		ot	surfacing, VAT, ther miscellaned	or	SF o	r LF)	<u>a</u>		Encapsulate	Enclosure			
(10)			Yes	No	N/A	1	Οί	mer miscellane	ous)					ate				
Workarea #4(Labs 452	2, 453 & 456	3) [\boxtimes			Floortile	e an	nd mastic		315	SE							
Workarea #5(Labs 440		-	\boxtimes				le and mastic			315 SF 465 SF								
•					-			400	01									
		-		1400				20	H									
Name of Registered Waste	e Hauler				NJDEP Waste			Cubic Yards of Name of Rec			Registered Landfill							
BRISTOL ENVIRONMENTAL, INC.						No.	Wa		FAIRLESS L									
City, State						,	Dis	posal Date	City, State						-			
BRISTOL, PA 19007									FAIRLESS H	IILLS. F	PA							
Completed By (Print or Typ	oe)	Title						Signature			Dat	e	-					
Brian Scafiro	or				Brian	Scalino	10n	- 9	1-2)/-	18	-						