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NOTIFICATION OF ASBESTOS ABATEMENT Check#2605 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 27 16 2016 Tina Vaccaro Agencies Notified Type Notification Street Address ☐ EPA ■ DOLWD ASBESTOS CONTROL 8 Amended City, State, Zip Code X DHSS Amendment # LICENSING Bloomfield, NJ 07003 ☐ DCA Emergency (including) (NJAC 5:23-8) Name of Contact justification) Telephone Number Cancellation Tina Vaccaro FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Street Address Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bloomfield, NJ 07003 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10 / 06 / 16 10 / 07 / 16 Envirovision Consultants.Inc Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/ PM_ AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf = 160 sf or >260 lf Renovation Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Remova Repair Encapsulate Enclosure Asbestos Containing Material (ACM) Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A X Basement X Pipe insulation 15 LF П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature N.Jevtic Owner Tente Wena 09/27/16 ASB-41

State of New Jersey

Date of Notification (1)			Nama	f Duilding (Owner/Operat	or I		W		17	w	2	
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:60 and 12:120)

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	cluding	11.0		Contact Benito					Telephone N	lumhe	r			
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Project Manager for Monitoring Firm		Telephone No. Telephone No. License No. 973-764-2276 703						No.).					
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar	Asbestos Containing Material (ACM) Amount (i.e. thermal systems insulation, Staff? Surfacing, VAT, or SF or LF)						Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A										(0	
basement			X		pipe	insula	ation		60 LF	-	ζ			
										+				
										+				
Name of Registered Waste Hauler		N	JDEP V	Vaste	Cubic	Yards		Name of F	Registered Lan	dfill				
Freehold Cartage		1 22	auler ID 5959	No.	of Was				Berks Land	dfill				
City, State Freehold, NJ					Dispos	sal Date	9	City, State Birdsbo						
Completed by A. Scott Higgins Title President						Signatur	re	and the same of th		Date 9/2)		

Print Form

m ch	NC			OF ASBES										
Date of Notification (1) SEPT. 27, 2016		1	Name of E PM JOI	Building Ov HNSON,	wner/Op , LLC	erator	(2)			EG				
Agencies Notified Type Notification	n		Street Add	dress . JOSEP	H DRI	IVE				SEF	3 0	201	6	Ш
EPA Initial Amended Amendme	nt #_ ¹	(City, State STIRLI	e, Zip Code NG, NJ	e 07980					SBEST	os or	DNTF	ROLL	12
DOH justification Cancellation		1	Name of 0	Contact CK GOLI	DEN					phone Ni				
		_	FACIL	ITY INFOR	RMATIC	N								
Name of Facility Where Abatement is Take PM JOHNSON, LLC PROPERT	ring Place (3) Y						Пѕ	f Facility (2)	th.a.a.W	121			
Street Address 19 JOHNSON STREET								ubchapter ther (i.e. p tc.)	rivate 8	commer	cial buil			S,
City (5) MONMOUTH BEACH			7/				2100		1	Floors		81dg. A 1963		
County (6) MONMOUTH			County C (STATE U	ode (7) SE ONLY)		_	FOR	t Use (Prid MER RE	ESIDE	NCE	shed)			
Name of Monitoring Firm Hired by Buildir N/A	g Owner (8)		ASCM	No.		Name Finis	of Abate shing T	ement Cor Ouch As	ntractor besto	(9) s Abate	ment (Corp.	, Inc.	
Street Address		Ş					Addres	s son Stre	et					
City, State, Zip Code						City, S Wes	State, Zip st Long	Code Branch	, NJ 0	7764	e			
Project Manager for Monitoring Firm		Telephon	ie No.			hone No -222-8			License 00040					
Start Date (10) SEPT. 29, 2016	Schedule SEPT.	d Completion Date (11) Name of OSHA Mon N/A					A Monitor							
Occupancy Status During Abatement (C	neck Only On	e)				Street	Addres	S						
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe:	re Period of A ormal Facility	baten	ment s		City, State, Zip Code									
Scope of Work (Check All That Apply)							01.5		o treatment					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of	enova emoli					Min Glo	i-Enclosur	ainment with Negative Pressure osure Procedure mpted (*) and Non-Friable Procedure				re	
				P. Comment			140					Abat	temen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	intena	ely by ance/ Staff?		os Cont thermal surfa	Description of Containing Material (ACM) rmal systems insulation, surfacing, VAT, or or rmiscellaneous) Amount (Specify SF or LF)					Repair	e Encapsulate	Enclosure	
	Yes	No	51053/3051	100	LEDIA	DIE	AC SIE	VINIC	1.	400 SF	X	-	te	
EXTERIOR			X	NON	N-FNIA	OLE /	40 31	JIIVG .		+00 01	Δ		+	
			NIDED !	I==4:	0	Yards		Nama	f Regist	ered Land	Hfill		1	
Name of Registered Waste Hauler Finishing Touch Asbestos Abate	ment Corp.	1	NJDEP W Hauler ID 12058		of Wa	ste		TRRF			Jilli			
City, State WEST LONG BRANCH, NJ			Vi		Dispo 10/3	sal Dat /16	te	City, Sta		/N, PA			l los este	
Completed by JOSEPH P. MILLER	Title PRE	SIDI	ENT		5	Signatu	M//	lh			Date 9/27/	16		
			C			Ì	1	N F R 35				25	5 15	505



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

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Date of Notification (1) Sept 23, 2016			P	lame of Building O SEG Fossil, LLC))	perator (2)	SEP	3.0	2016		4	
Agencies Notified	Notif	fication Typ	<u>oe</u>	S. 8	Street Address 80 Park Plaza		L L	SBESTO	os co	ONTRO	L&	
(X) EPA (X) DEP (X) DOL	(X)	nitial Notific Amended Cancelled	ation Certification		City, State, Zip Co Newark, NJ 0710	de			NELICO.	440		
(X) DOH (X) DCA					Name of Contact Domenic Fiorino			l. Number	r 			
				FACILITY INFO	ORMATION							
Name of Facility Where Abatement Sewaren Generating Station	is Taking	Place (3)			Type of Facility (4 () School (K-12) () Subchapter 8 (X) Other (i.e. priv	(other the	an K-12) mmercial bldgs.,	homes, e	tc.			
Street Address 751 Cliff Road		18			Sq. Feet_DOCK	(# of F	loors 8				
City (5) County Sewaren Middles			County Cod (State Use (le (7) Only)	Bldg. Age Current Use (pric	or if being	demolished) Ele	ectric Gen	neratin	g Statio	n	
Name of Monitoring Firm Hired by I	3ldg. Ow	ner (8)	ASCM No.		Name of Contractor (9) Absolut Ace Inc.							
Street Address					Street Address PO BOX 295							
City, State, Zip Code					City State, ZipCo Florham Park, N	o <u>de</u> NJ 07932						
Project Manager for Monitoring Fir	m Te	elephone N	umber		<u>Telephone Number</u> (973) 410-9217 License Number 00225							
Scheduled Start Date (10) SEPT 26, 2016	<u>Sc</u>	cheduled C	completion D	Date (11)	Name of OSHA MECS	Monitor						
Occupancy Status During Abatem () Facility Closed/Vacated During	-ntire -	eriod of AL	Jalement		Street Address 5 Linwood Ct Other State Zin Code							
() Abatement Performed Outside DescribeAsbestos is on		al racinty r	10010		City, State, Zip Hamilton, NJ 0	Code 8690		10-52				
Source of Work (Check all that ap	ply)											
() Demolition (X) Renovation (X) Large Proj. (>160 SF or >260	LF ACM) () SM Pr	roj. (>25<16	60 SF or >10 <2	60 LF ACM) () Minor F	Proj. (<25 SF or	<10 LF AC	(M			
() Full Containment with Negati	le I ocatio	on Normally Maint./Cus	v Used	Description of thermal system	ACM (i.e. ms insulation,	Amount	(Specify SF or I	_F) <u>A</u>	batem	ent Type		
Facility (13)	Staff? (12 YES	2) NO	NA	surfacing, VA miscell.)		900 line	ear feet	E	X X	Rep. E	ncap E	nclose
DOCK		Х		ASBESTOS F	PIPING	800 1111	ear root					
Name of Reg. Waste Hauler Waste Management of New Je		NJDEP Wa 17273	aste Hauler	ID#	Cubic Yards of 200	f Waste		Name of Tullytow	vn Res	source R		гу
City State Elizabeth, NJ 07114-2436	51			Disp. Date	Deta	T	City, State fullytowr	i, PA 1	9007			
Completed by (Print or Type) <u>Title</u>					Signature			<u>Date</u> 9/23/16				
ROBERT GROGAN												

2016 04:03PM NJ Asbestos C	ontrol 609	.633.0664			page	1						
99/25/2015 01:29PM 18562	248799			ASSUR	ED SEF	RVICE	S	DE	CP	AGE		94
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ate of Notification (1) 09/26/2016		Name GEC	of Buildir PAGE D	Na Owner/C	Operator	(2)			ESTO	25 (ON	TRI
gencies Notified Type Notification	វា	Street	Address		-			1	12		3111	
EPA DEP DOL Amendme	nt #	City, S GLA	izia, 2p SSBOR	Code PO NJ 08	3028			14	· · · ·			-
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me of Facility Where Abatemani is Tol	inn Diess (2)	PAC	ALITY IN	FORMAT	ON		-			-		_
eme of Facility Where Abatement is Tak RESIDENTIAL	will Linear (6)					NAME OF TAXABLE PARTY.	of Facility	5.050				10
neet Address						B	School (K- Subchapte Other (I.e. etc.)	r & (Cither than k private & comme	(-12) Ordini bu	iliding	s, hon	ńėa,
19 (5) LASSBORD sunty (6)						Columbia .	re Feet	# of Floors 2		Blög. 91	Age	
BLOUCESTER		(STATE	Code (7 USE DM	n n		RES	BIDENTI		lished)		700	
me of Monitoring Firm Hires by Building CER ASSOC.	Owner (8)	ASC	M No.		Name ASS	URE!	ENVIR	ntractor (9) ONMENTAL	9ERV	ICE	3 INC	>.
est Address 112 INDUSTRIAL DRIVE						Addres	S RUN					_
y, State, Zip Code EST BERLIN NJ 08091					MUL	LICA	p Code HILL NJ	08062		-		
ject Manager for Monttering Firm			309-120			one No 304-4		License 01145				
rt Date (10) 8/27/2016	09/28/20		Date (11)	Name of		A Monitor					
Expency Status During Abstement (Che Facility ClosedAvscaled During Entire Abstement Performed Outside of Non Other - Describs: RESIDENTIAL-BA	Deviced of Alex	ninnon si			CITY St	RT. 13	Code					_
pas of Work (Check All That Apply)					CINN	MANUN	NOON N	08077				
23 sf or 23 ff 2180 sf or 2260 ff		revelion nolition	_			Mini	-Englesyre				ra.	
Location of		cation melly								Abab	amen Pe	1
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BASEMENT	Yes n	N/A		NEW TO	0.55	911 =					fale	Bull
- A	1			NF1 FL	DOR.	TILE	-	300 \$F	X	-		
of Registered Waste Hauler		NJDEP W	asia	Cubb Y	surrie		Name of R	anialand Laure				
SURED ENVIRONMENTAL SEF	RVICES	Hauler ID 0034895	No	of Wassis				tagistered Landfi /A LANDFILL				
State LLICA HILL NJ				Disposs	Date		City. Stalis	001100			_	

Tile GENERAL MANAGER

Completed by RON SWANSON

Date 09/26/2016

Ch 110101	NO.	(Purs	ATION O suant to	of New C F ASBES NJAC 8:6	TOS A 30 and	12:120)	СН	FOK	E G	SE 1		\mathbb{V}	E			
Date of Notification (1) 09/26/2016		Na C	ame of B GEORG	Building Ov BE DUB	vner/Op OIS	perator	(2)				3		2018		14		
Agencies Notified Type Notification		St	treet Add	iress					- m								
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Emergency (incl justification) DCA Emergency (incl justification) Cancellation	uding		ame of C				-		Tele	phone Nu	ımber	- 1	1				
			FACILI	TY INFOR	RMATIO	NC	_					_					
Name of Facility Where Abatement is Taking Pl RESIDENTIAL	ace (3)						Туре	of Facility (4 School (K-12									
Street Address							7	Subchapter Other (i.e. pietc.)	8 (Othe	er than K-1 commerc	12) cial bu	iildir	ngs, h	ome	s,		
City (5) GLASSBORO							Squa 141	are Feet	# of 2	Floors		Bld 91	g. Ag	е			
County (6) GLOUCESTER			ounty Co	ode (7) SE ONLY)			Current Use (Prior if being demolished) RESIDENTIAL										
Name of Monitoring Firm Hired by Building Own ACER ASSOC.	ner (8)		ASCM	No.		Name ASS	of Ab	atement Con	tement Contractor (9) D ENVIRONMENTAL SERVICES INC.								
Street Address								Street Address 570 CLEMS RUN									
City, State, Zip Code WEST BERLIN NJ 08091			City, S MUI	State, 2	Zip Code A HILL NJ	08062	2										
Project Manager for Monitoring Firm MATT DEPALMA	e No.			hone 1	No. -4676		License 01145										
Start Date (10)	cheduled		pletion D	ate (11)		Name EMS		SHA Monitor									
Occupancy Status During Abatement (Check C							Addre	ess 130 NORT									
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: RESIDENTIAL-BASE	Capillity L	Jaura	atement City State Zin Code								<u> </u>						
Scope of Work (Check All That Apply)												_					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Section 2		Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedu														
	le l	ocatio				E	N	ion-Exemple	u () an	u Non-Fii	able r		Abate	ment			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair	ormali Solei ntenan odial S (12)	y ly by nce/		os Con therma surfa	Description of os Containing Material (ACM) hermal systems insulation, surfacing, VAT, or other miscellaneous) Type Type Amount (Specify Rep particular SF or LF)						e Encapsulate	Enclosure				
,	Yes	No	N/A											te	CD		
BASEMENT	ASEMENT X						R TIL	.E	3	00 SF		ζ					
Name of Registered Waste Hauler ASSURED ENVIRONMENTAL SERV	/ICES	Н	JDEP Wauler ID 034895	No.	of Wa	c Yards aste				ered Land ANDFIL							
City, State MULLICA HILL NJ						osal Dat 28/201		City, Sta WAYN	te IESBl	JRG, OI	Н						
Completed by RON SWANSON Title GENERAL MANAGER						Signatu	(e)	ucely	XWE	100	Date 09/26/2016						

Print Form State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) Seaview Acquisitions, LLC 09/26/2016 Street Address Type Notification Agencies Notified 8 Industrial Way West, 2nd Floor Initial XXX **EPA** City, State, Zip Code Amended DEP Eatontown, NJ 07724 Amendment # 1 DOL Emergency (including Telephone Number Name of Contact iustification) DOH Skip Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Value City Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, Street Address X Rt 66 & Rt 35 etc.) # of Floors Bldg. Age Square Feet City (5) 2 25 +140,000 Ocean Township Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Monmouth Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Site Enterprises, Inc. Health and Safety Services Street Address Street Address 211 East Essex Ave PO Box 365 City, State, Zip Code City, State, Zip Code Linwood, NJ 08221 Berlin, NJ 08009 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01172 609-567-1250 856-452-1311 James Proctor Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Health & Safety Services, Inc. 10/21/2016 09/26/16 Street Address Occupancy Status During Abatement (Check Only One) PO Box 365 Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Berlin, NJ 08009 X Other - Describe: Vacant Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure X Demolition Glovebag Procedure ≥160 sf or ≥260 If Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Asbestos Containing Material (ACM) Used Solely by Amount Encapsulate Asbestos-Containing Material (ACM) Enclosure (Specify Maintenance/ Rernoval (i.e. thermal systems insulation, TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or In Facility other miscellaneous) (12)(13)Yes No N/A

	Yes	No	N/A					_		_
Roof			X		Tile		2,100 sf	X		
Hoor	-	-			Doofing		70,000 sf	x		
Roof			X		Roofing		70,000			
*										_
		L	JDEP Wa	rto	Cubic Yards	Name of	Registered Land	fill		
Name of Registered Waste Hauler		1 3	lauler ID N		of Waste		wn Landfill			
Site Enterprises Inc.		10	035220		20 cy	Tullyto	IWII Landiii			
					Disposal Date	City, Sta	te			
City, State	nchin	NI			10/21/16	Bristol	, PA		· · · · · · · · · · · · · · · · · · ·	
6626 Delilah Road Egg Harbor Tow		140			/Signature /			Date		
Completed by	Title				Signature	20		09/26	/2016	
Eric Keys	MO					4/1				

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	rint	En	m	25. C 16
44 Water 14	11111	FUI	LH	Con No.
someone della	Properties	Resident	error.	

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Date of Notification (1)		1000000			er/Operator	(2)		III SEF	3 ()) (116	
09/09/16				rand Adar	ns LLC			II III OLI	با ال		7.19	-1-
Agencies Notified Type Notification			reet Add	iress rand St. S	suite 5B							
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DEP Amended Amendment #_			5.00	n, NJ 070	30			LI	CEN	5!!//		-
Emergency (in	cluding		ame of C	33				Telephone Num	ber			
DOH justification)		1		lazzola				1				
DCA Cancellation					AATION			1				$\overline{}$
Name of Facility Where Abatement is Taking	Diace (3)		FACILI	ITY INFORM	MATION	Tvp	e of Facility (4)				
Former Value City	riace (3)											
						H	School (K-12 Subchapter 8	Other than K-12)			
Street Address						×	Other (i.e. pr	ivate & commercia	al buildi	ngs, h	omes	i,
Rt 66 & Rt 35						-	etc.)	# of Floors	BI	dg. Ag		-
City (5)						10000	Jare Feet	2		ig. Ay 5+	-	
Ocean Township						1	0,00			J+ 		-
County (6)			ounty Co	ode (7) SE ONLY) _		n/s		r if being demolish	iea)			
Monmouth		,,				1000		t-0-10-1 (D)			_	_
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.	100,000,000		batement Cont					
Health and Safety Services							erprises, Inc	C.				
Street Address					Stree							
PO Box 365							st Essex Ave	e				
City, State, Zip Code					100000000000000000000000000000000000000		, Zip Code					
Berlin, NJ 08009					Lin	wood	d, NJ 08221					
Project Manager for Monitoring Firm		T	elephon	e No.	Telep			License N	0.			
James Proctor			856-45	2-1311	609	9-567	7-1250	01172				
Start Date (10)	Schedule	d Com	pletion D	Date (11)	0.00		SHA Monitor					
09/2/0/16	10/2	1/16			Hea	alth &	& Safety Se	rvices, Inc.				
Occupancy Status During Abatement (Check					Stree	t Add	iress					
Facility Closed/Vacated During Entire P			ent		PO	Box	365					
Abatement Performed Outside of Norm	al Facility	Hours	Citt		City,	State	, Zip Code					
Other - Describe: Vacant					- Be	rlin, l	NJ 08009					
Scope of Work (Check All That Apply)												
_	П	Renovat	tion			X	Full Containme	ent with Negative	Pressu	re		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		emoliti				Н	Mini-Enclosure	9				
	_						Glovebag Prod	cedure d (*) and Non-Fria	ble Pro	cedur	е	
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In Facility	Cus	todial S (12)	Staff?		surfacing, \			SF or LF)	Remova	Repair	apsı	Enclosure
(13)		(1-)	-	(other miscell	aneo	us)		val	=	Encapsulate	ure
	Yes	No	N/A								· ·	
Roof			X		Tile			2,100 sf	X		_	
Roof			X		Roofi	ng		70,000 sf	х	_		
									+	-	-	
		1.6	JDEP W	Vasta	Cubic Yards		Name of	Registered Landf	ill		L	
Name of Registered Waste Hauler			lauler ID	0.000	of Waste	1	1 AND CONTRACTOR OF THE	11 - 12 - 14 - 14 - 14 - 14 - 14 - 14 -	200			
Site Enterprises Inc.		C	03522	0	20 cy			wn Landfill				
City, State			4 50 - 20		Disposal Da		City, Sta					
211 East Essex Ave. Linwood, NJ	08221				10/21/14	0	Bristol	l, PA				
Completed by	Title				Signat		1 -		Date	1		
Eric Keys	OM				191	À	1040		09/0	9/10	0	
							1 1					

(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2)
FOX & FOXX DEVELOPMENT PROPERT Date of Notification (1 SEPT. 27, 2016 Street Address Agencies Notified Type Notification 2016 940 AMBOY AVENUE, SUITE 101 EPA Initial City, State, Zip Code EDISON, NJ 08837 DEP Amended ASBESTOS CONTROL & Amendment #_ 1 DOL Emergency (including Telephone Number Name of Contact DOH iustification) JIM WIRKOWSKI Cancellation DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) FORMER RESIDENCE Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 65 WALTUMA AVENUE Square Feet # of Floors Bldg. Age City (5) EDISON 1883 2536 SF County Code (7) Current Use (Prior if being demolished) County (6) MIDDLESEX RESIDENCE (STATE USE ONLY) Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Finishing Touch Asbestos Abatement Corp., Inc. N/A Street Address Street Address 17 Thompson Street City, State, Zip Code City, State, Zip Code West Long Branch, NJ 07764 Telephone No License No. Telephone No. Project Manager for Monitoring Firm 732.222.8372 00040 N/A Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) N/A OCT. 11, 2016 OCT. 7, 2016 Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Maintenance/ (Specify Remova (i.e. thermal systems insulation, TO BE ABATED Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A 374 SF VAT X X LIVING ROOM VAT 300 SF X X BASMENT NON FRIABLE SIDING 1900 SF X **EXTERIOR** X Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste TRRF LANDFILL Finishing Touch Asbestos Abatement Corp., I 12058 Disposal Date City. State City, State TÚLLYTOWN, PA 10/12/16 WEST LONG BRANCH, NJ 07764 Date Signature Completed by 9/27/16 JOSEPH P. MILLER PRESIDENT

NOTIFICATION OF ASBESTOS ABATEMENT

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K	Ch	eck	#1	1182	

ate of Notification (1)				of Building f America	Owner / Operator (2)		SEP	3.0			
Agencies Notified	Type Notification			Address stnut Ride	ge Road			ASBESTO LIC	OS CC	NTI NG	ROL	- &
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LDCA	Cancellation		Jim Ka	of Contact				le	ephone	Nun	ber	
			FAC	CILITY II	NFORMATION							
Name of Facility Wh	here Abatement is Takir	ng Place (3)			Type of Facility							
Street Address						er 8 (Other than	K-12)					
80 Chestnut Ridge	Road					e., private & co		al buildings	s, hom	e, etc	2.)	
					Square Feet	# of Flo			g. Age		200-11	
City (5)					4,628		1			60	-	-
Montvale					Current Use (F	Prior if being dem	nolisnea)					
County (6)		County Code	(7)		Dank							
Bergen		USE ONLY										
Name of Monitoring	Firm Hired by Building	Owner (8)		ASCM N	하다.	ement Contracto	or (9)					
New York Environ	mental				Synatech, Inc							
Street Address 88 Harbor Road					829 Radio Ro							
City, State & Zip Co	nde				City, State & Z							
Port Washington,					Little Egg Ha	rbor, NJ 08087						
Project Manager for			lephone N		Telephone Nu	mber	L	icense Num	ber 00817	7		
Michael Baudo	1 (12) Och ad		6-944-950		609-296-6916 Name of OSH	A Monitor			00017			-
Scheduled Start Da October 8		luled Completi Decem	ber 31, 20		Synatech, Inc							
Occupancy Status	During Abatement (Che osed/Vacated During Er	ck only one)			Street Address 829 Radio Ro	S						
	t Performed Outside of				City, State & 2	Zip Code						
Other – De	escribe:				Little Egg Ha	rbor, NJ 08087						
Facility Oc	ccupied During Abateme	ent										
Scope of Work (Ch	neck all that apply)											
						Full Containmen	nt with Ne	gative Press	sure			
≥3 sf or ≥ If		\boxtimes	Renovation	on		Mini-Enclosure						
≥160 sf or ≥	260 If		Demolitio	n		Glovebag Proce						
					\boxtimes	Non-Exempted	(*) and No	on-Friable P				
	ocation of		ion Norma	ally Used	Descripti			-1 (0:6)	Abi	ateme	ent T	ype
	ntaining Material (ACM)		y Mainter		Asbestos-Co Material (int (Specify F or LF)				
	BE ABATED IN Facility	Cusic	l Stan	(12)	(i.e., thermal			VED 0.00000000000000000000000000000000000			m	
	(13)	-			insulation, surf				R	71	nc	En
					or other misce	ellaneous)			Removal	Repair	aps	clos
				NI/A					val	air	Encapsulate	Enclosure
		Yes	No	N/A							Ф	
Lobby/ATM Area				Х	Floor	Tile		700SF	X			
					1		-		-			
Name of Registered Waste Hauler NJDEP V				O residence and residence	ards of Waste	Name of Regis	stered Lar	ndfill				
Synatech, Inc.			7429		(Grows Landfi	II					
City, State				Disposa	al Date	City, State						
	N. 1. 00007					Morrisville, P	Δ					
Little Egg Harbor, Completed By	, NJ 08087			Signatú	íre)	Intolliavine, F	Date					
Completed by	Title	,		Jighalu	1							
John Mezzina	Vice	11		Septemi	ber 27, 201	ô						

CHUPLET	NOT	(Pursi	TION OF uant to l	of New Je ASBEST NJAC 8:60	OS A and	12:120)				EG	E		\mathbb{V}	E	
Date of Notification (1) 9/28/16				uilding Owr Propertie		erator ((2)			SEF	P 3	0	201	6	
Agencies Notified Type Notification			eet Addr Glenwo	ress ood Ave.	Suit	e 412	138			ASDEST	-00	00	i talente	2	
EPA Initial Amended Amendment #			y, State, ast Ora	Zip Code							IGE				α
□ Emergency (in justification)	cluding		me of C				÷4		Tele	ohone Nun	mber				
DCA Cancellation			FACILI	TY INFORI	MATIC	ON									
Name of Facility Where Abatement is Taking Street Address	Place (3)							of Facility (4) School (K-12 Subchapter & Other (i.e. pr) S (Othe	r than K-12 commerci	2) ial bu	ildin	gs, h	ornes	,
City (5)							Squa	etc.) are Feet	# of	Floors		Bldg	, Age	3	-
Nutley							200	ont Use (Prio		na demolis	hed)	-	-		
County (6) Essex			ounty Co	ode (7) SE ONLY)			Hor	ne							
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM I	No.		Name AAA	of Ab	atement Cont D PROFE	ractor SSIO	⁽⁹⁾ NALS					
Street Address							Addre HITE	DOVE CC	URT	9					
City, State, Zip Code						City, S	State, 2	Zip Code	3701						
Project Manager for Monitoring Firm		T	elephon	e No.		Telep	hone I			License I	No.				
	Scheduled	Comr	oletion D	ate (11)		Name	of OS	SHA Monitor							-
Start Date (10) 10/09/16	10/09/16	3	71011011 2			AAA	t Addr	D PROFE	SSIO	NALS					_
Occupancy Status During Abatement (Check								DOVE CO	DURT						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of At al Facility I	Hours	ent		_			Zip Code OOD, NJ 0	8701						
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emolitio					×	Full Containm Mini-Enclosure Glovebag Pro Non-Exempte	e cedure					<u>.</u>	
	ls	Locatio	on									A	Abate Ty	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	ormally d Solel ntenan odial S (12)	y by ice/	Asbesto (i.e. t	os Co herm suri	escription ntaining al system acing, \ miscell	Mater ms ins /AT, o	Г		Amount (Specify (SF or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							150 SF	2	,			
Basement						VAT				15 LF		2			
Basement						TSI			-	10 Li	- -	•			
											-				
Name of Registered Waste Hauler	ered Waste Hauler					ic Yards	3	Name o	f Regis	tered Land	dfill				
NEWARK CARTING			lauler ID 4509	No.	5	/aste		IESI							
City, State NEWARK, NJ						oosal Da 09/16	ate	City, Sta BETH		M PA					
Completed by JOSEPH PERLSTEIN	Title	NER				Signat	ure				Date 9/2		5		

) i	Print	Forr
CH 5720	NOTIFIC	CATION O	of New Jersey F ASBESTOS A NJAC 8:60 and	BATEN	ENT	Dr	E C E		\mathbb{V}		
Date of Notification (1) 9/27/16		Name of B	uilding Owner/O Gina Kendra	perator (2)		SEP 3	0	2016		里
Agencies Notified Type Notification		Street Add			and the same of th		SBESTOS	COL	VTR	71 8	
X		City, State North Be	, Zip Code each Haven I	VJ 080	08	730	LICE	VSII	iG	<u></u>	
Emergency (in justification) DCA Emergency (in justification) Cancellation	ncluding	Name of C Justin	Contact			Tele	phone Numbe	er -			
		FACILI	TY INFORMATI	ON							_
Name of Facility Where Abatement is Taking Justin & Gina Kendra Street Address	Place (3)				Type of Facility (4 School (K-12 Subchapter Other (i.e. p.)	2) 8 (Othe	r than K-12) commercial t	ouildir	nas, h	omes	
City (5)					Other (i.e. pretc.) Square Feet 1000+		Floors		g. Age		
North Beach Haven NJ 08008 County (6) Ocean		County Co	ode (7) SE ONLY)		Current Use (Prior Home	or if beir	ng demolished	i)			
Name of Monitoring Firm Hired by Building C	owner (8)	ASCM	No.		of Abatement Con aco Inc.	tractor	(9)				
Street Address					Address 30x 329						
City, State, Zip Code					State, Zip Code t Berlin NJ 080	91			*		
Project Manager for Monitoring Firm		Telephon	e No.		hone No. 753-9800		License No.				
Start Date (10) 9/10/16	Scheduled Co 9/14/16	mpletion [Date (11)	Name	of OSHA Monitor 10						
Occupancy Status During Abatement (Chec				Stree	Address						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Abate nal Facility Hou	irs		City,	State, Zip Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	Renov X Demo				Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				÷	
Location of	Is Local	ally		escriptio					Abate Ty _l	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used So Mainter Custodia (12	nance/ il Staff?	(i.e. therm		Material (ACM) ms insulation, 'AT, or aneous)	(Amount Specify F or LF)	Removal	Repair	Encapsulat	Enclosure

≥160 sf or ≥260 lf	×	emoliti	ion			×	Glovebag Pro		able Pro	cedur	е	
	1 22	Locati	2000			, January 1				Abate		è
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normalied Sole iintenai todial S (12)	ly by nce/	Asbes (i.e.	tos Co therm	Description of ontaining Mate nal systems in facing, VAT, or miscellaned	erial (ACM) sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								(0	_
Exterior Siding			х		Ex	terior Sidir	ng	2200 SF	×			_
									-	-		-
		-										
Name of Registered Waste Hauler United Roll Off		H	NJDEP W Hauler ID 2459		1000	oic Yards Vaste	Name o G.R.O	Registered Land	fill			
City, State Elm NJ						posal Date 4/16	City, Sta Morris	ate ville PA 19067	7			
Completed by Anthony T Perna	Title Pres	sident				Signature		THE STREET, BLEET, PAGE	Date 9/27/1	6		

14 3759	- N			ION C	F ASB	w Jersey ESTOS ABAT 8:60 and 12:1		DE G		\mathbb{V}		Parameter Community
Date of Notification (1) 9 - 2-6 - 1 6						g Owner/Operator UNCAN	(2)	JU SEP	30	201	6	L
	pe Notification		-	Street		UNCAN	-			-	-	+
D EPA DEP D	Initial Amended			City St	tate 7in (Code.		ASBESTO LICI	S CON ENSIN		OL	8
≅ DOL	Amendment # Emergency (including iustification)	ing	-	Name (of Contac	4	1.01	Telephone Nun	niber			
	Cancellation			MR	. Du	INCAW						
				FACI	LITY INF	ORMATION						
Name of Facility Where Abat	tement is Taking Pl	ace (3)					Type of Facility	(4)				
M.R. DWNG Street Address	AN						School (K-1: Subchapter Other (i.e. p	8 (Other than K-12 rivate & commercial	2) ·	igs,		
City (5)			_				Square Feet		Bidg.	Age	4	
BAZGENFIELD							1800 .	. 2		3 y	RS	
COUNTY (6) BERGEN				County ONLY)) (STATE USE	Current Use (F	rior if being demol	ished)	,		
Name of Monitoring Firm His	ed by Building Own	er	ASCM	No.	2	Name of Abater	nent Contractor (
(8) Street Address						Best Re	moval In	ıc			-	
Street Address				20			th River	S+				
City, State, Zip Code						City, State, Zip (
Project Manager for Monitori	no Fitto	T	alanha	ne No.		Telephone No.	ack, H.U	License No.				
Project manager for monator	19 1 att)	1.0	ciclaso	ac ING.		201-329	-7444 -	00388				
Start Date (10)	Scheduled C	Complet	ion Da	rte (11)		Name of OSHA	Monitor					
10-7-16	10-8						Environm	ental				
Occupancy Status During Al Facility Closed/Vacated D Abatement Performed Ou Other – Describe: All	uring Entire Period tside of Normal Fac	of Abat	tement	1		City, State, Zip (#	7606	¥11		
Scope of Work (Check all the	em 5pm					5. пас	CREIISACK	, N.J. 07	000			-
2 3 sf or ≥ 3 ff □ ≥ 160 sf or ≥ 260 ff	ac approy	¥.	_	■ Ren	ovation notition	Mini-	Enclosure ebag Procedure	Negative Pressur	14			
		Is	Locat	ion						A	baten Typ	
Location of Asbestos-Containing M TO BE ABAT IN Facility (13)	aterial (ACM) ED	Use	Normal ed Sole intena custod Staff? (12)	ely by nce/ iel		Description stos Containing M , thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, , or	Amount (Specify SF or LF)		Removal	Repair	T
BASEMEUT		Yes	No	N/A		P-1101 - 0	155.0	43	LF	X	\dashv	+
13/1-56/1160 1		-		X	THE	RMAC INS	ULATION	75	LI	1	+	+
	1								*			
						144						
Name of Registered Waste H Best Remova			No.	Naste F	lauler	Cubic Yards of Waste	Minerva	stered Landfill a Enterpr	ises	,	LL	С
City. State Hackensack	, N.J. 07	7601				Disposal Date	Wayne:	sburg, Oh	, 446	88	,	
Completed by	Title	ima	tor			Signature R - Volum	an		Pate 9-2	6	-//	6

State of New Jersey

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

3 2016 04:27PM NJ Asbestos Co	ntrol t	09.63	33.0664	1		page	⊇ 7			-			
09/05/2013 02:44 9732539	928				VMG (COMPA	AA IMO) E	C	5	GE	1
Ch4697		NOT	FIGATIO	State of h On OF AS nt to NJA	RESTO	PARATE	EMENT			SEP	3	0 2	-
Date of Notification (1) 09/23/2018			Name	of Buildin	g Owner kinson	Óperato Univer	r (2)	T)	ASBI	516	15.0	ON	
Agencies Notified Type Notification	n		Street	Address River F		4111161	JRY	phy phr				PHA	2
X DEP Amended Amendmen	nt#			state. Zip o				SE A	THIN	1	-	-	_
DOH juetfleation Cancellatio	1	. ê		of Contact				178	laph new	dribe	r:		_
Name of Facility Where Abetoment is Taki	ng Place	(3)	FAC	CILITY IN	FORMAT	NOI	Ingar			_		. 114.1	-
Giovatto Library		1.7		a			Type of Facility School (K				-		
1000 River Road City (5)							Subchept	BIR (CIN	er than K- & commer	12) clal by	rilding	15. 1 01	m
Teanack County (8)							Square Feet	# 0	f Fluors	T	Bidg	Aga	
Bergen			County	Code (7)	٧)		Curren(Use (P Library	rior if be	ing demoli:	shed)	_		_
Name of Monitoring Firm Hired by Building EDI Street Address	Owner (8)	ASC 009	M No.		Name	of Abatement Company In	ntractor	(B)				_
5434 King Avenue						Street	Address Plaget Avenue						****
City, State, Zip Code Pennsauken, NJ 05109			_			City, S	n NJ 07011						-
Project Menager for Monitoring Firm Tom Pruno			Telepho	one No. 06-4545		Telaph	one No. 253-8828		Licenses	40.			_
Start Date (10) 09/27/2016	09/29	/201B	mpletion	Dale (11)		Name	of OSHA Monitor Company Inc		00704				
Occupancy Status During Abatement (Chec							Address			_			_
Facility Closed/Vacated During Entire if Abstement Performed Outside of Norn Other - Describe: Ekterior work, occup	THE LABOR		neni S			City. St	ate, Zip Code						_
Scope of Work (Check All That Apply)													
≥3 sfor≥3 H ≥150 sfor≥200 H		Renova				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	€ cedum				**	
Location of		Locat Normal	lu							1.	Abat	amen	it
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Uas Ma	ed Sola intena todlar S (12)	lý by noe/	Asbesi (i.e.	tos Corte thermal : surfac	cription (Lining Ma Lystems Ing, VAT Iscallane	rtenal (ACM) Insulation, or	(8)	nount pecify or LF)	Removal	Repair	an Encapsulate	
Exterior	Yes	No	N/A							18	2	date	
and a sept control	-		X		Wind	ow cau	ilik	30	0 LF	x			1
							1						-
Name of Registered Waste Hauler		I M	JDEP VV	arie	Ouble to	Aud:		Yan and	-				
Newark Carting Inc		H	suler 10 /		Cubic Y		GROWS		sd Landfill				
City, State Newark, NJ Completed by					Disposa	Date	City, State Morrievi			-	-		
Characteristics 11	Title		Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Ow				[INCHIENT	HE, FA					

Date 09/23/2016



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	Ç	SEP	3 0	2016		
	SBE		S CC ENSI		OL &	
Telepho	ne Nur	mber				
		-	W			

Date of Notification (1) 09/26/2016		Name of Jessica	Building (Owner/C	perator	(2)						<u>J U</u>	201	0		
Agencies Notified	Type Notification			Street Ac	idress					+	AS			S CC	ONTE	IOL
EPA DEP DOL	Initial Amended Amendment Emergency (- L	Fair La	e, Zip Co wn, NJ		0							140	NG	
DOH DCA	justification) Cancellation	\$ \$\frac{1}{2}\$		Name of Jessica						Tele	phone	Numi	per			
Name of Facility Where A	Abatement is Takin	g Place (3)		FACIL	LITY INFO	RMATI	ON	Type of	Facility (4	1)						
House Street Address								Su	hool (K-12 bchapter her (i.e. pr	8 (Othe			build	ings,	home	s,
City (5) Fair Lawne								Square N/A		# of N/A	Floors			dg. A	ge	
County (6) Bergen	7			County C	code (7) ISE ONLY)			Current	Use (Pric	or if beir	ng dem	olishe	ed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.				ment Con nent, In		(9)					
Street Address							Street	Address	en Aver							
City, State, Zip Code							City, S	tate, Zip wa, NJ	Code		,	01				
Project Manager for Mon	roject Manager for Monitoring Firm						Teleph	none No. 345-868			Licens					
Start Date (10) 10/06/2016		Scheduled		npletion [Date (11)		Name	of OSHA			0101					
Occupancy Status During Facility Closed/Vaca Abatement Perform	ated During Entire	Period of Al	atem	nent			Street 11 R	Address	en Aver							
Other - Describe: _ Scope of Work (Check A						_	1000 PM 100 PM	wa, NJ		De-17575-110						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	іі тпас Арріу)		enova emolit				×	Mini-l Glove	Containme Enclosure ebag Proc Exempted	e cedure	0				e	
			.ocati											Abate	ement /pe	
Location Asbestos-Containing TO BE AB, In Facil (13)	Material (ACM) ATED	Used	Sole	ly by nce/		tos Con therma surfa		Material (A s insulation T, or		. (8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
basem	ent	Yes	No	N/A		nine	insula	tion		0	5 LF		15		е	
Dasein	ent		^			pipe	iliSula	illon		9	5 LF		х			
Name of Registered Was			50.00	JDEP W lauler ID		Cubic of Wa	Yards		Name of							-
D&S Abatement, Inc.						TBD	sal Date		Waste I		gemer	nt of	PA			
Totowa,NJ						TBD			Tullytov		4					
Completed by Ned Joksimovic							Signature	>	N			Dat 09		2016		

State of New Jersey
OTUFICATION OF ASSESTOS ABATEMENT

September 27, 2016 Agencies Notified [X] EPA [] Initial Notification [] DEP [X] DOL [X] Emergency (including instification)	(h302	5860	NUI	(P	ursuant t	o NJAC 8:6	0 and	12:120))		DEGE		\mathbb{V}		1
Special Control Special Control Control City, State, Zip Code Special Control Control City, State, Zip Code Special Control Control Control Control Control Control Control Control City, State, Zip Code Special Control Co	Date of Notification (1) Septe	mber 27, 201	6		N	ame of Buildir	ng Owne D	r/Opera ennis	tor (2) Suszk	owski	DI SEP	30	2018	6	1
Name of Pacifity Where Abatement is Taking Place (3) Residence	Agencies Notified T [x] EPA [[] DEP [] [X] DOL	ype of Notification Initial N Amend	n Notificat ed Noti ment#_	fication			Code F	reeho	ld, NJ	07728	Longer Agentage Agents	S COI ENSIL	NTRC NG	8_18	
Type of Facility Where Abatement is Taking Place (3) Street Address	[x] DOH	justific	ation)	cluding			I		Suszk		elephone Number		-		
					FACIL	ITY INFO	RMAT	ION	T	f Davilley (A)					
County (b) County (c) Cou	Resid	ement is Taking F ence	Place (3)			-			Type	[]	Subchapter 8 (other Other (i.e., private			buildir	ıgs,
Name of Monitoring Firm Hired by Building Owner (8)	City		Count	y (6)					2	2000 sf	2	Bldg.			
Street Address Stre	Freehold		Mon	mouth					Curre						
Street Address 1889 Route 9, Unit 61	Name of Monitoring Firm Hi	red by Building C)wner (8	3) C.	A	ASCM No.	N	lame of	Abatem	ent Contractor Guardia	(9) an Contracting,	Inc.			
City, State, Zip Code Toms River, NJ 08755 Toms River, NJ 08755 Toms River, New Jersey 08755-1271	Street Address		100000			*2			* 10-7-10-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-		oute 9, Unit 61				
Project Manager for Monitoring Firm Telephone Number Telephone	City, State, Zip Code	ity, State, Zip Code Toms River, NJ 08755								Toms F			55-12	71	
Scheduled Start Date (10) 9/28/16 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Other – Describe Street Address 1056 Stelton Road City, State, Zip Code Piscataway, New Jersey 08854 Scope of Work (Check all that apply) [x] Mini-Enclosure [x] Mani-Enclosure [x] Mani-Enclosure [x] Mani-Enclosure [x] Mini-Enclosure [x] Mani-Enclosure [x]	Project Manager for Monitor	roject Manager for Monitoring Firm Telephone Nu						732-34	9-993	2		umber			
Street Address Street Address Street Address	Scheduled Start Date (10) 9/28/16			9/29/		n Date (11)					L. Analytical				
Scope of Work (Check all that apply)	[X] Facilit	ry Closed/Vacated ment Performed	d During	g Entire Perio	od of Abate acility Hou	ement rs				Code		ey 088	54		
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Maintenance/Custodial Staff (12) YES NO N/A Basement Normally used Solely by Maintenance/Custodial Staff (12) YES NO N/A Asbestos pipe insulation Normally used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) YES NO N/A A L L L L L L E E E N N M P C C C O I P O I P O I P C I R E E E N N M P C C C O I P O I P O I R E E E N N N A L L L E E E N N N C I P C I R E E E N N N N R C I R R R R E E E N N N N R R R R R R E E E N N N N	[x] >3 sf	or ≥3 lf		[x]				[x] [x] [] M] G	ini-Enclosure lovebag Proced	ure	Procedu			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Maintenance/Custodial Staff (12) Maintenance/Custodial Staff (12) YES NO N/A Basement Normally used Solely by Maintenance/Custodial Staff (12) YES NO N/A Asbestos pipe insulation Normally used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) VAT, or other miscellaneous) Asbestos pipe insulation Figure 1 Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Title Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) A A L V R S S O I P O O I P												Abat	ement '	Гуре	
Basement X Asbestos pipe insulation 30 lf X Basement X Asbestos boiler insulation 30 lf X Name of Registered Waste Hauler Outer Towns River, New Jersey Signature Date Completed by (Print or Type) Title Signature City, State C	Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Normally used Solely by Maintenance/Custo Staff (12)						Asbes Ma (i.e., t insula	stos-Co terial (therma ation, s VAT,	ontainir ACM) I system surfacin or	ns g,	(Specify SF	E M O V A	E P A I	N C A P S U L	N C L O S U R
Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Asbestos botter instriction Asbestos botter instriction Cubic Yards of Waste Name of Registered Landfill T.R.R.F. City, State City, State Disposal Date 9/30/11/16 Tullytown, Pennsylvania Date 9/27/2016	Basement			X										-	-
Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Title City, State Title Tit				X		Asbestos	boiler	insula	ation		30 lf	X	-	-	
Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Title City, State Title Tit												-	-		
City, State Toms River, New Jersey 9/30/11/16 Tullytown, Pennsylvania Date 9/27/2016	Guardian Co	Hauler ntracting, Inc		NJDEP W	20223						tered Landfill				
	Toms River, New Jersey Completed by (Print or Type) Title				9/30/	/11/16	\	Tull	ytown,	Pennsylvan	ia?	100000		.6	

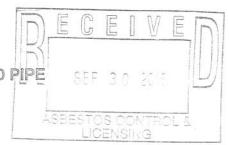
Guardian Contracting, Inc. 1889 Route 9 Guite 61 Toms River, New Jersey 08755



DEMOLITION / RENOVATION NOTIFICATION

Operator	Project #:	Postmark:		Notification	on:		
L	TYPE OF NOTIFICATION (O - Original R - Revised C - C	Cancelled):	0	П.	IS ASBESTOS PRESENT? (Yes	s/No):	Y
Ш.	FACILITY INFORMATION (identify owner, removal contract	or and other o	perator)		35 - 43 33 33		
	OWNER NAME: Dennis Suszko	owski					
	Address:						
	City: Freehold State:	New Jer	rsey	Zip:	07728		
	Contact: Dennis Suszkowski			Tel:	732-598-3131		
	REMOVAL CONTRACTOR: Guardian Con	ntracting, Ir	ıc.		NJ License: 00624	8	
	Address: 1889 Route 9	, Unit 61					
	City: Toms River State:	New Je	rsey	Zip:	08755		
	Contact: Nicholas Ferr	nicola		Tel:	732-349-9932		
	OTHER OPERATOR (if different)				NJ License:		
	Address:						
	City: State:			Zip:			
	Contact:			Tel:			
IV.	TYPE OF OPERATION (D - Demo O - Ordered Demo	R - Renovation	n E - Emergency	Renovation):	R		
V.	FACILITY DESCRIPTION (Including building name, number						
			80				
	105 XXI at Main Chant						
	11000		Prsev	County:	Monmouth		
	P	1,011 31					
	Site Location: Basement Puilding Size: 2000 sf # of F	lo ara:	2	Age in Y	Years: 60		
	Building Size. 2000 31	10015.	Prior Use:	Resider			
	Present Use: Residence PROCEDURE, INCLUDING ANALYTICAL METHOD, IF	A I QQ O Q Q Q A				RIAL:	
VI.	PROCEDURE, INCLUDING ANALY FICAL METHOD, IF	AFFROIRIA	IIL, 03DD 10 DD	101 112110			
	IS MATERIAL ASSUMED TO BE ASBESTOS?						
VII.	APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:					101 000	friable Material
	1. Regulated ACM to be removed		RACM		LOCATION		To Be noved
	Category I ACM not removed Category II ACM not removed		To Be Removed			Cat I	Cat II
	6100 0010	Ashes	tos pipe/boiler i	nsulation	Basement	-	
	- P (ASUCS	tos prperboner r			-	
	Surface Area (Square feet):						
	RACM Off Facility Component (Cubic feet):			.5			
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	Start:	9/28	3/16	Complete: 9/2	29/16	
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	Start:		3/10	Oomplete.		

"WRAP AND CUT" REMOVAL PROCEDURES FOR INSULATED PIPE



DESCRIPTION OF THE WORK

This Section describes the procedures to remove asbestos containing insulating materials utilizing "wrap and cut" methods.

PRODUCTS

- Amended Water
- Wettable/Adhesive Lagging Cloth
- Encapsulant (if specified in Section "Scope of Work")
- Disposal Bags
- Six mil polyethylene sheeting
- HEPA vacuum
- Duct Tape
- "Saw-zall"

DESCRIPTION OF THE WORK

All work shall be conducted in strict accordance with applicable federal, state and local regulations and shall be coordinated through the Owner's representative.

AbateTech, Inc. shall adequately wet all ACM with amended water and wrap all exposed thermal system insulation with two individual layers of 6-mil polyethylene sheeting. Each layer shall be sealed with high grade duct tape, and "candy-striped" around the pipe system to the best seal possible.

Upon the wetting, wrapping and sealing of thermal system insulation AbateTech, Inc. shall cut the pipe in existing spatial openings into sections no greater than ten (10) linear feet. These wetted, wrapped and sealed sections shall be properly labeled and disposed of as asbestos waste.

Where no spatial openings are present, AbateTech, Inc. shall perform glove bag abatement to remove approximately six (6) inches of ACM thermal system insulation to facilitate the cutting of the pipe as described.

AbateTech, Inc. shall remove all asbestos containing materials from the work site in double 6-mil polyethylene waste bags or impermeable packages. All asbestos materials shall be adequately wet with amended water using a fine low pressure sprayer or other wetting mechanism. The surfactant used by AbateTech, Inc. shall be available at all times at the work site. AbateTech, Inc. shall assure that all asbestos waste materials are sufficiently saturated with amended water to prevent fiber emission and/or visible emissions.

All asbestos waste bags, pipe sections and other waste packages shall be labeled with the

prescribed Federal OSHA warning signs and shall include site specific waste generator information.

AbateTech, Inc. shall provide a fully enclosed, watertight waste container complete with a locking device for storage of all contaminated waste removed from the site. The waste container shall have asbestos warning signs affixed to all sides and doors

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Date of Notification (1)				Name	of Building	Owner/Operator (2	2)							
9/	27 /16	-113		South Jersey Gas / Job #1609-5068 Check #8612 ASBESTOS CONTROL 8										
Agencies Notified	Type Notification			Street	Address			LIC	ENSI	NG				
⊠ EPA				1 Sc	outh Jers	sey Plaza								
□ DOLWD	☐ Amended			City, S	tate, Zip C	ode								
□ DHSS	Amendment #_			Fols	som, NJ									
DCA	Emergency (in justification)	cluding			of Contac			Telephone Number	er	1				
(NJAC 5:23-8)	Cancellation				rick Carr									
	Cancellation													
Name of Facility Mileson I	Notanantia Takina	Dless	(2)	FAC	-ILII I IIV	FORMATION	Type of Facility	(4)	-		-			
Name of Facility Where A		Place	(3)				School (K-12							
Former SJ Gas- Blo	OCK 387 LOT 1						Subchapter 8	Other than K-12)						
Street Address							Other (i.e., pr	rivate and commerc	ial buil	lding	8,			
304 Turnpike Road							homes, etc.)		Tout					
City (5)							Square Feet	# of Floors	Bla	g. Ag	e			
Atlantic City, NJ														
County (6)				Coun	ty Code (7)(STATE USE ONLY)		ior if being demolish	ied)					
Atlantic						Former SJ Gas Site								
Name of Monitoring Firm	Hired by Building (Owner (8)	ASCM	No.	Name of Abatement Contractor (9)								
Health & Safety Ser	rvices					AbateTech, I	nc.							
Street Address						Street Address								
PO Box 365						30 Maple Ave. PO Box 25								
City, State, Zip Code	A.					City, State, Zip Code								
Berlin, NJ 08009						Lumberton, NJ 08048								
Project Manager for Mon	itoring Firm		Tele	phone l	No.	Telephone No. License No.								
Jim Proctor	re des the Co r est to Arthur the t		60	9-839	-2432	609-265-2107 00529								
Start Date (10)	Sched	duled C	omple	tion Da	te (11)	Name of OSHA N	Monitor			1167-11				
10 / 10 /	The second secon		. 25	. / _		EMSL Analytical								
Occupancy Status During														
☐ Facility Closed/Vacate				ment		200 Route 13	0 North							
☐ Abatement Performed					cribe	City, State, Zip C	ode							
Time of Abatement: _	AMPI	M/	_PM-		AM	Cinnaminsor								
Scope of Work (Check a	Il that apply)										-1,745			
		_					tainment with Neg	gative Pressure						
≥3 sf or ≥3 lf >160 sf or >260 lf			novati			☐ Mini-End	dosure g Procedure							
≥160 sf or ≥260 lf		△ De	HIOHEIC	JI I.		⊠ Non-Exe	empted (*) and No	n-Friable Procedure	е					
		Is	Locat	ion					Aba	ateme	ent Ty	уре		
Location	of		Norma			Description of			Z.	R	П	ш		
Asbestos-Containing			d Sole intena		Asbe	estos Containing Ma e., thermal systems	aterial (ACM)	Amount (Specify	Remova	Repair	ıcap	Iclo		
TO BE ABA		Cus		Staff?	(1.0	surfacing, VAT		SF or LF)	val	7	Encapsulate	Enclosure		
(13)	•		(12)	T	+	other miscellane	eous)				ate			
		Yes	No	N/A	1									
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Name of Registered Was	ste Hauler		100	IJDEP \ lauler II		Cubic Yards of Waste	Name of Regis							
AbateTech, Inc.				18750		40	A.C.U.A. L	anomii						
City, State						Disposal Date	City, State							
Lumberton, NJ						10/28/16	Atlantic C	ity, NJ						
Completed By (Print or T	ype) Title	e				Signature	T IV	Dat	te /	_1				
Gwendolyn Trumbe	533 2)perat	ions	Coord	inator		hiM		9/2	17/	16			
ASB-41							U U			L				

ASBESTOS INVENTORY SECTION 3.0

Former South Jersey Gas Florida Avenue MGP Site

Location

Block 387, Lot #9 & #10

Lot #9, Garage #1

Exterior

Exterior Exterior Lot #9, Garages 2-5

Block 387, Lot #5 and #6

Exterior - Island Ave. Side

4th Garage

1st Floor - Garage Area

1st Floor - Garage Area

1st Floor - Garage Area and Shop

1st Floor - Shop (on Floor - Middle Area) 1st Floor - Shop (covered in Fiberglass)

1st Floor - Shop (North end)

Material

Black Mastic A/W Gray Wall Caulk Transite Panels

Black Roofing Flashing

Black Roofing

Black Mastic on Stored Roofing Shingles

Transite Shingles

Black Mastic on Roof Shingles

Black Tar on Window Black Window Caulk Transite Pipe Exhaust

Compressed Paper Pipe Insulation Black Roofing Paper

Black Flashing

Quantity

30 square feet (SF) 4 linear feet (LF)

480 SF

30 LF

50 SF

(200 SF

40 SF

20 SF 8 LF

120 SF 23 LF

80 LF

60 SF

C

SECTION 3.0 ASBESTOS INVENTORY

Former South Jersey Gas Florida Avenue MGP Site

Location	Block 387, Lot #5 and #6

Roof Exterior

2nd Floor

Exterior

1st Floor - Shop

Floor – She Exterior

Drywall Material
Black Flashing Material
Black Tar on Window

Black Window Caulk

Gray Window Glaze Black Tar on Concrete

40 SF

930 SF 300 LF 20 SF 8 LF 32 SF

Quantity

Material

SEP 3 0 2016

ASBESTOS CONTROL & LICENSING

- Quantities are approximated and to be used for budget purposes only.

ASBESTOS INVENTORY SECTION 3.0

Former South Jersey Gas Florida Avenue MGP Site

Location

Block 387, Lot #1 304 Tumpike Rd.

Material

Quantity

Office Corridor

Offices Offices Exterior

Dark Brown with Light Brown Streaks 12" x 12" Floor Tile/Mastic

2,584 SF

350 square feet (SF)

400 linear feet (LF) 40 SF

Light Brown with White Streaks 12" x 12" Floor Tile/Mastic

Transite Window Sills

Fire Door's

Black Roof Flashing

Throughout



Quantities are approximated and to be used for budget purposes only.





DESCRIPTION OF THE WORK

This Section describes the procedures to remove asbestos containing insulating materials utilizing "wrap and cut" methods.

PRODUCTS

- Amended Water
- Wettable/Adhesive Lagging Cloth
- Encapsulant (if specified in Section "Scope of Work")
- Disposal Bags
- Six mil polyethylene sheeting
- HEPA vacuum
- Duct Tape
- "Saw-zall"

DESCRIPTION OF THE WORK

All work shall be conducted in strict accordance with applicable federal, state and local regulations and shall be coordinated through the Owner's representative.

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prescribed Federal OSHA warning signs and shall include site specific waste generator information.

AbateTech, Inc. shall provide a fully enclosed, watertight waste container complete with a locking device for storage of all contaminated waste removed from the site. The waste container shall have asbestos warning signs affixed to all sides and doors

CK8613



Date of Notification (1)						Owner/Operator (2			V				
9 / 27 /	16		South Jersey Gas / Job #1609-5068 Check #8613SBESTOS CONTROL 8										
Agencies Notified Type Notifical	tion			Street	Address								
⊠ EPA ⊠ Initial				1 S	outh Jers	sey Plaza							
☑ DOLWD ☐ Amended			H		state, Zip C								
□ DHSS	67.4	_			som, NJ								
DCA Emergence [USAN] Emergence [USAN] Emergence [USAN] Emergence [USAN] [USAN] Emergence [USAN] [USAN] Emergence [USAN] [ing	+	207 WWY 11	of Contac	1		Telephone Numb	er				
(NJAC 5:23-8) justificatio	0.00				rick Carr								
				- 11 - 12 - 13 - 13		FORMATION							
Name of Facility Where Abatement is Ta	aking Pla	ce (3))	174	JILI11 110	I ORMATION	Type of Facility	(4)					
Former SJ Gas- Block 387 Lot 5			,				School (K-12						
Street Address			-				Subchapter 8	(Other than K-12)					
300/302 Turnpike Road							Other (i.e., private and commercial buildin homes, etc.)				JS,		
City (5)				J			Square Feet	# of Floors	Blo	dg. A	ae		
Atlantic City, NJ							Oquare 1 cor	01710010	D.,	3.7	90		
			1,000	Cour	ty Codo /7)(STATE USE ONLY)	Current Use /Pri	ior if being demolis	hed)				
County (6)					ity Code (7				icaj				
Atlantic		(0)	- 1			Politiei 33 das oite							
Name of Monitoring Firm Hired by Buildi	ing Owne	er (8)	1	ASCM	No.		tement Contractor (9)						
Health & Safety Services						AbateTech, I	===						
Street Address						Street Address							
PO Box 365							Ave. PO Box 25						
City, State, Zip Code						City, State, Zip Co							
Berlin, NJ 08009						Lumberton, I	on, NJ 08048						
Project Manager for Monitoring Firm		7	elep	hone	No.	Telephone No.							
Jim Proctor			60	9-839	-2432	609-265-2107							
Start Date (10)	cheduled	Com	plet	ion Da	te (11)	Name of OSHA N	lonitor						
10 /10 /16	_10_	/_	28	_ / _	16	EMSL Analyt	ical						
Occupancy Status During Abatement (C	heck onl	y one	:)			Street Address							
Facility Closed/Vacated During Entire						200 Route 13	0 North						
Abatement Performed Outside of No						City, State, Zip Co	ode						
Time of Abatement:AM	PIVI/		-IVI		AIVI	Cinnaminsor	n, NJ 08077						
Scope of Work (Check all that apply)						⊠ Full Con	tainmant with Nac	rativa Draesura					
☐ >3 sf or >3 If	П	Reno	vatio	n		⊠ Full Con	tainment with Neg dosure	jative Piessule					
≥160 sf or ≥260 lf		Demo				⊠ Gloveba	g Procedure						
						Non-Exe	mpted (*) and No	n-Friable Procedur	_				
		Is Lo	cati mali						Ab	_	ent T	ype	
Location of Asbestos-Containing Material (ACM)	l	Jsed S			Acha	Description o stos Containing Ma		Amount	Rei	Repair	E	Enc	
TO BE ABATED	1	Maint				., thermal systems		(Specify	Remova	oair	aps	Enclosure	
IN Facility	C	ustod	lial S 12)	staff?		surfacing, VAT		SF or LF)	8		Encapsulate	ure	
(13)	Ye		No.	N/A	1	other miscellane	ous)				6		
Please see attached highligted		-	<u> </u>		Please	see attached hig	ahlighted	See attached		П	П	П	
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Name of Registered Waste Hauler			IN.	JDEP \		Cubic Yards of	Name of Regis	stered Landfill					
				auler II		Waste	A.C.U.A. L	andfill					
AbateTech, Inc.		-,0,0		18750)	40	City, State		-				
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City, State						Disposal Date	500	tv. NJ					
City, State Lumberton, NJ						10/28/16	Atlantic Ci	-	to				
City, State	Title				inator	A STATE OF THE STA	500	ty, NJ	te _a /	7:	ili	(0	

ASBESTOS INVENTORY SECTION 3.0

Former South Jersey Gas Florida Avenue MGP Site

Location

Block 387, Lot #9 & #10

Lot #9, Garage #1

Exterior Exterior Exterior

Lot #9, Garages 2-5

(Breeze Principle)

Block 387, Lot #5 and #6 300/302 Turnpille Rd.

Exterior - Island Ave. Side

4th Garage

1st Floor - Garage Area

1st Floor - Garage Area

1st Floor - Shop (on Floor - Middle Area) 1st Floor - Garage Area and Shop

1st Floor - Shop (covered in Fiberglass)

1st Floor - Shop (North end)

Material

Black Mastic A/W Gray Wall Caulk Transite Panels

30 square feet (SF) 4 linear feet (LF)

30 LF

480 SF 50 SF

Quantity

Black Roofing Flashing Black Roofing Black Mastic on Stored Roofing Shingles

Transite Shingles

Black Mastic on Roof Shingles

Black Tar on Window Black Window Caulk Transite Pipe Exhaust

Black Roofing Paper

Compressed Paper Pipe Insulation Black Flashing

THE PERSON

1200 SF

40 SF

20 SF. 8 LF

120 SF 23 LF

C

80 LF

60 SF

ASBESTOS INVENTORY

Former South Jersey Gas Florida Avenue MGP Site

Quantity		80 SF	30 SF	6 SF	360 SF	36 SF	96 SF	150 SF	38 <u>L</u> F	20 SF	3 LF	5 LF	20 SF	2 SIF	20 SF	550 SF	3040 SE	512 8度	E S 09
Material		Black Window Glaze	Brown Flooring	White Board Insulation	Drywall Material	White Paper Under Metal Ceiling	Transite Panels	Drywall Material	Compressed Paper Pipe Insulation	Black Roofing Debris	Transite Pipe	Air Cell Pipe Insulation	Corrugated Transite Ceiling Material	Off-White Chimney Packing	Decorative Transite Wall Panels	Drywall Material	Brown Floor Material	Brown Decorative Linoleum	Black Flooring Material
Location	Block 387, Lot #5 and #6	1st Floor – Shop	1st Floor – Shop	1st Floor - Shop (At Acid Storage)	1st Floor – Shop	1st Floor – Shop (NW Side)	1st Floor - Shop (Stored on West Side)	1st Floor — Storage	1st Floor — Storage	1st Floor – Storage	1st Floor - Storage (Gas Meter Room)	1st Floor – Storage	1st Floor — Storage	1st Floor – Storage	1st Floor - Storage (by stairs to 2nd Floor)	Stairs to 2 nd Floor	2 nd Floor	2 nd Floor (Payroll)	2 nd Floor (Electrical Closet)

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2016

SECTION 3.0 ASBESTOS INVENTORY

Former South Jersey Gas Florida Avenue MGP Site

Quantity

930 SF 300 LF

32 SF

40 SF

20 SF

8 LF

Material	Drywall Material	Black Flashing Material	Black Tar on Window	Black Window Caulk	Gray Window Glaze	Black Tar on Concrete
Block 387, Lot #5 and #6	2 nd Floor	Roof	Exterior	Exterior	1st Floor – Shop	Exterior

⁻ Quantities are approximated and to be used for budget purposes only.



SECTION 3.0 ASBESTOS INVENTORY

Former South Jersey Gas Florida Avenue MGP Site

Location

Material

Quantity

Block 387, Lot #1

Office Corridor

Offices Offices Exterior

Dark Brown with Light Brown Streaks 12" x 12" Floor

2,584 SF

x 12" Floor

350 square feet (SF)

Tile/Mastic

Light Brown with White Streaks 12" x 12" Floor Tile/Mastic

Transite Window Sills Black Roof Flashing

Fire Doors

40 SF

400 linear feet (LF)

Throughout

5

- Quantities are approximated and to be used for budget purposes only.





DESCRIPTION OF THE WORK

This Section describes the procedures to remove asbestos containing insulating materials utilizing "wrap and cut" methods.

PRODUCTS

- Amended Water
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Date of Notification (1)				Name	of Building	g Owne	r/Operator (2)		SEP 3	0	2016		
9 /	28 /	16			PSE	&G / Jo	b#16	09-5061 C	heck # 8615	-				
Agencies Notified	Type Notifica	ition			Street	Address	7			/200	2072	201	75-52	vi (
⊠ EPA					400	0 Hadley	Road			ASDE	STOS	اقیان ا ۱۱۱۵۱		/L 0
□ DOLWD	☐ Amended					tate, Zip C				Manufichal desired				
□ DHSS □	Amendme					th Plaini		٧J						
☐ DCA (NJAC 5:23-8)	☐ Emergend		iding	-	Name	of Contac	t			Telephone Nu	umber			
(NJAC 3.23-6)	☐ Cancellati				Gre	g Maron	е							
						CILITY IN		ATION						
Name of Facility Where	Ahatement is T	aking P	lace (3)	176	71L11111			Type of Facility (4	(-)				
PSE&G Control H		uning i	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0)					☐ School (K-12)	#5 				
Street Address	0400				77				Subchapter 8 (Other than K-12) Other (i.e., private and commercial building					
1133 Springfield I	24								homes, etc.)	vate and comr	nercial b	ıllalın	gs,	
City (5)									Square Feet	# of Floors	В	dg. A	.ge	
Union, NJ 07083														
County (6)					Coun	tv Code (7	7)(STATE	USE ONLY)	Current Use (Prio	r if being dem	olished)			
Union					Journ		//		Control Hous					
Name of Monitoring Fir	m Hired by Build	fina Ow	ner (8) [ASCM	No.	Name	e of Abateme	ent Contractor (9)					
Health and Safety		aning Oir	1101 (0	'			20 20 20 20 20 20	ateTech, I						
Street Address	00111000							t Address						
PO BOX 365						30	Maple Ave	e. PO Box 25						
City, State, Zip Code									e, Zip Code					-
Berlin, NJ 08009							100	Lumberton, NJ 08048						
Project Manager for Mo	onitoring Firm			Tele	phone	No	Telephone No. License No.						-	
Jim Proctor	orneorning i mini		8.		6-452		609-265-2107 00529							
Start Date (10)		Schedule	ed Co						OSHA Monitor					
10 / 10					/		EMSL Analytical							
Occupancy Status Duri								t Address						-
☐ Facility Closed/Vac					nent			0 Route 13	0 North					
☐ Abatement Perform						cribe	1000000	State, Zip C						
Time of Abatement:									n, NJ 08077					
Scope of Work (Check	all that annly)						011	mannio o	1, 110 00011					
	all triat apply)	200	200000						tainment with Nega	ative Pressure				
≥3 sf or ≥3 lf>160 sf or >260 lf		₽ E	☑ Rer	ovati				Mini-End Gloveba	closure g Procedure					
☐ ≥100 St 01 ≥200 II			_ DGI	TOTILIO	11			Non-Exe	empted (*) and Non	-Friable Proce	edure			
			Is	ocat	ion						Al	aten	nent T	ype
Location				orma	lly ly by			Description	20.0	A	Re	Re	E	回
Asbestos-Containin TO BE Al		1)		ntena				ontaining Ma nal systems	aterial (ACM) insulation.	Amount (Specify	Removal	Repair	cap	Enclosure
IN Fac			Custo		Staff?	(su	rfacing, VAT	, or	SF or LF)	va va		Encapsulate	ure
(13)			(12)	N1/A	-	othe	er miscellane	eous)				te	100
			Yes	No	N/A					40.15		1	-	
Control House		Į L				Caulk				40 LF				-
Control House				\boxtimes		Stucco)			25 SF				L
		-	7									Tn	П	Г
Name of Desisters 410	aata Haules	L	_	LI N	JDEP \	Macta	Cubic	Yards of	Name of Regist	ered Landfill		1		
Name of Registered W				2.62	auler II		Wast		G.R.O.W.S.					
Waste Manageme	nit.	hill and the second			18750		10		West of the second seco					
City, State								osal Date	City, State	D.A.				
Camden, NJ								/12/16	Tullytown,					_
Completed By (Print or		Title	5-		-: 00	80 80		Signature	AAN		Date	2.8	166	
Gwendolyn Trum	betti	Ope	eratio	ons (Coord	inator		1 N	NVM		191	00	100	



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1	11	3377		10
	ij.	W	L	

													- 111	
Date of Notification (1)	28 / _	16			Name of Building Owner/Operator (2) JC Penney Corporation / Job #1609-5069 Check # 26 7/ 2016									
Agencies Notified	Type Notifica	ition				Address 1 Legacy	Drive MS 2108		ASSEST	CS G	ONT	ROL	183	
⊠ DOLWD	☐ Amended					tate, Zip C								
□ DHSS	Amendme	-			10000	no, Texas								
☐ DCA (NJAC 5:23-8)	☐ Emergend		luding		a Salada di	of Contac			Telephone Num	ber				
(113/10/3.25-0)	Cancellat				Tim	othy Par	·ks							
							IFORMATION							
Name of Facility Where	Abatament is T	akina	Piace	(3)	IA) LETT 1 114	II ONWATION	Type of Facility (4)					
JC Penney- Woodb							17	School (K-12						
Street Address	orrage Cerrie	1 010	IC WI	500				☐ Subchapter 8	(Other than K-12)				
428 Woodbridge C	enter Drive							Other (i.e., pr homes, etc.)	ivate and comme					
City (5)								Square Feet	# of Floors	Bl	dg. A	ge		
Woodbridge, NJ 07	7095													
County (6)					Cour	ity Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)				
Middlesex								Department	Store					
Name of Monitoring Firm	Hired by Build	ling O	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
Hillman Consulting	g, LLC						AbateTech, I	nc.						
Street Address							Street Address							
1600 Route 22 Eas	t, SUite #107						30 Maple Ave. PO Box 25							
City, State, Zip Code							City, State, Zip Code							
Union, NJ 07083							Lumberton, NJ 08048							
Project Manager for Mon	nitoring Firm		-	Tele	ephone	No.	Telephone No. License No.							
Thomas Rubino				9	08-688	-7800	609-265-2107 00529							
Start Date (10)	S	Schedu	uled C	omple	etion Da	te (11)	Name of OSHA Monitor							
10 / 10 /	Walter Co.				4 /		EMSL Analytical							
Occupancy Status During		Check	only o	ne)			Street Address							
☐ Facility Closed/Vacate					ment		200 Route 13	0 North						
						cribe	City, State, Zip C	17 (18 V 18 (18 18 18 18 18 18 18 18 18 18 18 18 18 1					-	
Time of Abatement: _							Cinnaminsor							
Scope of Work (Check a	Il that apply)		ari vine											
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	trat app.y/		⊠ Re				 ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure 							
			Is	Loca	tion						atem	ent T	ype	
Location	n of		1	Vorma	ally		Description of	of		1000000		T		
Asbestos-Containing	Material (ACM	1)		ed Sol	ely by ance/		estos Containing Ma		Amount (Specify	Removal	Repair	Encapsulate	Enclosure	
TO BE ABA					Staff?	(1.6	e., thermal systems surfacing, VAT		SF or LF)	oval	=	nso	sur	
(13)	,			(12)	1		other miscellane					ate	(D	
			Yes	No	N/A									
Upper Level Portrait						Floor ti	ile & Carpet Pad	ding Mastic	640 SF					
Upper Level Portrait	Studio, Wes	t				Carpet	Padding Mastic		310 SF					
The state of the s						Vaste	Cubic Yards of	Name of Regis	tered Landfill					
Abate rech, inc.						O No.	Waste 25	G.R.O.W.S	. Landfill					
City, State							Disposal Date 10/14/16	City, State Tullytown,	PA					
Lumberton, NJ							D 077534 500055	i dily to will,		ate		1		
Completed By (Print or T Gwendolyn Trumbe		Title		ions	Coord	inator	Signature	M	D	ate 9 1	28	16		



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Date of Notification (1)	29/16		T	Name o	of Building	Owner/Operator	(2) Azevedo						
Agencies Notified	Type Notification			Street	Address		1120,000	MODEDI	US C	ŮŃ	The	E	
	Initial			Olicoti	1001000	7.		[_]	CEN	SIN	<u> </u>	_	
DEP DOL	Amended Amendment #_			City, St	ate, Zip C		illside, NJ 07	7205					
☑ DOH	Emergency (including iustification)	luding	_	Nama	of Contact		illiside, iva o	Telephone Numb	er			=	
DCA DCA	Cancellation			Name (niao Azevedo	0	Telephone Ivamb	-			_	
				FAC	ILITY INF	ORMATION							
Name of Facility Where	Abatement is Taking	Place	(3)				Type of Facility	(4)					
rame of racing rivers	Resid					N	School (K-12	2)					
Street Address							Subchapter Other (i.e., p	8 (Other than K-12 rivate & commercia) ıl build	ings,			
City (5)		1000					Square Feet	# of Floors	Blo	g. Ag	e		
	Hillsi	de, N	J				1500	2		75-	-/-		
County (6)	Union				ty Code (7 ONLY)	7) (STATE	Current Use (Pr	ior if being demolis	hed)				
Name of Monitoring Firm		wner	=	ASCM N	No.		ment Contractor (9						
(8)	MECS			vijod repus		Ste	vens Environi	mental Service	s, In	c.		_	
Street Address						Street Address PO Box 322							
	PO Box 341					City, State, Zip Code							
City, State, Zip Code	rosswicks, NJ (8515				City, State, Zip	Allentown, NJ 08501						
Project Manager for Mo				phone N	Vo.	Telephone No.		License Ne.					
	eisgarber		(60	9) 298	3-4070	(609) 2	59-9688	0	0493				
Start Date (10)	Sched	luled C	omple	tion Dat	te (11)	Name of OSHA		TEGG.					
10/10/16)/20/	16				ECS		_		_	
Occupancy Status Duri						Street Address		3ox 341					
☐ Facility Closed/Vaca☐ Abatement Performe	ated During Entire Pe	riod of	Abate / Hou	ment		City, State, Zip		JOA J 11				-	
Other - Describe:		T aomit	7 1 1001			City, State, Zip		cs, NJ 08515				_	
Scope of Work (Check	all that apply)					₩ Euli Ca	ontainment with Ne	egative Pressure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati molitic			☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
		ls l	ocatio	on.			xempled () and 14	on masic mooda		bater	nent		
		No	ormally	<i>f</i>		D	- 6			Тур	е		
Location Asbestos-Containing			Solel ntenan		Asbes	Description of stos Containing Ma		Amount			П		
TO BE ABA	ATED		istodia Staff?	al	(i.e.	, thermal systems surfacing, VA		(Specify SF or LF)	Reg	Z.	пса	Encl	
IN Facili			(12)			other miscellane		01 01 21)	Remova	Repair	Encapsulate	Enclosure	
		Yes	No	N/A							ate	G)	
Basem	nent		×		Th	nermal Pipe I	nsulation	25 lf	×				
Basem	nent		×			Boiler Insu	lation	30 sf	×				
Name of Registered Waste Hauler					Waste	Cubic Yards	Name of Reg	istered Landfill					
Stevens Environmental Services, Inc.					292	of Waste 1CU		GROWS Lat	ndfill				
City-, State	Allentown, l	JI.				Disposal Date 10/20/1/6/	City, State	Morrisville,	PA				
Completed By	Allentown, I					Signature	- 1 + //	Date					
Mahlon E. S			ojec	Olgridation						9/16			

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	ASB	EST	OS	CO	NTP	OL	8

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Date of Notification (1)	29/16			Name	of Buildin	g Owner/Operator	(2) Merritt	14 4	ULI	U	U	LU 13	,			
Agencies Notified	7.															
EPA DEP	Initial Amended		-	City	State, Zip C	ada.			1 10	CEN	ISII	3(3)				
₩ DOL	Amendment #		-	City, c	state, Zip C	Princeton, NJ 08542										
DOH DCA	justification) Cancellation				of Contac			Telephone	Numbe	r						
	Caricellation			Jen	n Dionr	ie - Callaway	Realtors						-			
				FAG	FACILITY INFORMATION											
Name of Facility Where		g Place denti					Type of Facility									
Street Address		School (K-1) Subchapter	8 (Other than	K-12)												
							Other (i.e., phomes, etc.		mercial	build	dings	Ü				
City (5)						Square Feet # of Floors Bldg. Age										
	Princetor	ı, NJ	0854				6000	2		_	85	85+/-				
(8) MECS Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 Project Manager for Monitoring Firm Telepi					nty Code (7 ONLY)	7) (STATE	Current Use (Pi	rior if being de	emolish	ed)						
Name of Monitoring Firm	Hired by Building	Owner	T	ASCM	No.	Name of Abaten	nent Contractor (9))					_			
(8)	MECS					Stev	vens Environi	mental Ser	vices	, In	c.					
Street Address	DOD 24				2	Street Address	DO F	222								
City State 7in Code	PO Box 34	1				Oit Otata 7ia (30x 322					_			
	rosswicks, NJ	0851:	5			City, State, Zip C		n, NJ 0850	01							
Project Manager for Mo	nitoring Firm		Tele	phone	No.	Telephone No.		License N					_			
Bill We	eisgarber				8-4070		59-9688		00	493	3		_			
Start Date (10)	Schee			tion Da	te (11)	Name of OSHA		ECC								
10/10/16	na Abatamant (Cha		0/17/	/16		Street Address	IVI	ECS				_				
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement						Street Address	PO E	30x 341								
Abatement Performed Outside of Normal Facility Hours						City, State, Zip C	Code						_			
Other - Describe:	Crosswicks, NJ 08515															
Scope of Work (Check a	all that apply)					□ Full Co.	ntainment with Ne	native Pressu	ire							
≥3 sf or ≥3 lf Renovation						☐ Mini-Enclosure ☐ Glovebag Procedure										
≥160 sf or ≥260 lf Demoliti				on		Non-Ex	on-Friable Procedure									
			_ocatio							Α	bater Typ					
Location		Used	Sole	y by		Description o			-		1 91-		_			
Asbestos-Containing I TO BE ABA	***0.7332	ntenan ustodia	100		os Containing Ma thermal systems		Amount (Specify		70		Enc	Ш				
IN Facility	,	Staff? (12)			surfacing, VAT other miscellane	, or	SF or LF)		Remova	Repai	aps	ıclos				
(13) Yes			No	N/A		Other miscellane	ous)			val	ai-	Encapsulate	ure			
Baseme	-nf		×		Th	ermal Pipe In	sulation	15 lf	-	X	-	-	Enclosure			
		×			Duct Insula		12 lf		X		-	_				
7 10010	ttic		^			2 000 1110 0110		1. Let 1.1		/~						
									_	\neg			\neg			
Name of Registered Waste Hauler NJDEP Wast						Cubic Yards Name of Registered Landfill										
Stevens Environmental Services, Inc. Hauler ID No. 18292					No. 292	of Waste 1 CU GROWS Landfill										
City- State						Disposal Date	City, State]								
Allentown, NJ					10/17/16. Morrisville, PA											
Completed By Mahlon E. Ste	Title		oiec	t Mar	ager	Signature		Da		120	/16					
			1			147	110									

CK 2714		NOTE	FICATIO	N OF AS	New Jerse SBESTOS AC 8:60 ar	ABATE	EMENT) E	C			Print 		
Date of Notification (1) 9/28/2016	Name of Building Owner/Operator (2) Englewood Hospital							SEP 3 0 2016								
Agencies Notified Type Notification	on		Street Address 358 Engle Street							LODESTON OCKEDO						
DEP Amended			City, State, Zip Code						-	ASBESTOS CONTRO						
Emergend	y (including	g	Englewood, NJ. 07631													
	justification) Cancellation								Teli	Telephone Number						
Name of Facility Where Abatement is Tak			FAC	CILITY IN	FORMAT	ION						-				
Englewood Hospital	(ing Place ((3)					Туре	of Facility (4)							
Street Address 350 Engle Street	School (K-1 Subchapter Other (i.e. p					2) 8 (Other than K-12) vivate & commercial buildings, homes,										
City (5) Englewood, New Jersey 07631								re Feet	# of	Floors Bldg. Ag			Age			
County (6) Bergen				Code (7			Current Use (Prior if being demolished) Hospital									
Name of Monitoring Firm Hired by Building Hillman Environmental	ASC 0023	M No.			e of Abatement Contractor (9) a.B. Renovation Group., Corp.											
Street Address 1600 Route 22 East	Street Address 207 West 102nd Stre															
City, State, Zip Code Union New Jersey 07083			City, S	City, State, Zip Code New York, New York 10025												
Project Manager for Monitoring Firm Tom Rubino	Telephone No. Telep				hone No. License No. 01277											
Start Date (10) 10/07/2016		npletion Date (11) Name of OSHA Monitor N/A														
Occupancy Status During Abatement (Che				11757197	Addres	S					-					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of a	Abaten y Hours	nent			City, St	tate, Zi	p Code								
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Min Gio	Containme i-Enclosure vebag Proce i-Exempted	edure							
	100	Locati								1101111110		Abatement				
Location of No Asbestos-Containing Material (ACM) Used 3			y by	Asha		cription		(4.014)	Amount		-	Ту	ре	Г		
TO BE ABATED In Facility (13)	Mai Cust	intenar todial S (12)	Staff? (i.e. thermal surface			systems insula systems insula sing, VAT, or niscellaneous)		ion, (S		ecify or LF)	Remova	Repair	Encapsulate	Enclosure		
2-15	Yes	No	N/A		outer miscellan			ilicous)				air	ulate	sure		
3rd Floor Corridor	-		Х	Floor Tile and N			d Mastic			1000						
											-					
Name of Registered Waste Hauler		N.	IDED W	acte	T Outin V	and c		N = =								
1			JDEP Waste Cubic Yards of Waste				Name of Registered Tullytown RRF									
City, State 36 Wickatunk Road Manalapan, NJ	. 07726				Disposa	l Date		City, State 200 Bord	entow	n Rd., I	PA.					
Completed by Pedro Patrie	Title Presid		Sig	inature 1). >		Da		016						

09-27/2016

Print Form