

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

Check# 1322

Date of Notification (1) 07/08/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	1 Slope Drive City, State, Zip Code Short Hills, NJ 07078							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private house		Type of Facility (4)							
Street Address 1 Slope Drive		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Short Hills, NJ 07078		Square Feet	# of Floors						
County (6) Essex		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9)						
Street Address		Gr Tech LLC							
City, State, Zip Code		Street Address 576 Valley Road#283							
Project Manager for Monitoring Firm		Telephone No.	City, State, Zip Code Wayne, NJ 07470						
Start Date (10) 07/11/2026		Scheduled Completion Date (11) 07/12/2026	Telephone No. 973-356-3511						
Occupancy Status During Abatement (Check Only One)		License No. 01127							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Name of OSHA Monitor Envirovision Consultants, Inc							
Scope of Work (Check All That Apply)		Street Address 20-21 Wagaraw Road, Bldg.# 35 E							
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Garage			x	Duct insulation	15 LF	x			
Name of Registered Waste Hauler Gr Tech LLC		NJDEP Waste Hauler ID No. 0033785	Cubic Yards of Waste TBD	Name of Registered Landfill T.R.R.F. Inc					
City, State Wayne, NJ 07470		Disposal Date TBD		City, State Tullytown, PA					
Completed by G.Ristanovic		Title Owner	Signature Gradimir Ristanovic			Date 07/08/2026			

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

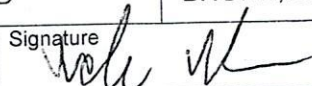
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RECEIVED

Date of Notification (1) 05/20/2026		Name of Building Owner/Operator (2) _____							
Agencies Notified	Type Notification	Street Address 8 Bayside Drive							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Atlantic Highlands, New Jersey 07716							
		Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4)							
Street Address 8 Bayside Drive		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Atlantic Highlands		Square Feet	# of Floors 1						
County (6) Monmouth		Bldg. Age 50+							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.							
Street Address		Name of Abatement Contractor (9) ILV Contracting LLC							
City, State, Zip Code		Street Address 16 Hillcrest Ave							
Project Manager for Monitoring Firm		City, State, Zip Code Clifton, New Jersey 07013							
Telephone No.		Telephone No. 917-403-3160	License No. 02132						
Start Date (10) 05/30/2026	Scheduled Completion Date (11) 06/10/2026	Name of OSHA Monitor ILV CONTRACTING LLC							
Occupancy Status During Abatement (Check Only One)		Street Address 16 Hillcrest Ave							
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		City, State, Zip Code Clifton, New Jersey 07013							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 25	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
First Floor			NA	Transite material		X		X	
Name of Registered Waste Hauler ILV Contracting		NJDEP Waste Hauler ID No. 0042514	Cubic Yards of Waste	Name of Registered Landfill Grand central Landfield					
City, State Clifton, New Jersey		Disposal Date TBD		City, State Pen Argyl, PA					
Completed by Ivana Velkov		Title President	Signature <i>I Velkov</i>				Date 05/20/2026		

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

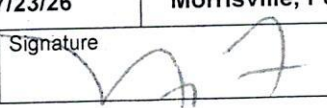
4367820

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) BAYONNE ECONOMIC OPPORTUNITY FOUNDATION							
Agencies Notified	Type Notification	Street Address 955 KENNEDY BLVD							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code BAYONNE, NJ 07002							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) PRIVATE HOUSE		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 11 WEST 29TH STREET		Square Feet N/A	# of Floors N/A						
City (5) BAYONNE		Bldg. Age N/A							
County (6) HUDSON	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) PRIVATE HOUSE							
Name of Monitoring Firm Hired by Building Owner (8) N/A	ASCM No.	Name of Abatement Contractor (9) EHW ABATEMENT LLC							
Street Address		Street Address 89 FRANKLIN STREET							
City, State, Zip Code		City, State, Zip Code PATERSON, NJ 07524							
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 973-333-5144	License No. 01274						
Start Date (10) 07/11/2026	Scheduled Completion Date (11) 07/12/2026	Name of OSHA Monitor EHW ABATEMENT LLC							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: OCCUPIED		Street Address 89 FRANKLIN STREET							
		City, State, Zip Code PATERSON, NJ 07524							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
BASEMENT		X		PIPE INSULATION	30 LF	X			
Name of Registered Waste Hauler EHW ABATEMENT LLC		NJDEP Waste Hauler ID No. 0037095	Cubic Yards of Waste TBD	Name of Registered Landfill TRI STATE TRANSFER					
City, State PATERSON, NJ		Disposal Date TBD		City, State BRONX, NY					
Completed by VICTOR ESPIRITU		Title PROJECT MANAGER		Signature 		Date 07/01/2026			

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

Date of Notification (1) 6/15/2026		Name of Building Owner/Operator (2) Private Property		RECEIVED					
Agencies Notified		Type Notification		Street Address 13 Zabriskie Street					
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		City, State, Zip Code Jersey City NJ Name of Contact _____ Telephone Number _____					
JUL 13 2026									
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Property				Type of Facility (4)					
Street Address 13 Zabriskie Street				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Jersey City NJ				Square Feet 1600SF	# of Floors 2				
County (6) Hudson County				County Code (7) (STATE USE ONLY) _____	Bldg. Age +50				
Name of Monitoring Firm Hired by Building Owner (8) N/A			ASCM No. N/A	Name of Abatement Contractor (9) ACM Abatement Services LLC					
Street Address N/A			Street Address 31 Turnberry Road						
City, State, Zip Code N/A			City, State, Zip Code Little Falls NJ 07424						
Project Manager for Monitoring Firm N/A			Telephone No. N/A	Telephone No. 201-218-4206	License No. 02150				
Start Date (10) 6/25/2026		Scheduled Completion Date (11) 7/1/2026		Name of OSHA Monitor Hillman Consulting					
Occupancy Status During Abatement (Check Only One)				Street Address 1620 Route 22 East					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7:00 AM to 4:00 PM				City, State, Zip Code Union NJ 07803					
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior			x	Asbestos shingles	2200 SF	x			
lower roof			x	roofing material	150 SF	x			
Name of Registered Waste Hauler Rovic transport			NJDEP Waste Hauler ID No. 20785	Cubic Yards of Waste	Name of Registered Landfill Blythe Township Landfill				
City, State 60 Riverdale Rd Riverdale NJ				Disposal Date	City, State 1061 Burma Rd New Philadelphia NJ				
Completed by Edwin Precilla			Title Principal	Signature <i>Edwin Precilla</i>		Date 6/15/2026			

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

Date of Notification (1) 07 / 08 / 26		Name of Building Owner/Operator (2) RECEIVED						
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 16 Cedar Knoll Drive City, State, Zip Code Brick, NJ 08723 Name of Contact _____ Telephone Number _____						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)						
Street Address 16 Cedar Knoll Drive		Square Feet 1000	# of Floors 1					
City (5) Brick		Bldg. Age 60						
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence						
Name of Monitoring Firm Hired by Building Owner (8) N/A	ASCM No.	Name of Abatement Contractor (9) Guardian Contracting, Inc.						
Street Address		Street Address 1889 Route 9, Unit 61						
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755						
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 732-349-9932	License No. 00624					
Start Date (10) 07 / 21 / 26	Scheduled Completion Date (11) 07 / 23 / 26	Name of OSHA Monitor E.M.S.L. Analytical						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM-_____ PM/_____ PM-_____ AM		Street Address 1056 Stelton City, State, Zip Code Piscataway, New Jersey 08854						
Scope of Work (Check all that apply)								
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 775 sf	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
exterior	☐	☒	☐	asbestos siding	☒	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill				
City, State Toms River, New Jersey		Disposal Date 07/23/26	City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola	Title Project Manager	Signature 			Date 7/8/26			

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

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CHK # 1940

RECEIVED

JUL - 8 2026

PAID

Date of Notification (1) 6/29/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 28 Bunker Hill Dr.		City, State, Zip Code Manalapan, NJ 07726							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 28 Bunker Hill Dr.		Square Feet 2,190	# of Floors 2						
City (5) Manalapan, NJ 07726		Bldg. Age 1965							
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) DANVIC CONTRACTING LLC						
Street Address		Street Address 240 South 5th St.							
City, State, Zip Code		City, State, Zip Code Elizabeth, NJ 07206							
Project Manager for Monitoring Firm		Telephone No. 908-906-4123	License No. 01355						
Start Date (10) 7/11/2026	Scheduled Completion Date (11) 7/17/2026	Name of OSHA Monitor Iris Environmental Laboratories, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 2333 Route 22 West							
		City, State, Zip Code Union, NJ 07083							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Kitchen/Foyer Area			X	Ceiling Plaster	300 SF	X			
Name of Registered Waste Hauler Danvic Contracting LLC		NJDEP Waste Hauler ID No. 37574	Cubic Yards of Waste TBD	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ		Disposal Date TBD		City, State Morrisville, PA					
Completed by Jeymy Donneys		Title Owner	Signature Jeymy Donneys			Date 6/29/2026			

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

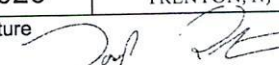
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JUL 1 2 2026

ASBESTOS CONTROL & LICENSE

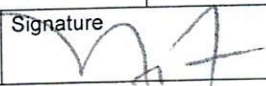
Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation							
Street Address 33 Brearley Avenue		City, State, Zip Code Lawrence Twp, NJ, 0868							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 33 Brearley Avenue		Square Feet	# of Floors						
City (5) Lawrence Twp		Bldg. Age							
County (6) Mercer	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/13/2026	Scheduled Completion Date (11) 07/13/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				Pipe Insulation	120 LF	☒			
Interior				Tile	260 SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No.	Cubic Yards of Waste 5	Name of Registered Landfill MERCER COUNTY					
City, State Lakewood NJ		Disposal Date 07/13/2026		City, State TRENTON, NJ					
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 			Date 07/01/2026			

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

001 *ch#0001/1203823*

Date of Notification (1) 6/12/2026		Name of Building Owner/Operator (2) Presbyterian Church							
Agencies Notified	Type Notification	Street Address 55 Magnolia Ave							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Tenaflly NJ							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Property		Type of Facility (4)							
Street Address 55 Magnolia Ave		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Tenaflly J	Square Feet 8000SF	# of Floors 2	Bldg. Age +50						
County (6) Bergen County	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A	ASCM No. N/A	Name of Abatement Contractor (9) ACM Abatement Services LLC							
Street Address N/A		Street Address 31 Turnberry Road							
City, State, Zip Code N/A		City, State, Zip Code Little Falls NJ 07424							
Project Manager for Monitoring Firm N/A	Telephone No.	Telephone No. 201-218-4206	License No. 02150						
Start Date (10) 6/22/2026	Scheduled Completion Date (11) 6/30/2026	Name of OSHA Monitor Hillman Consulting							
Occupancy Status During Abatement (Check Only One)		Street Address 1620 Route 22 East							
☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7:00 AM to 4:00 PM		City, State, Zip Code Union NJ 07803							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st floor			x	floor tile /mastic	55 SF	x			
basement			x	Floor tile/mastic/ceiling tile	85 SF	x			
Name of Registered Waste Hauler Rovic transport		NJDEP Waste Hauler ID No. 20785	Cubic Yards of Waste	Name of Registered Landfill Blythe Township Landfill					
City, State 60 Riverdale Rd Riverdale NJ			Disposal Date	City, State 1061 Burma Rd New Philadelphia NJ					
Completed by Edwin Precilla		Title Principal	Signature <i>Edwin Precilla</i>	Date 6/12/2026					

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

Date of Notification (1) 07 / 06 / 26		Name of Building Owner/Operator (2) RECEIVED 3							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 45 22nd Avenue							
		City, State, Zip Code Seaside Park, NJ 08752							
		Name of Contact	Telephone Number LICENSING						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 108 Midway Avenue		Square Feet 1000	# of Floors 1						
City (5) Seaside Park		Bldg. Age 80							
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) N/A		Name of Abatement Contractor (9) Guardian Contracting, Inc.							
Street Address		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm		Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 07 / 22 / 26	Scheduled Completion Date (11) 07 / 24 / 26	Name of OSHA Monitor E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 1056 Stelton							
		City, State, Zip Code Piscataway, New Jersey 08854							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 1050 sf	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior	☐	☒	☐	asbestos siding		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill					
City, State Toms River, New Jersey		Disposal Date 07/24/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/6/26		

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

4367832

Date of Notification (1) 07/03/2026		Name of Building Owner/Operator (2) RECEIVED	
Agencies Notified	Type Notification	Street Address	
☒ EPA ☒ DEP ☒ DOL	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	113 Crest Drive,	
		City, State, Zip Code Summit, NJ 07901	
		Name of Contact	Telephone Number
		ASBESTOS CONTROL & LICENSING	

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 113 Crest Drive,		Square Feet 2,965	# of Floors 4
City (5) Summit		Bldg. Age 64	
County (6) Union	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9)	
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Project Manager for Monitoring Firm		Telephone No.	License No.
Start Date (10) 07/13/2026		Scheduled Completion Date (11) 07/14/2026	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Name of OSHA Monitor Arsenije Adamov	
		Street Address 170 Kinnelon Rd, Suite 32	
		City, State, Zip Code Kinnelon, NJ 07405	

Scope of Work (Check All That Apply)			
☐ ≥3 sf or ≥3 lf	☒ Renovation	☒ Full Containment with Negative Pressure	
☒ ≥160 sf or ≥260 lf	☐ Demolition	☐ Mini-Enclosure	
		☐ Glovebag Procedure	
		☐ Non-Exempted (*) and Non-Friable Procedure	

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Ground Level		✓		Tile and Mastic	850 SF	✓			

Name of Registered Waste Hauler Acme Professional Services Corp		NJDEP Waste Hauler ID No. 0038176	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill	
City, State Kinnelon, NJ		Disposal Date 07/14/2026		City, State Morrisville, PA	
Completed by Samantha Zamora	Title Project Coordinator	Signature <i>Samantha Zamora</i>		Date 07/03/2026	

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

4367833

Check#1321

Date of Notification (1) 07/06/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	114 Westview Avenue City, State, Zip Code Paramus, NJ 07652 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private house		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 114 Westview Avenue		Square Feet	# of Floors						
City (5) Paramus, NJ 07652		Bldg. Age							
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
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 Road#283							
City, State, Zip Code		City, State, Zip Code Wayne, NJ 07470							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 973-356-3511						
		License No.	01127						
Start Date (10) 07/15/2026	Scheduled Completion Date (11) 07/16/2026	Name of OSHA Monitor Envirovision Consultants, Inc							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 20-21 Wagaraw Road, Bldg.# 35 E							
		City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement-Boiler room			x	Pipe insulation	20 LF	x			
Basement-Boiler room			x	Furnace insulation	30 SF	x			
Name of Registered Waste Hauler Gr Tech LLC		NJDEP Waste Hauler ID No. 0033785	Cubic Yards of Waste TBD	Name of Registered Landfill T.R.R.F. Inc					
City, State Wayne, NJ 07470		Disposal Date TBD		City, State Tullytown, PA					
Completed by G.Ristanovic		Title Owner	Signature Gradimir Ristanovic			Date 07/06/2026			

8809

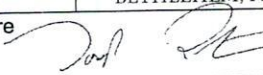
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

4367834

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address 123 Reservoir Dr							
☒ EPA ☒ DEP ☒ DOL	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Boonton, NJ 07005							
☒ DOH ☐ DCA		Name of Contact	Telephone Number LICENSING						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 123 Reservoir Dr		Square Feet	# of Floors						
City (5) Boonton		Bldg. Age							
County (6) Morris	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/14/2026	Scheduled Completion Date (11) 07/14/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				Pipe Insulation	300LF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 3	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/14/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER		Signature <i>[Signature]</i>		Date 07/01/2026			

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

4367835
RECEIVED
JUL 13 2026
ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/06/2026		Name of Building Owner/Operator (2) Bold Builders							
Agencies Notified	Type Notification	Street Address 411 Boulevard of the Americas, Suite 204							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Lakewood, NJ 08701							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 137 Martin Luther King Dr		Square Feet	# of Floors						
City (5) Lakewood		Bldg. Age							
County (6) Ocean	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/16/2026	Scheduled Completion Date (11) 07/16/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior				Siding	1500SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/16/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER		Signature 		Date 07/06/2026			

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

4367836

Date of Notification (1) 07/08/2026		Name of Building Owner/Operator (2) RECEIVED						
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation						
Street Address 135 Warren Avenue, City, State, Zip Code Roselle Park NJ 07204		Telephone Number 800-368-5838						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 135 Warren Avenue, City (5) Roselle Park		Square Feet 1,100	# of Floors 2					
County (6) Union		County Code (7) (STATE USE ONLY) _____	Bldg. Age 106					
Name of Monitoring Firm Hired by Building Owner (8)		Current Use (Prior if being demolished)						
Street Address		Name of Abatement Contractor (9) Acme Professional Services Corp						
City, State, Zip Code		Street Address 170 Kinnelon Rd, Suite 32 City, State, Zip Code Kinnelon, N.J 07405						
Project Manager for Monitoring Firm		Telephone No. 973-938-5266	License No. 02003					
Start Date (10) 07/24/2026	Scheduled Completion Date (11) 07/24/2026	Name of OSHA Monitor Arsenije Adamov						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 170 Kinnelon Rd, Suite 32 City, State, Zip Code Kinnelon, NJ 07405						
Scope of Work (Check All That Apply)								
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition						
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Basement		☒	Pipe and Fitting Insulation	60 LF	☒			
Name of Registered Waste Hauler Acme Professional Services Corp		NJDEP Waste Hauler ID No. 0038176	Cubic Yards of Waste 1	Name of Registered Landfill Fairless Landfill				
City, State Kinnelon, NJ		Disposal Date 07/27/2026		City, State Morrisville, PA				
Completed by Samantha Zamora		Title Project Coordinator	Signature <i>Samantha Zamora</i>		Date 07/08/2026			

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

CK# 12149

RECEIVED

4367837

Date of Notification (1) 7/6/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 227 N. Nevada Ave.							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Atlantic City, NJ 08401							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Vacant Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 227 N. Nevada Avenue		Square Feet 1144	# of Floors 2						
City (5) Atlantic City		Bldg. Age 100+							
County (6) Atlantic	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Unoccupied							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) American Demolition Corp.						
Street Address		Street Address 2 English Lane							
City, State, Zip Code		City, State, Zip Code Egg Harbor Twp., NJ 08234							
Project Manager for Monitoring Firm		Telephone No. 609-926-7373	License No. 02056						
Start Date (10) 7/15/2026	Scheduled Completion Date (11) 8/3/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior			X	Grey Exterior CMU coating	510 sf	X			
Name of Registered Waste Hauler American Demolition Corp		NJDEP Waste Hauler ID No. 16473	Cubic Yards of Waste	Name of Registered Landfill ACUA					
City, State Egg Harbor Twp., NJ			Disposal Date TBD	City, State Pleasantville					
Completed by Jannie Truehart		Title Project Manager	Signature <i>Jannie Truehart</i>			Date 7/6/2026			

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PAID

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

4367839

RECEIVED

Date of Notification (1) 7/8/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address P.O. Box 253 City, State, Zip Code Milford, CT 0646 Name of Contact Telephone Number					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Single Family			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 240 Wainwright St			Square Feet unknown						
City (5) Newark			# of Floors 1		Bldg. Age unknown				
County (6) Essex		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) TBD		ASCM No.		Name of Abatement Contractor (9) Gold Coast Management LLC					
Street Address		Street Address 30 Sherman Ave							
City, State, Zip Code		City, State, Zip Code Jersey City, NJ 07307							
Project Manager for Monitoring Firm TBD		Telephone No.		Telephone No. 908-270-8556					
Start Date (10) 7/18/2026		Scheduled Completion Date (11) 7/19/2026		License No. 02109					
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: <u>Basement</u>		Name of OSHA Monitor John Kim							
		Street Address 254 Ridgewood Ave							
		City, State, Zip Code Glen Ridge NJ 07028							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	VAT	300 SF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. NJ860		Cubic Yards of Waste 5	Name of Registered Landfill Conestoga Landfill				
City, State Elizabeth, NJ				Disposal Date	City, State Morgantown PA				
Completed by John Kim		Title President		Signature 		Date 7/8/2025			

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

Ch# 0008.

436 7842

Date of Notification (1) 6/30/2026		Name of Building Owner/Operator (2) Private Property							
Agencies Notified	Type Notification	Street Address 431 Cedar Ave							
☒ EPA ☒ DEP ☒ DOL	☒ Initial ☐ Amended Amendment # _____	City, State, Zip Code Paramus NJ							
☒ DOH ☒ DCA	☐ Emergency (including justification) ☐ Cancellation	Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 431 Cedar Ave		Square Feet 1000SF	# of Floors 1						
City (5) Paramus		Bldg. Age +50							
County (6) Bergen County	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No. N/A	Name of Abatement Contractor (9) ACM Abatement Services LLC						
Street Address N/A		Street Address 31 Turnberry Road							
City, State, Zip Code N/A		City, State, Zip Code Little Falls NJ 07424							
Project Manager for Monitoring Firm N/A		Telephone No. 201-218-4206	License No. 02150						
Start Date (10) 7/10/2026	Scheduled Completion Date (11) 7/14/2026	Name of OSHA Monitor Hillman Consulting							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7:00 AM to 4:00 PM		Street Address 1620 Route 22 East							
		City, State, Zip Code Union NJ 07803							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf	☐ Renovation ☒ Demolition	☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Floor tile	150 SF	X			
Roof			X	Back small roof	100 SF	X			
Name of Registered Waste Hauler Rovic transport		NJDEP Waste Hauler ID No. 20785	Cubic Yards of Waste	Name of Registered Landfill Blythe Township Landfill					
City, State 60 Riverdale Rd Riverdale NJ			Disposal Date	City, State 1061 Burma Rd New Philadelphia NJ					
Completed by Edwin Precilla		Title Principal	Signature Edwin Precilla			Date 6/30/2026			

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

4 367829
 Chk # 1939
 RECEIVED

Date of Notification (1) 6/26/2026		Name of Building Owner/Operator (2) Transform Group of NJ					
Agencies Notified	Type Notification	Street Address 34 Honey Locust Drive					
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Monroe, NJ 08831					
		Name of Contact	Telephone Number				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4)					
Street Address 49 Knickerbocker Rd.		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Demarest, NJ 07627		Square Feet 1,400	# of Floors 2				
County (6) Bergen		Bldg. Age 1950					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) DANVIC CONTRACTING LLC					
Street Address		Street Address 240 South 5th St.					
City, State, Zip Code		City, State, Zip Code Elizabeth, NJ 07206					
Project Manager for Monitoring Firm		Telephone No. 908-906-4123	License No. 01355				
Start Date (10) 7/5/2026	Scheduled Completion Date (11) 7/7/2026	Name of OSHA Monitor Iris Environmental Laboratories, Inc.					
Occupancy Status During Abatement (Check Only One)		Street Address 2333 Route 22 West					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		City, State, Zip Code Union, NJ 07083					
Scope of Work (Check All That Apply)							
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☒ Demolition					
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Exterior Siding	Yes No N/A	Transite Siding	500 SF	X			
Name of Registered Waste Hauler Danvic Contracting LLC		NJDEP Waste Hauler ID No. 37574	Cubic Yards of Waste TBD	Name of Registered Landfill Fairless Landfill			
City, State Elizabeth, NJ		Disposal Date TBD		City, State Morrisville, PA			
Completed by Jeymy Donneys		Title Owner	Signature Jeymy Donneys		Date 6/26/2026		



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

4367823

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ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/09/2026		Name of Building Owner/Operator (2) 2G Denville LLC							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 2040 Briggs Road City, State, Zip Code Mt. Laurel, NJ 08054 Name of Contact _____ Telephone Number _____					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 21 Thurmont Road				Square Feet _____ # of Floors _____ Bldg. Age _____					
City (5) Denville				Current Use (Prior if being demolished) _____					
County (6) Somerset		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) _____					
Name of Monitoring Firm Hired by Building Owner (8) A. Seine Lighthouse Solutions		ASCM No. _____		Name of Abatement Contractor (9) All Pro Management, LLC					
Street Address PO Box 354		Street Address 27 Outwater Lane		City, State, Zip Code Garfield, NJ 07026					
City, State, Zip Code South Orange, NJ 07079		Telephone No. 201-394-2666		Telephone No. 973-928-4888					
Project Manager for Monitoring Firm Sarah Calandra		License No. 1188		Name of OSHA Monitor A. Seine Lighthouse Solutions					
Start Date (10) 07/18/2026		Scheduled Completion Date (11) 08/31/2026		Street Address PO Box 354					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code South Orange, NJ 07079					
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ Renovation ☐ ≥160 sf or ≥260 lf ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Kitchen			X	Yellow sheet flooring & mastic	200 SF	X			
Name of Registered Waste Hauler Century Waste LLC		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste _____		Name of Registered Landfill Fairless Landfill			
City, State Elizabeth, NJ		Disposal Date _____		City, State Morrisville, PA					
Completed by Jacqueline Anello		Title Office Administrator		Signature <i>Jacqueline Anello</i>		Date 07/09/2026			

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

5/16/2026 4/16/2026

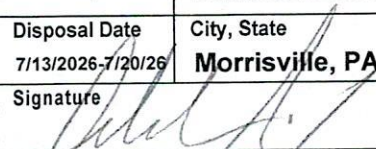
4367825

Date of Notification (1) 07/09/2026		Name of Building Owner/Operator (2) 2G Denville LLC							
Agencies Notified	Type Notification	Street Address 2040 Briggs Road							
☒ EPA ☐ DEP ☒ DOL	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Mt. Laurel, NJ 08054							
☒ DOH ☐ DCA		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 19 Thurmont Road		Square Feet	# of Floors						
City (5) Denville		Bldg. Age							
County (6) Somerset	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) A. Seine Lighthouse Solutions		ASCM No.	Name of Abatement Contractor (9) All Pro Management, LLC						
Street Address PO Box 354		Street Address 27 Outwater Lane							
City, State, Zip Code South Orange, NJ 07079		City, State, Zip Code Garfield, NJ 07026							
Project Manager for Monitoring Firm Sarah Calandra		Telephone No. 201-394-2666	License No. 1188						
Start Date (10) 07/18/2026	Scheduled Completion Date (11) 08/31/2026	Name of OSHA Monitor A. Seine Lighthouse Solutions							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address PO Box 354							
		City, State, Zip Code South Orange, NJ 07079							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Kitchen			X	Brown vinyl baseboard mastic	14 SF	X			
Name of Registered Waste Hauler Century Waste LLC		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ			Disposal Date	City, State Morrisville, PA					
Completed by Jacqueline Anello		Title Office Administrator	Signature <i>Jacqueline Anello</i>			Date 07/09/2026			

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

Check No. 2180

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Date of Notification (1) June 30, 2026		Name of Building Owner/Operator (2) PA of NY & NJ							
Agency Notified ☒ EPA ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 241 Erie Street City, State, Zip Code Jersey City, NJ 07302 Name of Contact Tom Taylor Telephone Number 609-744-3471							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Building 117 - Fuel Farm Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address Newark International Airport, Earhart Drive		Square Feet 7,200	# of Floors 1						
City (5) Newark		Bldg. Age 80+							
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Office Building							
Name of Monitoring Firm Hired by Building Owner (8) PANYNJ		ASC No. N/A	Name of Abatement Contractor (9) B&N&K Restoration Co., Inc.						
Street Address 241 Erie Street		Street Address 223 Randolph Avenue							
City, State, Zip Code Jersey City, 07310		City, State, Zip Code Clifton, NJ 07011							
Project Manager for Monitoring Firm Tom Taylor		Telephone No. 973-478-4681	License No. 00120						
Start Date (10) July 13, 2026	Scheduled Completion Date (11) July 20, 2026	Name of OSHA Monitor The Saban Engineering Group, Inc.							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: unoccupied space		Street Address 201 Stuyvesant Avenue City, State, Zip Code Lyndhurst, NJ 07071-1704							
Scope of Work (Check all that apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Building 117 Mechanical Room	☒			electrical bus bar wrapped in Asbestos tape and tar	1000 LF	☒			
Name of Registered Waste Hauler Cardella Trucking		NJDEP Waste Hauler ID No. 378756	Cubic Yards of Waste 4	Name of Registered Landfill Fairless Landfill					
City, State North Bergen		Disposal Date 7/13/2026-7/20/26		City, State Morrisville, PA					
Completed by Aleksandar Kuridza		Title Project Manager		Signature 				Date 6/30/2026	

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

4367816

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) NJDEP - Natural & Historic Resources- Office of Resource Development							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 275 Freehold, Englishtown Road					
		City, State, Zip Code Englishtown, New Jersey 07726		Telephone Number 609-351-1991					
		Name of Contact Mr. Al Payne							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Island Beach State Park - DeSaules Residence				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 39.772336, -74.098064				Square Feet 2000+					
City (5) Berkley Township				# of Floors 2					
County (6) Ocean				Bldg. Age 50+					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) USA Environmental Management Inc.		ASCM No.		Name of Abatement Contractor (9) ILV Contracting LLC					
Street Address 344 West State Street		Street Address 16 Hillcrest Ave							
City, State, Zip Code Trenton, New Jersey 08618		City, State, Zip Code Clifton, New Jersey, 07013							
Project Manager for Monitoring Firm William Weisgarber		Telephone No. 609-656-8101		Telephone No. 917-403-3160					
Start Date (10) 07/13/2026		Scheduled Completion Date (11) 07/20/2026		License No. 02132					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Name of OSHA Monitor ILV Contracting LLC					
				Street Address 16 Hillcrest Ave					
				City, State, Zip Code Clifton, New Jersey, 07013					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf		☐ Renovation		☐ Full Containment with Negative Pressure					
☒ ≥ 160 sf or ≥ 260 lf		☒ Demolition		☐ Mini-Enclosure					
				☐ Glovebag Procedure					
				☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Foundation walls			NA	Tar	900	x			
Name of Registered Waste Hauler Mazza Recycling Services		NJDEP Waste Hauler ID No. 36891		Cubic Yards of Waste		Name of Registered Landfill Waste Management			
City, State Tinton Falls, New Jersey		Disposal Date TBD		City, State Fairless Hills, PA 19030					
Completed by Ivana Velkov		Title President		Signature <i>I Velkov</i>		Date 07/01/2026			

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

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Date of Notification (1) 07-06-26		Name of Building Owner/Operator (2) 5/30 PK Elmwood Park LLC	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		
	Street Address 140 Chestnut St. Suite 300		
	City, State, Zip Code Ridgewood, NJ 07450		
	Name of Contact Mike Adams		Telephone Number (201) 602-0567

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ASBESTOS CONTROL & LICENSING

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Commercial Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 5 Paul Khoner PL		Square Feet	# of Floors 1
City (5) Elmwood Park		Bldg. Age	
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Commercial Building	
Name of Monitoring Firm Hired by Building Owner (8) N/A		Name of Abatement Contractor (9) Delfa Contracting LLC.	
Street Address		Street Address 1119 East Grand St.	
City, State, Zip Code		City, State, Zip Code Elizabeth, NJ 07201	
Project Manager for Monitoring Firm		Telephone No. 908 576-7646	License No. 01206
Start Date (10) 07-15-26		Scheduled Completion Date (11) 08-07-26	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Name of OSHA Monitor Delfa Contracting LLC	
		Street Address 1119 East Grand St.	
		City, State, Zip Code Elizabeth, NJ 07201	

Scope of Work (Check All That Apply)

☐ ≥3 sf or ≥3 lf	☐ Renovation	☐ Full Containment with Negative Pressure
☒ ≥160 sf or ≥260 lf	☐ Demolition	☐ Mini-Enclosure
		☐ Glovebag Procedure
		☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st Floor		x		VAT	900 SF	x			
1st Floor		X		Joint Compound	11,000 SF	x			

Name of Registered Waste Hauler Delfa Contracting LLC		NJDEP Waste Hauler ID No. 35240	Cubic Yards of Waste 40	Name of Registered Landfill Tullytown Resource Recovery Facility	
City, State Elizabeth, NJ		Disposal Date 07-13-26		City, State Tullytown, PA	
Completed by Jaime Delgado		Title Proj. Manager.	Signature 	Date 07-06-26	

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Print Form

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

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Date of Notification (1) 07-06-26		Name of Building Owner/Operator (2) 5/30 PK Elmwood Park LLC						
Agencies Notified ☐ EPA ☐ DEP ☐ DOL ☐ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation						
Street Address 140 Chestnut St. Suite 300		City, State, Zip Code Ridgewood, NJ 07450						
Name of Contact Mike Adams		Telephone Number (201) 602-0567						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Commercial Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 30 Paul Khoner PL		Square Feet	# of Floors 1					
City (5) Elmwood Park		Bldg. Age						
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Commercial Building						
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.						
Street Address		Name of Abatement Contractor (9) Delfa Contracting LLC.						
City, State, Zip Code		Street Address 1119 East Grand St.						
Project Manager for Monitoring Firm		Telephone No. 908 576-7646	License No. 01206					
Start Date (10) 07-15-26	Scheduled Completion Date (11) 08-07-26	Name of OSHA Monitor Delfa Contracting LLC						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 1119 East Grand St.						
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
1st Floor		x	VAT/ Lenoleum	3,600 SF	x			
1st Floor		X	Pipe Insulation	120 LF	x			
Exterior		x	Transite Wall Panels	2,400 SF	x			
Lower Roof		x	Roofing Materials	5,875 SF	x			
Name of Registered Waste Hauler Delfa Contracting LLC		NJDEP Waste Hauler ID No. 35240	Cubic Yards of Waste 40	Name of Registered Landfill Tullytown Resource Recovery Facility				
City, State Elizabeth, NJ		Disposal Date 07-13-26		City, State Tullytown, PA				
Completed by Jaime Delgado		Title Proj. Manager.		Signature 			Date 07-06-26	

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

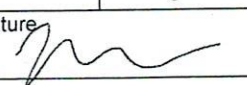
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Date of Notification (1) 6/30/26		Name of Building Owner/Operator (2) Edison Board of Education							
Agencies Notified	Type Notification	Street Address 312 Pierson Ave							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Edison, NJ 08837							
		Name of Contact Will Kolibas	Telephone Number 732-589-3046						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Edison High School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 50 Boulevard of the Eagles		Square Feet	# of Floors						
City (5) Edison		Bldg. Age							
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Design Inc		ASCM No. 02736	Name of Abatement Contractor (9) Academy Construction Inc						
Street Address 5434 King Avenue		Street Address 7 East Garden Place							
City, State, Zip Code Pennsauken, NJ 08109		City, State, Zip Code Pompton Plains, NJ 07444							
Project Manager for Monitoring Firm Tim Gromen		Telephone No. 888-306-4545	Telephone No. 973 832 4244						
		License No. 01379							
Start Date (10) 7/1/26	Scheduled Completion Date (11) 7/3/26	Name of OSHA Monitor Same as above							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Bathroom			X	TSI	9 LF	X			
Name of Registered Waste Hauler Academy Construction Inc		NJDEP Waste Hauler ID No. 0034422	Cubic Yards of Waste 1 cu yd	Name of Registered Landfill Fairless Landfill					
City, State Pompton Plains, NJ		Disposal Date TBD		City, State Morrisville, PA					
Completed by John Geleski		Title Supervisor		Signature 				Date 6/30/26	

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

436784

Date of Notification (1) 7/3/2026		Name of Building Owner/Operator (2) Pilot Flying J Travel Center							
Agencies Notified	Type Notification	Street Address 326 Slapes Corner Road							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Carneys Point, NJ 08069							
		Name of Contact Nick Barbier	Telephone Number 610-721-5300 & LICENSING						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Pilot Flying J Travel Center		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 326 Slapes Corner Road		Square Feet unknown	# of Floors 1						
City (5) Carneys Point		Bldg. Age unknown							
County (6) Salem	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TBD		ASCM No.	Name of Abatement Contractor (9) Gold Coast Management LLC						
Street Address		Street Address 30 Sherman Ave							
City, State, Zip Code		City, State, Zip Code Jersey City, NJ 07307							
Project Manager for Monitoring Firm TBD		Telephone No. 908-270-8556	License No. 02109						
Start Date (10) 7/13/2026	Scheduled Completion Date (11) 7/14/2026	Name of OSHA Monitor John Kim							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: <u>Basement</u>		Street Address 254 Ridgewood Ave							
		City, State, Zip Code Glen Ridge NJ 07028							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Roof			X	Sealant	120 LF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. NJ860	Cubic Yards of Waste 5	Name of Registered Landfill Conestoga Landfill					
City, State Elizabeth, NJ			Disposal Date	City, State Morgantown PA					
Completed by John Kim		Title President	Signature 			Date 7/3/2025			

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

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RECEIVED

Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) CENTRA STATE HEALTHCARE SYSTEM		CHECK#4887	
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 901 W Main Street City, State, Zip Code Freehold, NJ 07726	
		Name of Contact Mr. Robert Johnson		Telephone Number 908.216.9172	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) West Mechanical Room				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)	
Street Address 901 W Main Street					
City (5) Freehold				Square Feet 50,000	# of Floors 4
				Bldg. Age 50+	
County (6) Monmouth		County Code (7)(STATE USE ONLY)		Current Use (Prior if being demolished) Hospital	
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.		Name of Abatement Contractor (9) EA Services Corporation	
Street Address		Street Address 530 Church Street- Suite 6			
City, State, Zip Code		City, State, Zip Code Ridgefield, NJ 07657			
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201-295-1700	License No. 01074
Start Date (10) 07 / 14 / 26		Scheduled Completion Date (11) 7 / 20 / 26		Name of OSHA Monitor Same as above	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:00AM -____PM/____PM-____AM				Street Address	
				City, State, Zip Code	
Scope of Work (Check all that apply)					
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 16 LF
	Yes	No	N/A		
West Mechanical Room	☐	☒	☐	ACM Fittings	☒
	☐	☐	☐		☐
	☐	☐	☐		☐
	☐	☐	☐		☐
Name of Registered Waste Hauler EA Services Corporation		NJDEP Waste Hauler ID No. 107086		Cubic Yards of Waste tbd	Name of Registered Landfill Minerva Enterprises
City, State Ridgefield, NJ				Disposal Date tbd	City, State Waynesburg, OH
Completed By (Print or Type) Marisabel Toribio		Title Clerical		Signature <i>Marisabel Toribio</i>	Date 7/1/26

State of New Jersey
Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:26-7 and 12:120-7)

3938574
RECEIVED

Date of Notification (1) 7/01/2026		Name of Building Owner/Operator Hamilton TWP School District	
Agencies Notified ☒ EPA ☒ DCA ☒ DOL ☐ DEP ☒ DOH		Notification Type ☒ Initial Notification ☐ Amended #1 ☐ Emergency notification (including justification) ☐ Cancelled	
Street Address 90 Park Ave		City, State, Zip Code Hamilton NJ 08690	
Name of Contact John Miranda		Telephone Number 609-631-4100	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Stainer High School		Type of Facility (4) ☒ School (K-12) Subchapter 8 ☐ Subchapter 8 (other than K-12) ☐ Other (i.e. private & commercial buildings., homes, etc.)	
Street Address 2900 Klockner Road		Sq. Feet: Approximately 30,000 # of Floors: 2 Bldg. Age: 56 Current Use (prior if being demolished): School	
City (5) Hamilton NJ 08690	County (6) Mercer	County Code (7) (State Use Only)	
Name of Monitoring Firm hired by Bldg. Owner Westchester Environmental LLC		ASCM No. 00127	
Street address 1248 Wrights Lane		Name of Contractor (9) BL Contracting Inc.	
City State & zip code West Chester PA 19380		Street Address 5 Marguerite Lane	
Project Manager for Monitoring Firm Philip Chonteh		Telephone Number 610-431-7545	License Number 01265
Scheduled Start Date (10) 7/17/2026		Scheduled Completion Date 7/27/2026	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Facility occupied During Abatement ☒ Other - Describe: Monday - Saturday 7 am- 4pm		Name of OSHA Monitoring BL Contracting Inc	
Source of Work (Check all that apply) ≥ 3 sf or ≥ 3 lf X ≥ 160 sf or ≥ 260 lf		☐ Wrap & Cut Procedure ☒ Full Containment ☐ Tent & Glove-bag Procedure ☐ Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Normally Used Solely by Main/Custodial Staff (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other misc.)	Amount (Specify SF or LF)
Auditorium Stage	☒	Ceiling Asbestos Drywall	2,500 SF
Auditorium Stage	☒	Pipe Insulation	400 LF
Name of Reg. Waste Hauler BL Contracting Inc	NJDEP Waste Hauler ID # 0036784	Cubic Yards of Waste 20	Name of Registered Landfill T.R.R.F
Disposal Date 7/30/2026		City, State Tully town, PA	
Completed by (Print or Type) Nedo Vasilic	Title Project Manager	Signature <i>Nedo Vasilic</i>	Date 7/01/2026

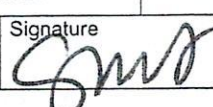
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) July 6, 2026		Name of Building Owner/Operator (2) Bishop Eustace Prep School		RECEIVED					
Agencies Notified		Type Notification		Street Address					
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		5552 Marlton Pike					
				City, State, Zip Code Pennsauken, NJ 08109					
		Name of Contact Ernie Giancaterino with GC		Telephone Number 215-886-0440					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Bishop Eustace Prep School				Type of Facility (4)					
Street Address 5552 Marlton Pike				☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Pennsauken				Square Feet 10,000	# of Floors 1				
				Bldg. Age 60					
County (6) Camden		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Private High School (Cafe)					
Name of Monitoring Firm Hired by Building Owner (8) Environmental Technicians			ASCM No.	Name of Abatement Contractor (9) ecoservices, LLC					
Street Address 441 East High Street, #25			Street Address 303 B National Road						
City, State, Zip Code Philadelphia, PA 19144			City, State, Zip Code Exton, PA 19341						
Project Manager for Monitoring Firm Norman Harrison		Telephone No. 215-200-9400		Telephone No. 484-872-8884	License No. 01161				
Start Date (10) July 16, 2026		Scheduled Completion Date (11) August 14, 2026		Name of OSHA Monitor ecoservices, LLC					
Occupancy Status During Abatement (Check Only One)				Street Address 303 B National Road					
☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:				City, State, Zip Code Exton, PA 19341					
Scope of Work (Check All That Apply)									
☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior - Cafe Windows		X		Caulking	55 SF	X			
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No.		Cubic Yards of Waste 3	Name of Registered Landfill Lanchester Landfill				
City, State Trenton, NJ				Disposal Date TBD	City, State Narvon, PA 17555				
Completed by Dennis Bincarosky		Title Project Manager		Signature Dennis Bincarosky		Date July 6, 2026			

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

4143528

RECEIVED

Date of Notification (1) 7 / 7 / 26		Name of Building Owner/Operator (2) Trenton Board of Education / Job #2605-6584 Check #18045							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 1490 Prospect Street							
		City, State, Zip Code Trenton, NJ 08638							
		Name of Contact Dwayne Mosley		Telephone Number 609-656-4900					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Holland Middle School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 1001 West State Street				Square Feet 100,000					
City (5) Trenton				# of Floors 2					
County (6) Mercer				Bldg. Age 60					
County Code (7) (STATE USE ONLY) 00030		Current Use (Prior if being demolished) Educational Facility							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection, Inc.		ASCM No. 00030		Name of Abatement Contractor (9) AbateTech, Inc.					
Street Address 120 North Warren Street		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Trenton, NJ 08608		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Mike Moore		Telephone No. 609-392-4200		License No. 00529					
Start Date (10) 7 / 20 / 26		Scheduled Completion Date (11) 8 / 7 / 26		Name of OSHA Monitor IATL					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM				Street Address 9000 Commerce Parkway Suite B					
				City, State, Zip Code Mount Laurel, NJ 08054					
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☒	☐	☐	See Attached	See Attached	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750		Cubic Yards of Waste 40		Name of Registered Landfill Fairless Landfill			
City, State Lumberton, NJ		Disposal Date 8/7/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coordinator		Signature 		Date 7-7-26			

Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in Facility (13)	Normally Used Solely by Maintenance or Custodial Staff? (12)	Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Square Footage	Linear Footage
Boiler Room	Yes	Fitting Insulation	<i>sf</i>	8 <i>lf</i>
Boiler Room	Yes	Exterior Boiler Insulation	285 <i>sf</i>	<i>lf</i>
Boiler Room	Yes	Boiler Rib Cement	180 <i>sf</i>	<i>lf</i>
Boiler Room	Yes	Cementitious Packing	55 <i>sf</i>	<i>lf</i>
Boiler Room	Yes	Cementitious Plumbers Paste	12 <i>sf</i>	<i>lf</i>
Boiler Room	Yes	Valve Insulation	<i>sf</i>	3 <i>lf</i>
Boiler Room	Yes	Boiler Rib Rope	180 <i>sf</i>	<i>lf</i>

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT BY ASCM FIRM

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

1960820
CIRCK# 4678

Date of Notification (1) 7 / 7 / 26		Name of Building Owner/Operator (2) Verizon Communications							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 15 East Montgomery Street							
		City, State, Zip Code Pittsburgh, PA 15212							
		Name of Contact Brian Kingsbury (Owners Rep)	Telephone Number 201-388-0620						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Verizon Morganville Central Office		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 408 Tennet Road		Square Feet	# of Floors 3						
City (5) Morganville		Bldg. Age +75							
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Verizon							
Name of Monitoring Firm Hired by Building Owner (8) RBS Environmental	ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC							
Street Address 24 Veterans Square		Street Address 1123 BEAVER STREET							
City, State, Zip Code Media, PA 19063		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Mike Stocku	Telephone No. 609-304-3969	Telephone No. 215-788-6040	License No. 02121						
Start Date (10) 8 / 3 / 26	Scheduled Completion Date (11) 8 / 14 / 26	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM 5PM-1AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
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							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
North Wall Frame Area	☐	☐	☒	VAT & Mastic	220 SF	☒	☐	☐	☐
Southside Frame Area	☐	☐	☒	VAT & Mastic	170 SF	☒	☐	☐	☐
Adjacent to Restroom	☐	☐	☒	Vat & Mastic	20 SF	☒	☐	☐	☐
Rear Door Area	☐	☐	☒	VAT & Mastic	20 SF	☒	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage	NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste	Name of Registered Landfill Conestoga Landfill						
City, State Freehold NJ	Disposal Date TBD	City, State Morgantown, PA							
Completed By (Print or Type) Dillan DeCaro	Title Estimator	Signature <i>Dellon DeCaro Lms</i>					Date 7/7/26		

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

Check # 4678

Date of Notification (1) 7 / 7 / 26			Name of Building Owner/Operator (2) Verizon Communications						
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 15 East Montgomery Street						
			City, State, Zip Code Pittsburgh, PA 15212						
			Name of Contact Brian Kingsbury (Owners Rep)		Telephone Number 201-388-0620				
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Verizon Morganville Central Office				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 408 Tennet Road				Square Feet		Bldg. Age +75			
City (5) Morganville				County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Verizon			
County (6) Monmouth				Name of Monitoring Firm Hired by Building Owner (8) RBS Environmental		ASCM No.			
				Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC					
Street Address 24 Veterans Square				Street Address 1123 BEAVER STREET					
City, State, Zip Code Media, PA 19063				City, State, Zip Code BRISTOL, PA 19007					
Project Manager for Monitoring Firm Mike Stocku				Telephone No. 609-304-3969		License No. 02121			
Start Date (10) 8 / 3 / 26		Scheduled Completion Date (11) 8 / 14 / 26		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/5PM-1AM				Street Address 1123 BEAVER STREET					
				City, State, Zip Code BRISTOL, PA 19007					
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Desk Area	☐	☐	☒	VAT & Mastic	120 SF	☒	☐	☐	☐
South Wall Near Generator	☐	☐	☒	Vat & Mastic	20 SF	☒	☐	☐	☐
Small Areas Throughout First Floor	☐	☐	☒	Vat & Mastic	20 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage			NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste	Name of Registered Landfill Conestoga Landfill				
City, State Freehold NJ				Disposal Date TBD	City, State Morgantown, PA				
Completed By (Print or Type) Dillan DeCaro			Title Estimator		Signature <i>Dillon DeCaro</i>		Date 7/7/26		

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1) July 8, 2026		Name of Building Owner/Operator (2) Rutgers, The State University of New Jersey	
Agencies Notified EPA DCA x DOL DEP x DOH		Notification Type ☐ Initial Notification ☒ Amended Notification #5 – New Completion Date and Work Areas (plus 2 more over ~160SF) and Quantities ☐ Emergency (including justification) ☐ Cancelled	
Street Address REHS 74 St 1603		City, State, Zip Code Piscataway NJ 08854	
Name of Contact Michael F. Smith		Telephone Number 848.445.2550	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) # 7257- Medical Science Bldg.		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address RBHS Newark Campus		Sq. Feet: Unknown # of Floors: 8 Bldg. Age: 80 plus years	
City (5) Newark	County (6) Essex	County Code (7) (State Use Only)	Current Use (prior if being demolished):
Name of Monitoring Firm Hired by Bldg. Owner (8) Atlas Tech Services		ASCM No. 0098	Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.
Street Address 3 Terri Lane		Street Address 511 MAIN STREET	
City, State, Zip Code Burlington NJ 08016		City State, Zip Code Butler, NJ 07405	
Project Manager for Monitoring Firm John Lutz	Telephone Number 609-386-8800	Telephone Number 973-492-0477	License Number 00840
Scheduled Start Date (10) 5/8/2026	Scheduled Completion Date (11) 8/3/2026	Name of OSHA Monitor EMSL inc.	
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement x Abatement Performed Outside of Normal Facility Hours - Describe Other – Describe: 4pm-5am (24 Hours & weekends as needed)		Street Address 1056 Stelton Road	
Source of Work (Check all that apply) ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260		Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure x Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) in Facility (13) B518,B520,B525 Suite,B544,B546,C632 Suite, F676 Suite, C600C23 Hall Ramp, C600C23 Hall, C636 Suite, B521, B523, B521A, E585, E587, E579, E543, E526 Suite, E503 Suite, F501, F503, F505, F507, F509, F570/570A, C556, C557, C559, C561, C514 – C518 & C520, C534, C535, C538, C540, C543, H521, H523, H589, H570, H578, & H580	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA ☒	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) VAT Benchtops Sinks	Amount (Specify SF or LF) 31,000 sf 4,200 sf 70 sf
Abatement Type Remove Repair Encap Enclose ☒ ☒ ☒			
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 280 CYD	Name of Registered Landfill Fairless Landfill/ Grand Central Landfill
Hauler #1) Greenwood Abatement Consultants, Inc. Butler, NJ 07405 NJ DEP # 12561 Hauler #2) Century Waste Services, LLC, 623 Dowd Avenue, Elizabeth NJ 07201 NJDEP# NJ-860		Disposal Date 8/3/26	City, State FL-1000 New Ford Rd, Morrisville, PA 19067 Permit#18072 GCL-1963 Pen Argyle Rd, Pen Argyle, PA 18072 Permit # 100265
Completed by (Print or Type) Raymond Pedalino	Title Sr. Project Manager	Signature Raymond Pedalino	Date July 8, 2026

GAC # 2026-060

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

Rock 4322354

Date of Notification (1) 06/20/20 7/6/26		Name of Building Owner/Operator (2) St Henrys church		RECEIVED					
Agencies Notified		Type Notification		Street Address 625 Avenue C					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA		☒ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation		City, State, Zip Code Bayonne NJ 07002 Name of Contact Reverend Raul Gaviola					
				Telephone Number 2014360857					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Busy Bees Pre K School				Type of Facility (4)					
Street Address 625 Avenue C				☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Bayonne				Square Feet 88500	# of Floors 3				
County (6) Hudson				Bldg. Age 130					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Educational Day care							
Name of Monitoring Firm Hired by Building Owner (8) McCabe Environmental Services LLC		ASCM No. 00118	Name of Abatement Contractor (9) JCR Management Specialist LLC						
Street Address 464 Valley Brook Avenue		Street Address 306 Victor PI							
City, State, Zip Code Lyndhurst NJ 07071		City, State, Zip Code Neptune NJ 07753							
Project Manager for Monitoring Firm Gary Clare		Telephone No. 2018356902	Telephone No. 7327591871	License No. 02087					
Start Date (10) 07/06/20 07/9/26		Scheduled Completion Date (11) 07/24/26		Name of OSHA Monitor JCR Management Specialist LLC					
Occupancy Status During Abatement (Check Only One)				Street Address 306 Victor PI					
☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: <u>M-sat 0700 -2400hrs as needed</u>				City, State, Zip Code Neptune NJ 07753					
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			XX	Plaster Ceiling	150sf	XX			
2nd floor classrooms			XX	Plaster Ceilings	4500sf	XX			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. 482653		Cubic Yards of Waste 80	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth NJ				Disposal Date 07/25/26	City, State Morrisville Pa				
Completed by John C Riley			Title Owner	Signature <i>John Riley</i>		Date 06/26/26			

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

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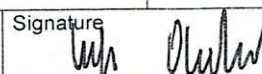
Date of Notification (1) 6 / 25 / 26		Name of Building Owner/Operator (2) Lindenwold Board of Education							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 801 Egg Harbor Road							
		City, State, Zip Code Lindenwold, NJ 08021							
		Name of Contact Kathleen Huder	Telephone Number 856-783-0276						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Lindenwold School #5		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 550 Chews Landing Rd									
City (5) Lindenwold	Square Feet	# of Floors	Bldg. Age						
County (6) Camden	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Horizon Environmental Group, Inc.		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC						
Street Address PO Box 316		Street Address 1123 BEAVER STREET							
City, State, Zip Code Thorofare, NJ 08086		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Steve Flanigan	Telephone No. 856-848-0800	Telephone No. 215-788-6040	License No. 02121						
Start Date (10) 6 / 29 / 26	Scheduled Completion Date (11) 7 / 10 / 26	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / PM - AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Rooms 100-105A	☐	☒	☐	Floor tile and mastic	5000 SF	☒	☐	☐	☐
Nurses Office	☐	☒	☐	Floor tile and mastic	400 SF	☒	☐	☐	☐
	☐	☒	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.		Cubic Yards of Waste	Name of Registered Landfill Conestoga Landfill				
City, State Freehold, NJ				Disposal Date	City, State Morgantown, PA				
Completed By (Print or Type) Brian Scaffaro	Title Estimator			Signature <i>Brian Scaffaro</i>	Date 6/25/26				

ASB-41
MAY 11 **B524036**

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

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

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Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) New Jersey Institute of Technology		JUL - 8 2026					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 323 Martin Luther King Jr Blvd		ASBESTOS CONTROL & LICENSING					
		City, State, Zip Code Newark, NJ 07102							
		Name of Contact Alexandra Carreras		Telephone Number 973-596-5356					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) NJIT - Tiernan Hall, Lecture Hall #2			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)						
Street Address 161 Warren Street (120-142 Bleeker Street)									
City (5) Newark		Square Feet 156,000	# of Floors 4	Bldg. Age 30 +					
County (6) Essex		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Tiernan Hall - NJIT					
Name of Monitoring Firm Hired by Building Owner (8) OMEGA Environmental Services		ASCM No.		Name of Abatement Contractor (9) East Coast Haz Mat Removal, Inc.					
Street Address 280 Huyler St., South Hackensack		Street Address 494 East 41st Street							
City, State, Zip Code South Hackensack, NJ 07606		City, State, Zip Code Paterson, NJ 07504							
Project Manager for Monitoring Firm Stan Blackman - Project Manager		Telephone No. 201-489-8700		Telephone No. 973-345-0022	License No. 02117				
Start Date (10) 07 / 08 / 26		Scheduled Completion Date (11) 07 / 24 / 26		Name of OSHA Monitor Same as above					
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 07AM-3:30PM/ PM-___AM				Street Address					
				City, State, Zip Code					
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lecture Hall # 2	☐	☒	☐	Popcorn Ceiling	900 SF	☒	☐	☐	☐
Lecture Hall # 2/Prep Room	☐	☒	☐	VAT/mastic	2140 SF	☒	☐	☐	☐
Lecture Hall # 2/Prep Room	☐	☒	☐	Lab Contertop	64 SF	☐	☐	☐	☐
Lecture Hall # 2/Prep Room	☐	☒	☐	Transite Lab Hood	480 SF	☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC.		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 30	Name of Registered Landfill Waste Mgmt. - Fairless Hills				
City, State Elizabeth, NJ 07201		Disposal Date 07-22-2026		City, State Morrisville, PA					
Completed By (Print or Type) Leslie Olszewski		Title Sr. Project Mgr.		Signature 		Date 07-01-26			

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

Print Form

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JUL 14 2026

Date of Notification (1) <u>July 9, 2026</u>		Name of Building Owner/Operator (2) Lawrenceville Shopping Associates LLC							
Agencies Notified	Type Notification	Street Address 112 West 34th Street, Suite 2106							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☒ Amended Amendment # <u>7</u> ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code New York, NY 10120							
		Name of Contact Jack J. Jermal	Telephone Number 212-629-4502						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Burlington Store		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 2495 Route 1		Square Feet 50,000	# of Floors 20						
City (5) Lawrencville		Bldg. Age 50+							
County (6) Mercer	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Retail							
Name of Monitoring Firm Hired by Building Owner (8) Atlas Technical Consultants		ASCM No.	Name of Abatement Contractor (9) ecoservices, LLC						
Street Address 3 Terri Lane		Street Address 303 B National Road							
City, State, Zip Code Burlington, NJ 08016		City, State, Zip Code Exton, PA 19341							
Project Manager for Monitoring Firm John Lutz		Telephone No. 609-386-8800	Telephone No. 484-872-8884						
License No. 01161									
Start Date (10) 2/17/26	Scheduled Completion Date (11) <u>7/24/26</u>	Name of OSHA Monitor EMSL							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: in segregated area		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Western portion - Phase I		X		Mastic	9,580 SF	X			
Western portion - Phase II		X		Mastic	10,000 SF	X			
Under Mezzanine		X		Mastic	6,000 SF	X			
Northeastern quadrant		X		Mastic	25,000 SF	X			
Name of Registered Waste Hauler Waste Management of Trenton		NJDEP Waste Hauler ID No.	Cubic Yards of Waste 100	Name of Registered Landfill Fairless Landfill					
City, State Trenton, NJ		Disposal Date TBD		City, State Morrisville, PA					
Completed by Jack Bally		Title Sr. Project Manager		Signature <u>Jack Bally</u>		Date <u>7/9/26</u>			

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

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JUL 10 2026

Date of Notification (1) 7 / 2 / 26		Name of Building Owner/Operator (2) Cranford Twp. School District Job #2604-6563 Check #18013					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment #3 ☐ Emergency (including justification) ☐ Cancellation	Street Address 132 Thomas Street City, State, Zip Code Cranford, NJ 07016 Name of Contact Business Administration Telephone Number 908-272-9100					
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Bloomingdale Ave School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 200 Bloomingdale Avenue		Square Feet					
City (5) Cranford		# of Floors					
County (6) Union		Bldg. Age					
County Code (7)(STATE USE ONLY)		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) EnviroVision Consultants, Inc.		ASCM No. 00079					
Name of Abatement Contractor (9) AbateTech, Inc.		Street Address 30 Maple Ave. PO Box 25					
City, State, Zip Code Fair Lawn, NJ 07410		City, State, Zip Code Lumberton, NJ 08048					
Project Manager for Monitoring Firm Frederick Lawson		Telephone No. 973-636-9145					
Telephone No. 609-265-2107		License No. 00529					
Start Date (10) 6 / 24 / 26		Scheduled Completion Date (11) 7 / 10 / 26					
Name of OSHA Monitor IATL		Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM					
Street Address 9000 Commerce Parkway		City, State, Zip Code Mount Laurel, NJ 08054					
Scope of Work (Check all that apply) ☐ >3 sf or >3 lf ☒ >160 sf or >260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Kindergarten Wing	☐ ☒ ☐	Pipe Fittings	55 LF	☒	☐	☐	☐
Kindergarten Wing/All Purpose Room	☐ ☒ ☐	Window/Door caulk & glazing	303 LF	☒	☐	☐	☐
Kindergarten Wind/Media Center	☐ ☒ ☐	Floor tile & Mastic	2,650 SF	☒	☐	☐	☐
	☐ ☐ ☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill			
City, State Lumberton, NJ		Disposal Date 7/10/26		City, State Morrisville, PA			
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.		Signature		Date 7-2-26	

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

4367777

Date of Notification (1) 6 / 22 / 26		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 152 Jumping Brook Road							
		City, State, Zip Code Lincroft, NJ 07738							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 152 Jumping Brook Road		Square Feet 2094	# of Floors 2						
City (5) Lincroft		Bldg. Age 64							
County (6) Monmouth	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired by Building Owner (8) Indoor Air Services		ASCM No.	Name of Abatement Contractor (9) Brick Industries, Inc.						
Street Address 2015 Old York Road		Street Address PO Box 915							
City, State, Zip Code Burlington, NJ 08016		City, State, Zip Code Brick, NJ 08723							
Project Manager for Monitoring Firm Tom Worrell		Telephone No. 609-351-1362	Telephone No. 7328997499						
		License No. 01196							
Start Date (10) 6 / 23 / 26	Scheduled Completion Date (11) 6 / 24 / 26	Name of OSHA Monitor Indoor Air Services							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 2015 Old York Road							
		City, State, Zip Code Burlington, NJ 08016							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
First floor	☐	☐	☐	Floor tile	300SF	☒	☐	☐	☐
First floor	☐	☐	☐	Mastic	300SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste 4	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 6/25/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 			Date 6/22/26		

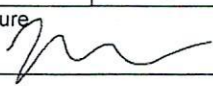
State of New Jersey
Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

4367669

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Date of Notification (1) 7/07/2026		Name of Building Owner/Operator Private House	
Agencies Notified ☒ EPA ☐ DCA ☒ DOL ☐ DEP ☒ DOH	Notification Type ☐ Initial Notification ☐ Amended #1 ☒ Emergency notification (including justification) ☐ Cancelled		Street Address 647 NJ 15 City, State, Zip Code Lake Hopatcong NJ 07849 Name of Contact ASBESTOS CONSULTING Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Private House Street Address 647 NJ -15		Type of Facility (4)x ☒ School (K-12) Subchapter 8 ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings., homes, etc.) Sq. Feet: Approximately 1300 # of Floors:1 Bldg. Age: 50+ Current Use (prior if being demolished): School	
City (5) Lake Hopatcong NJ 07849	County (6) Morris	County Code (7) (State Use Only)	Name of Monitoring Firm Hired by Bldg. Owner IAQ Guru Inc ASCM No. 00127
Street address 49 Frances Street City State & zip code Totowa NJ 07512		Name of Contractor (9) BL Contracting Inc. Street Address 5 Marguerite Lane City State, Zip Code Towaco NJ 07082	
Project Manager for Monitoring Firm Mark Jovic 973-659-0392		Telephone Number 973-901-0153	License Number 01265
Scheduled Start Date (10) 7/8/2026	Scheduled Completion Date 7/10/2026	Name of OSHA Monitoring BL Contracting Inc	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Facility occupied During Abatement ☒ Other - Describe: Monday- Saturday 7 am- 4pm		Street Address 5 Marguerite Lane City, State, Zip Code Towaco NJ 07082	
Source of Work (Check all that apply) ☒ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☐ Renovation ☒ Demolition ☐ Wrap & Cut Procedure ☐ Full Containment ☒ Tent Procedure ☐ Non-Friable Procedure			
Location of Asbestos-Containing Material (ACM) in Facility (13) Living Room	Is Location Normally Used Solely by Main/Custodial Staff (12) YES NO NA ☒	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other misc.) Pipe Insulation Clean up	Amount (Specify SF or LF) 70 LF Abatement Type Remove Repair Encap Enclos ☒
Name of Reg. Waste Hauler BL Contracting Inc	NJDEP Waste Hauler ID # 0036784	Cubic Yards of Waste 3	Name of Registered Landfill T.R.R..F
Completed by (Print or Type) Nedo Vasilic		Title Project Manager	Signature <i>Nedo Vasilic</i> Date 7/07/2026

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

Date of Notification (1) 7/8/2026		Name of Building Owner/Operator (2) Robert Treat Center							
Agencies Notified	Type Notification	Street Address Fifty Park Place							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Newark, NJ 07102							
		Name of Contact Miles Berger	Telephone Number 973-623-3300						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Robert Treat Center		Type of Facility (4)							
Street Address Fifty Park Place		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Newark	Square Feet unknown	# of Floors unknown	Bldg. Age unknown						
County (6) Essex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TBD		ASCN No.	Name of Abatement Contractor (9) Gold Coast Management LLC						
Street Address		Street Address 30 Sherman Ave							
City, State, Zip Code		City, State, Zip Code Jersey City, NJ 07307							
Project Manager for Monitoring Firm TBD		Telephone No.	License No. 02109						
Start Date (10) 7/10/2026	Scheduled Completion Date (11) 7/11/2026	Name of OSHA Monitor John Kim							
Occupancy Status During Abatement (Check Only One)		Street Address 254 Ridgewood Ave							
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>Basement utility room restricted area</u>		City, State, Zip Code Glen Ridge NJ 07028							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☐ Renovation ☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Utility Room			X	Insulation	25 SF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. NJ860	Cubic Yards of Waste 5	Name of Registered Landfill Conestoga Landfill					
City, State Elizabeth, NJ			Disposal Date	City, State Morgantown PA					
Completed by John Kim		Title President	Signature 			Date 7/8/2025			

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JUL 6 2026

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

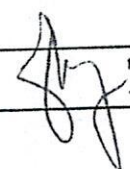
Date of Notification (1) 06/30/2026		Name of Building Owner/Operator (2) Paramus BOE							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA	Type Notification ☐ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation	Street Address 145 Spring Valley Road							
		City, State, Zip Code Paramus, NJ 07652							
		Name of Contact Brooke Bartley	Telephone Number 201.261.7800						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Paramus High School		Type of Facility (4) ☒ School (K-12) Sub-8 Occupied ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & Commercial buildings, homes, etc.)							
Street Address 99 E Century Road		Square Feet: 100,000+	# of Floors 1 55+						
City (5) Paramus	County (6) Bergen	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) School						
Name of Monitoring Firm Hired by Building Owner (8) Whitman		ASCM No. 00110	Name of Abatement Contractor (9) Unicorn Contracting Corp.						
Street Address 100 Franklin Square Drive, Suite 200		Street Address 14 Willow street							
City, State, Zip Code Somerset, NJ 08873		City, State, Zip Code Bloomfield, NJ 07003							
Project Manager for Monitoring Firm Mark Costantino		Telephone No. 732.390.5858	Telephone No. 973-333-9176 License No. 01331						
Start Date (10) 07/10/2026		Scheduled Completion Date (11) 07/24/2026							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7am - 3:30pm		Name of OSHA Monitor Envirovision Consultants, Inc.							
		Street Address 20-21 Wagaraw Rd., Bldg. 35-E							
		City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure * ☐ Mini-Enclosure ☐ Glovebag Procedure. ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Woodshop Room (and attached storage rooms)		x		Floor Mastic	3,767 SF	x			
		x		Vapor Barrier Flooring (Paper)	3,767 SF	x			
Name of Registered Waste Hauler Century Waste Services, LLC		NJDEP Waste Hauler ID No. 0035844		Cubic Yards of Waste TBD	Name of Registered Landfill Grand Central Landfill				
City, State Elizabeth, NJ				Disposal Date TBD	City, State Pen Argyl, PA				
Completed by Katia Belevska		Title Administrator		Signature <i>Katia Belevska</i>			Date: 06/30/2026		

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

Date of Notification (1) 06/24/2026		Name of Building Owner/Operator (2) Paramus BOE	
Agencies Notified	Type Notification	Street Address 145 Spring Valley Road	
☒ EPA	☒ Initial	City, State, Zip Code Paramus, NJ 07652	
☐ DEP	☐ Amended	Name of Contact Brooke Bartley	
☒ DOL	☐ Amendment # _____	Telephone Number 201.261.7800	
☒ DOH	☐ Emergency (including justification)		
☒ DCA	☐ Cancellation		

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Paramus High School		Type of Facility (4) ☒ School (K-12) Sub-8 Occupied ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & Commercial buildings, homes, etc.)	
Street Address 99 E Century Road		Square Feet: 100,000+	# of Floors 1
City (5) Paramus	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) School	
County (6) Bergen	ASCM No. 00110	Name of Abatement Contractor (9) Unicorn Contracting Corp.	
Name of Monitoring Firm Hired by Building Owner (8) Whitman		Street Address 14 Willow street	
Street Address 100 Franklin Square Drive, Suite 200		City, State, Zip Code Bloomfield, NJ 07003	
City, State, Zip Code Somerset, NJ 08873		Telephone No. 973-333-9176	License No. 01331
Project Manager for Monitoring Firm Mark Costantino		Telephone No. 732.390.5858	
Start Date (10) 07/06/2026	Scheduled Completion Date (11) 07/20/2026	Name of OSHA Monitor Envirovision Consultants, Inc.	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7am - 3:30pm		Street Address 20-21 Wagaraw Rd., Bldg. 35-E	
		City, State, Zip Code Fair Lawn, NJ 07410	
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure * ☐ Mini-Enclosure ☐ Glovebag Procedure. ☐ Non-Exempted (*) and Non-Friable Procedure			

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Woodshop Room (and attached storage rooms)		X		Floor Mastic	3,767 SF	X			
		X		Vaper Barrier Flooring (Paper)	3,767 SF	X			

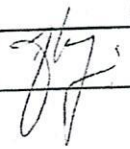
Name of Registered Waste Hauler Century Waste Services, LLC	NJDEP Waste Hauler ID No. 0035844	Cubic Yards of Waste TBD	Name of Registered Landfill Grand Central Landfill
City, State Elizabeth, NJ	Disposal Date TBD	City, State Pen Argyl, PA	
Completed by Blazhe Grozdanov	Title Project Manager	Signature 	Date: 06/24/2026

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

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) Madison Board of Education							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Courtesy ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 359 Woodland Road		City, State, Zip Code Madison, NJ 07940							
Name of Contact John Eschmann		Telephone Number 973.593.3157 x 7189							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Madison High School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & Commercial buildings, homes, etc.)							
Street Address 170 Ridgedale Avenue		Square Feet: 120,000 # of Floors: 2 55+							
City (5) Madison, NJ 07940		County Code (7) (STATE USE ONLY) _____							
County (6) Morris		Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) McCabe Environmental Services LLC		ASCM No. 00118							
Street Address 464 Valley Brook Avenue		Name of Abatement Contractor (9) Unicorn Contracting Corp.							
City, State, Zip Code Lyndhurst, NJ 08736		Street Address 14 Willow street							
Project Manager for Monitoring Firm Jarred Panecki		City, State, Zip Code Bloomfield, NJ 07003							
Telephone No. 732.552.9615		Telephone No. 973-333-9176							
Start Date (10) 07/03/2026		License No. 01331							
Scheduled Completion Date (11) 07/10/2026		Name of OSHA Monitor Envirovision Consultants, Inc.							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7am - 3:30pm		Street Address 20-21 Wagaraw Rd., Bldg. 35-E							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		City, State, Zip Code Fair Lawn, NJ 07410							
☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure * ☒ Mini-Enclosure ☐ Glovebag Procedure. ☐ Non-Exempted (*) and Non-Friable Procedure							
Please see the attached McCabe Report									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Gymnasium catwalk		x		TSI - historical debris	< 3 LF	x			
						x			
Name of Registered Waste Hauler Unicorn Contracting Corp.		NJDEP Waste Hauler ID No. 0035844		Cubic Yards of Waste TBD	Name of Registered Landfill Fairless Hills Landfill				
City, State Bloomfield, New Jersey		Disposal Date TBD		City, State Morrisville, PA					
Completed by Blazhe Grozdanov		Title Project Manager		Signature 					
				Date: 07/2/2026					

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

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Date of Notification (1) 6/30/26		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified	Type Notification	Street Address 23 Plymouth Rd							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Hammonton NJ 08037							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 137 South White Horse Pike		Square Feet 1000+	# of Floors 2						
City (5) Hammonton, NJ, 08037		Bldg. Age 50+							
County (6) Atlantic	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) House							
Name of Monitoring Firm Hired by Building Owner (8) Coastal Environmental Compliance		ASCM No.	Name of Abatement Contractor (9) Pernaco Inc.						
Street Address PO Box 167		Street Address PO Box 329							
City, State, Zip Code Hammonton, NJ, 08037		City, State, Zip Code West Berlin NJ 08091							
Project Manager for Monitoring Firm Cathy Ledden		Telephone No. 609-820-9312	Telephone No. 856-753-9800						
		License No. 00727							
Start Date (10) 7-13-26	Scheduled Completion Date (11) 7-27-26	Name of OSHA Monitor Same							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			x	Boiler Gasket	20 LF	x			
Basement			x	Flue Packing	1 SF	x			
Name of Registered Waste Hauler Pernaco Inc.		NJDEP Waste Hauler ID No. 21787	Cubic Yards of Waste 1	Name of Registered Landfill Atlantic County MUA					
City, State West Berlin NJ			Disposal Date 7/27/26	City, State Egg Harbor Twp NJ					
Completed by Anthony T Perna		Title President		Signature 			Date 6/30/26		

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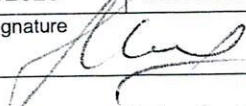
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Print Form

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

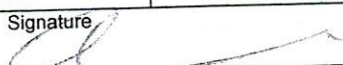
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JUL 6 2026

Date of Notification (1) 06/25/2026		Name of Building Owner/Operator (2) North Plainfield School District							
Agencies Notified	Type Notification	Street Address 33 Mountain Ave							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code North Plainfield NJ 07060							
		Name of Contact Pamela Graziano	Telephone Number 908-769-6060						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) North Plainfield High School		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 34 Wilson Ave		Square Feet N/A	# of Floors N/A						
City (5) North Plainfield NJ 07060		Bldg. Age N/A							
County (6) Somerset	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Temple Building							
Name of Monitoring Firm Hired by Building Owner (8) New Wave Engineering LLC		ASCM No.	Name of Abatement Contractor (9) Teal Management						
Street Address PO BOX 4124		Street Address 24 Motrley Drive							
City, State, Zip Code Wayne NJ 07470		City, State, Zip Code Woodland Park NJ 07424							
Project Manager for Monitoring Firm Nadine Bello		Telephone No. 973-616-4601	Telephone No. 862-243-1471						
		License No. 02063							
Start Date (10) 07/06/2026	Scheduled Completion Date (11) 07/10/2026	Name of OSHA Monitor Teal Management							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 24 Morley Drive							
		City, State, Zip Code Woodland Park NJ 07424							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Nurses Suite			x	ceiling glue dots	60 SF	x			
Name of Registered Waste Hauler Teal Management		NJDEP Waste Hauler ID No. 40229	Cubic Yards of Waste 5 CY	Name of Registered Landfill Fairless Landfill					
City, State Woodland Park NJ 07424		Disposal Date 07/10/2026		City, State Morrisville PA					
Completed by Tome Maslarkov		Title Project Manager	Signature 			Date 06/25/2026			

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

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Date of Notification (1) 6/11/26		Name of Building Owner/Operator (2) Delran Twp School District					
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation					
Street Address 52 Harford Rd		City, State, Zip Code Delran NJ 08075					
Name of Contact Mike Digionanni		Telephone Number 609-868-0461					
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Delran High School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 50 Hartford Rd		Square Feet 1000+					
City (5) Delran NJ 08075		# of Floors 2					
County (6) Burlington		Bldg. Age 50+					
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) Coastal Environmental Compliance		ASCM No. _____					
Street Address PO Box 167		Name of Abatement Contractor (9) Pernaco Inc.					
City, State, Zip Code Hammonton NJ 08037		Street Address PO Box 329					
Project Manager for Monitoring Firm Cathy Ledden		City, State, Zip Code West Berlin NJ 08091					
Start Date (10) 7/13/26		Telephone No. 609-820-9312					
Scheduled Completion Date (11) 7/17/26		Telephone No. 856-753-9800					
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>work area closed off</u>		License No. 00727					
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 176 SF	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Kitchen Office				x			
Name of Registered Waste Hauler Pernaco Inc		NJDEP Waste Hauler ID No. 21787		Cubic Yards of Waste 4		Name of Registered Landfill Fairless Hills	
City, State Berlin NJ		Disposal Date 7/17/26		City, State Morrisville PA 19067			
Completed by Anthony T Perna		Title President		Signature 		Date 6/11/26	

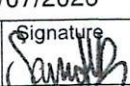
* Do not use this form for asbestos licensure exempted activities.

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

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Date of Notification (1) 06/30/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 39 Wellington Road							
		City, State, Zip Code East Brunswick, NJ 08816							
		Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Street Address 39 Wellington Road		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) East Brunswick		Square Feet 2,544	# of Floors 2						
County (6) Middlesex		Bldg. Age 64							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv		ASCM No. _____	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address PO Box 341		Street Address 623 Cutler Avenue							
City, State, Zip Code Chesterfield, NJ 08515		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Nora Pearce		Telephone No. 609-298-4070	License No. 00842						
Start Date (10) 07/27/2026		Scheduled Completion Date (11) 08/07/2026							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Name of OSHA Monitor EMSL Analytical, Inc.							
		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ Renovation ☒ ≥160 sf or ≥260 lf ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lower-Level			X	Joint Compound/Sheetrock	2,000 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 14	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 08/07/2026		City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator		Signature 				Date 06/30/2026	

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

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Date of Notification (1) 06/30/2026		Name of Building Owner/Operator (2) The Barchester Corporation		JUL 6 2026				
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 3234 Riverview Lane					
			City, State, Zip Code Daytona Beach, FL 32118					
		Name of Contact Joseph Seravalli		Telephone Number 386-788-8831				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Santander Bank			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 201 Harmony Road								
City (5) Middletown			Square Feet 5,000	# of Floors 2	Bldg. Age 75			
County (6) Monmouth		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Bank				
Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting, LLC		ASCM No. _____		Name of Abatement Contractor (9) Shade Environmental, LLC				
Street Address 304 Harper Drive, Suite 207		Street Address 623 Cutler Avenue						
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052						
Project Manager for Monitoring Firm Rafael Torres		Telephone No. 856-581-9055		Telephone No. 856-755-0099	License No. 00842			
Start Date (10) 08/10/2026		Scheduled Completion Date (11) 08/21/2026		Name of OSHA Monitor EMSL Analytical, Inc.				
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address 200 Route 130 North				
				City, State, Zip Code Cinnaminson, NJ 08077				
Scope of Work (Check All That Apply)								
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Throughout Ground Floor & Vestibule		X	Joint Compound & Associated Cove Base	4,140 SF	X			
Break Room Closet		X	Pipe Insulation	1 LF	X			
Break Room		X	Floor Tile & Mastic	5 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 40	Name of Registered Landfill Conestoga Landfill			
City, State Freehold, NJ		Disposal Date 08/21/2026		City, State Morgantown, PA				
Completed by Samantha Brown		Title Operations Coordinator		Signature 		Date 06/30/2026		

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NOTIFICATION OF ASBESTOS ABATEMENT

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

JUL 7 2026

Date of Notification (1) 06/24/2026		Name of Building Owner/Operator (2) Paramus BOE							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 145 Spring Valley Road		ASBESTOS CONTROL & LICENSING							
City, State, Zip Code Paramus, NJ 07652		Telephone Number 201.261.7800							
Name of Contact Brooke Bartley									
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Paramus High School		Type of Facility (4) ☒ School (K-12) Sub-8 Occupied ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & Commercial buildings, homes, etc.)							
Street Address 99 E Century Road									
City (5) Paramus		Square Feet: 100,000+	# of Floors 1 55+						
County (6) Bergen		County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) School						
Name of Monitoring Firm Hired by Building Owner (8) Whitman		ASCM No. 00110	Name of Abatement Contractor (9) Unicorn Contracting Corp.						
Street Address 100 Franklin Square Drive, Suite 200		Street Address 14 Willow street							
City, State, Zip Code Somerset, NJ 08873		City, State, Zip Code Bloomfield, NJ 07003							
Project Manager for Monitoring Firm Mark Costantino		Telephone No. 732.390.5858	Telephone No. 973-333-9176						
		License No. 01331							
Start Date (10) 07/06/2026		Scheduled Completion Date (11) 07/20/2026	Name of OSHA Monitor Envirovision Consultants, Inc.						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7am - 3:30pm		Street Address 20-21 Wagaraw Rd., Bldg. 35-E							
		City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure * ☐ Mini-Enclosure ☐ Glovebag Procedure. ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Woodshop Room (and attached storage rooms)		x		Floor Mastic	3,767 SF	x			
		x		Vaper Barrier Flooring (Paper)	3,767 SF	x			
Name of Registered Waste Hauler Century Waste Services, LLC		NJDEP Waste Hauler ID No. 0035844		Cubic Yards of Waste TBD	Name of Registered Landfill Grand Central Landfill				
City, State Elizabeth, NJ				Disposal Date TBD	City, State Pen Argyl, PA				
Completed by Blazhe Grozdanov		Title Project Manager		Signature 	Date: 06/24/2026				

993

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

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JUL 7 2026

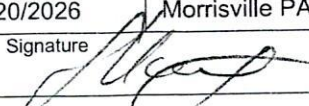
Date of Notification (1) 05/26/26		Name of Building Owner/Operator (2)	
Agencies Notified	Type Notification	Street Address	
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	46 Quincy St City, State, Zip Code Passaic, NJ 07055	
		Name of Contact	Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4)	
Street Address 46 Quincy St		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
City (5) Passaic, NJ 07055	Square Feet	# of Floors	Bldg. Age
County (6) Passaic	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) TBD		Name of Abatement Contractor (9) Renewal with Grace Inc	
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Project Manager for Monitoring Firm		Telephone No.	
Start Date (10) 06/06/26		Scheduled Completion Date (11) 09/10/26	
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor	
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address 37 coachman Ln	
		City, State, Zip Code Levittown NY 11756	
Scope of Work (Check All That Apply)			
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition	
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes No N/A		
Transite Siding	X		Surfacing
			4500 SF
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste TBD
City, State 23 Kown ave Elizabeth NJ		Name of Registered Landfill united stat	
Completed by Omar Vega		Title Owner	Signature Omar Vega
		Date 5/26/2026	

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

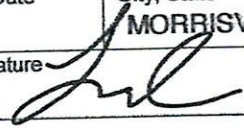
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Date of Notification (1) 06/08/26		Name of Building Owner/Operator (2) Cranford Board of Educations		JUL 7 2026							
Agencies Notified		Type Notification		Street Address							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		132 Thomas Street							
				City, State, Zip Code Cranford NJ 07016							
		Name of Contact Robert Carfagno		Telephone Number 908-709-6210							
FACILITY INFORMATION											
Name of Facility Where Abatement is Taking Place (3) Orange Ave School				Type of Facility (4)							
Street Address 901 Orange Ave				☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Cranford NJ 07016				Square Feet N/A	# of Floors N/A						
County (6) Union				Bldg. Age N/A							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) School									
Name of Monitoring Firm Hired by Building Owner (8) EnviroVision Consultants Inc		ASCM No.		Name of Abatement Contractor (9) Teal Management							
Street Address 20-21 Wagaraw Road BLDG 35E				Street Address 24 Morley Drive							
City, State, Zip Code Fair Lawn NJ 07410				City, State, Zip Code Woodland Park NJ 07424							
Project Manager for Monitoring Firm Frederick Larson		Telephone No. 973-636-9145		Telephone No. 862-243-1471	License No. 02063						
Start Date (10) 07/06/2026		Scheduled Completion Date (11) 07/20/2026		Name of OSHA Monitor Teal Management							
Occupancy Status During Abatement (Check Only One)				Street Address 24 Morley Drive							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: <u>wrup&cut</u>				City, State, Zip Code Woodland Park NJ 07424							
Scope of Work (Check All That Apply)											
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type					
		Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure	
Rooms 43A/B/C//D-44A/B/C/D				x	PIPE FITTINGS/WRUP&CUT	62 LF	x				
Room 3:Room 46:Room 47				x	PIPE FITTINGS/WRUP&CUT	30 LF	x				
Hallway by Media Center				x	PIPE FITTINGS/WRUP&CUT	12 LF	x				
Corridor by Rooms 46/47				X	PIPE FITTINGS/WRUP&CUT	12 LF					
Name of Registered Waste Hauler Teal Management		NJDEP Waste Hauler ID No. 40229		Cubic Yards of Waste 8 CY	Name of Registered Landfill Fairless Landfill						
City, State Woodland Park NJ 07424				Disposal Date 07/20/2026	City, State Morrisville PA						
Completed by Tome Maslarkov		Title Project Manager		Signature 			Date 06/11/2026				

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

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Date of Notification (1) 6/25/26		Name of Building Owner/Operator (2)						
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation						
Street Address 261 MADISON AVE 9TH FLOOR		City, State, Zip Code NEWA YORK, NY 10016						
Name of Contact		Telephone Number						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) RESIDENTIAL HOSUE		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 383 PARK AVE		Square Feet 1500						
City (5) RUTHERFORD		# of Floors 2						
County (6) BERGEN		Bldg. Age +50						
County Code (7) BERGEN		Current Use (Prior if being demolished) RESIDENTIAL						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.						
Street Address		Name of Abatement Contractor (9) MALCO ENVIRONMENTAL LLC						
City, State, Zip Code		Street Address 24 LINCOLN AVE W						
Project Manager for Monitoring Firm		City, State, Zip Code CRANFORD, NJ 07016						
Telephone No.		Telephone No. 5133487						
Start Date (10) 07/04/2026		License No. 02113						
Scheduled Completion Date (11) 07/07/2026		Name of OSHA Monitor						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address						
		City, State, Zip Code						
Scope of Work (Check All That Apply)								
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition						
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
BASEMENT		X	FLOOR TILE	600SF	X			
BASEMENT		X	PIPE INSULATION	115LF				
Name of Registered Waste Hauler CENTURY WASTE		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste		Name of Registered Landfill United States		
City, State 623 DOWD AVE ELIZABETH, NJ 07201		Disposal Date		City, State MORRISVILLE, PA				
Completed by JENNIFER GOMES		Title PRESIDENT		Signature 		Date 06/25/2026		

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

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Date of Notification (1) 06/21/2026		Name of Building Owner/Operator (2)	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 20 Newark Ave	
		City, State, Zip Code Manasquan, NJ 08736	
		Name of Contact _____	
		Telephone Number _____	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 20 Newark Ave		Square Feet 800	# of Floors 1
City (5) Manasquan, NJ 08736		Bldg. Age 1942	
County (6) Monmouth	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC
Street Address		Street Address 75 Voorhis Place	
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456	
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126
Start Date (10) 06/30/2026	Scheduled Completion Date (11) 07/06/2026	Name of OSHA Monitor	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address	
		City, State, Zip Code	
Scope of Work (Check All That Apply)			
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition	
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes ☐	No ☒	
Exterior	☐	☒	siding
	☐	☐	1,000 SF
	☐	☐	x
	☐	☐	☐
	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Name of Registered Landfill Grand Central Sanitary Landfill
City, State Elizabeth, NJ		Disposal Date 07/06/2026	City, State Pen Argyl, PA
Completed by Lubica Perez		Title Owner	Signature Lubica Perez
		Date 06/21/2026	

3780

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

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Date of Notification (1) 06/19/2026		Name of Building Owner/Operator (2) JUL 6 2026								
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 12 Wagon Ln City, State, Zip Code Cherry Hill Township, NJ 08002 Name of Contact _____ Telephone Number _____							
	FACILITY INFORMATION									
	Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
	Street Address 12 Wagon Ln		Square Feet 3,398							
City (5) Cherry Hill Township, NJ 08002		# of Floors 1	Bldg. Age 1964							
County (6) Camden		County Code (7) (STATE USE ONLY) _____								
Name of Monitoring Firm Hired by Building Owner (8) _____		ASCM No. _____								
Street Address City, State, Zip Code _____		Name of Abatement Contractor (9) VEL Construction, LLC Street Address 75 Voorhis Place City, State, Zip Code Ringwood NJ 07456								
Project Manager for Monitoring Firm _____		Telephone No. _____								
Start Date (10) 06/22/2026		Scheduled Completion Date (11) 06/25/2026								
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Name of OSHA Monitor _____ Street Address _____ City, State, Zip Code _____								
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure										
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 35 SF	Abatement Type				
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure	
First Floor Shower		X		Floor tile & mastic		X				
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5		Name of Registered Landfill Grand Central Sanitary Landfill				
City, State Elizabeth, NJ		Disposal Date 06/25/2026		City, State Pen Argyl, PA		Date 06/19/2026				
Completed by Lubica Perez		Title Owner		Signature Lubica Perez		Date 06/19/2026				

ASB-41 (R-06-08)

3776

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

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Date of Notification (1) 06/20/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 565 Myrtle Ave City, State, Zip Code Garwood, NJ 07027 Name of Contact _____ Telephone Number _____						
	ASBESTOS CONTROL & LICENSING								
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 565 Myrtle Ave		Square Feet 1,821	# of Floors 1						
City (5) Garwood, NJ 07027		Bldg. Age 1959							
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 06/29/2026	Scheduled Completion Date (11) 07/03/2026		Name of OSHA Monitor						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		Floor tile & mastic	317 SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/03/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 06/20/2026			

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

3775

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

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Date of Notification (1) 06/20/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 519 Prospect St City, State, Zip Code Nutley, NJ 07110 Name of Contact Telephone Number					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 519 Prospect St				Square Feet 2,153					
City (5) Nutley, NJ 07110				# of Floors 2					
County (6) Essex				Bldg. Age 1890					
County Code (7) (STATE USE ONLY) _____				Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8)			ASCM No.		Name of Abatement Contractor (9) VEL Construction, LLC				
Street Address			Street Address 75 Voorhis Place						
City, State, Zip Code			City, State, Zip Code Ringwood NJ 07456						
Project Manager for Monitoring Firm			Telephone No.		Telephone No. 201- 466-0166				
					License No. 02126				
Start Date (10) 06/29/2026		Scheduled Completion Date (11) 07/03/2026		Name of OSHA Monitor					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address					
				City, State, Zip Code					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Attic		x		insulation	400 SF	x			
Name of Registered Waste Hauler Century Waste Services			NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill			
City, State Elizabeth, NJ			Disposal Date 07/03/2026		City, State Pen Argyl, PA				
Completed by Lubica Perez			Title Owner		Signature Lubica Perez			Date 06/20/2026	

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3781

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

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Date of Notification (1) 06/22/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified	Type Notification	Street Address							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	94 Sandy Point Dr							
		City, State, Zip Code Brick Township, NJ 08723							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4)							
Street Address 94 Sandy Point Dr		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Brick Township, NJ 08723		Square Feet 1,378	# of Floors 1						
County (6) Ocean		Bldg. Age 1955							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9)							
Street Address		VEL Construction, LLC							
City, State, Zip Code		Street Address 75 Voorhis Place							
Project Manager for Monitoring Firm		City, State, Zip Code Ringwood NJ 07456							
Telephone No.		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/01/2026		Scheduled Completion Date (11) 07/08/2026							
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☐ Renovation ☒ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior		X		siding	960 SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/08/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 06/22/2026			

3782

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

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Check 3782

Date of Notification (1) 06/22/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 712 Elm St							
		City, State, Zip Code Roselle Park, NJ 07204							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 712 Elm St		Square Feet 1,305	# of Floors 1						
City (5) Roselle Park, NJ 07204		Bldg. Age 1922							
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/02/2026	Scheduled Completion Date (11) 07/09/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Bedroom		X		plaster ceiling	512 SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/09/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 06/22/2026			

3779

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

Check 3779
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Date of Notification (1) 06/22/2026		Name of Building Owner/Operator (2) JUL 6 2026	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 88 Townsend Dr
			City, State, Zip Code Middletown Township, NJ 07748
		Name of Contact	Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 88 Townsend Dr		Square Feet 2,992	# of Floors 1
City (5) Middletown Township, NJ 07748		Bldg. Age 1966	
County (6) Monmouth	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC
Street Address		Street Address 75 Voorhis Place	
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456	
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126
Start Date (10) 06/23/2026	Scheduled Completion Date (11) 06/26/2026	Name of OSHA Monitor	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address	
		City, State, Zip Code	
Scope of Work (Check All That Apply)			
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
Laundry		x	wall material
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Name of Registered Landfill Grand Central Sanitary Landfill
City, State Elizabeth, NJ		Disposal Date 06/26/2026	City, State Pen Argyl, PA
Completed by Lubica Perez		Title Owner	Signature Lubica Perez
			Date 06/22/2026

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

Check 3723 ON HOLD
RECEIVED

Date of Notification (1) 05/29/2026		Name of Building Owner/Operator (2) Gary Ruth		JUL 6 2026	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended Amendment # 4 ☐ Emergency (including justification) ☐ Cancellation		Street Address 388 South Livingston Avenue City, State, Zip Code Livingston, NJ 07039 Name of Contact Gary Ruth Telephone Number (917) 459-2175	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Aquinas Academy				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 388 South Livingston Avenue				Square Feet TBD	
City (5) Livingston, NJ 07039				# of Floors 1	
County (6) Essex				Bldg. Age TBD	
County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9) VEL Construction, LLC	
Street Address				Street Address 75 Voorhis Place	
City, State, Zip Code				City, State, Zip Code Ringwood NJ 07456	
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201- 466-0166	
				License No. 02126	
Start Date (10) 04/09/2026		Scheduled Completion Date (11) 08/10/2026		Name of OSHA Monitor	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address	
				City, State, Zip Code	
Scope of Work (Check All That Apply)					
☐ ≥3 sf or ≥3 lf		☒ Renovation		☐ Full Containment with Negative Pressure	
☒ ≥160 sf or ≥260 lf		☐ Demolition		☐ Mini-Enclosure	
				☐ Glovebag Procedure	
				☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)
	Yes	No	N/A		
Please see attached					
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 30	
City, State Elizabeth, NJ		Disposal Date 08/10/2026		Name of Registered Landfill Grand Central Sanitary Landfill	
City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez	
				Date 05/29/2026	

VEL Construction LLC

388 South Livingston Avenue, Livingston, NJ - Aquinas Academy

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Is Location Normally Used Solely by Maintenance/ Custodial Staff?	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type
Room 206 (2 layers of tile)	No	floor tile	830 SF	Removal
Room 207, 20, 209, 210	No	floor tile	4,200 SF	Removal
Hall West Wing	No	floor tile	900 SF	Removal
Office	No	floor tile	880 SF	Removal
Multi-Purpose Room	No	floor tile	2,700 SF	Removal
East Wing Rooms 202, 202, 203, 204	No	floor tile	3,220 SF	Removal
Hall East Wing	No	floor tile	840 SF	Removal
All Purpose Building	No	floor tile & mastic	2,000 SF	Removal
West Wing 200	No	pipe fittings	118	Wrap & cut
Boiler room	No	boiler insulation	60 SF	Repair
Boiler room	No	pipe fittings	20	Wrap & cut

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

Check 3784 RECEIVED

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified	Type Notification	Street Address 331 Main St							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Chatham, NJ 07928							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 331 Main St		Square Feet 3,667	# of Floors 3						
City (5) Chatham, NJ 07928		Bldg. Age 1870							
County (6) Morris	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 06/27/2026	Scheduled Completion Date (11) 07/01/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		Floor tile	400 SF	X			
Basement		X		pipe insulation	35 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/01/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez				Date 06/26/2026		

3791

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

RECEIVED
 Check 3791

Print Form

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) 							
Agencies Notified	Type Notification	Street Address 427 Norwood Ave							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Avon-By-The-Sea, NJ 07717							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4)							
Street Address 427 Norwood Ave		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Avon-By-The-Sea, NJ 07717		Square Feet 1,144	# of Floors 1						
County (6) Monmouth		Bldg. Age 1909							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/06/2026	Scheduled Completion Date (11) 07/13/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior		X		Siding	1,000 SF	X			
Garage		X		windows glazing/caulk	5	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/13/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez				Date 06/26/2026	

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

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Check 3792

Date of Notification (1) 06/28/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified	Type Notification	Street Address 156 Rosedale Ave							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Madison, NJ 07940 ASBESTOS CONTROL & LICENSING							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4)							
Street Address 156 Rosedale Ave		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Madison, NJ 07940		Square Feet 864	# of Floors 1						
County (6) Morris		County Code (7) (STATE USE ONLY) _____	Bldg. Age 1950						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/08/2026	Scheduled Completion Date (11) 07/15/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other – Describe: _____		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Various rooms - 1st Floor		x		parquet flooring	366 SF	x			
Various rooms - 1st Floor		x		mastic	740 SF	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/15/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez				Date 06/28/2026	

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

Check 3861 RECEIVED

Date of Notification (1) 06/29/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 16 Lenape Ave ASBESTOS CONTROL & LICENSING							
		City, State, Zip Code Newton, NJ 07860							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 16 Lenape Ave		Square Feet 1,444	# of Floors 1						
City (5) Newton, NJ 07860		Bldg. Age 1958							
County (6) Sussex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/09/2026	Scheduled Completion Date (11) 07/15/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		pipe insulation	60 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/15/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez				Date 06/29/2026	

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

Check 3802 RECEIVED

Date of Notification (1) 06/29/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified	Type Notification	Street Address 331 Main St							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Chatham, NJ 07928							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 331 Main St		Square Feet 3,667	# of Floors 3						
City (5) Chatham, NJ 07928		Bldg. Age 1870							
County (6) Morris	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/11/2026	Scheduled Completion Date (11) 07/18/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		Floor tile	400 SF	X			
Basement		X		pipe insulation	35 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ			Disposal Date 07/18/2026	City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 06/29/2026			

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

Check 3793 RECEIVED

Date of Notification (1) 06/30/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 59 Sunnybrae Blvd							
		City, State, Zip Code Hamilton Township, NJ 08620							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 59 Sunnybrae Blvd		Square Feet 1,608	# of Floors 1						
City (5) Hamilton Township, NJ 08620		Bldg. Age 1983							
County (6) Mercer	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/02/2026	Scheduled Completion Date (11) 07/09/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Hallway		x		wall material & insulation	90 SF	x			
Kitchen		x		wall material & insulation	210 SF	x			
Bathroom		x		wall material & insulation	98 SF	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/09/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez				Date 06/30/2026	

3794

RECEIVED
Check 3794

ASB-41 (R-06-08)

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

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

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Check 3761

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation		Street Address 624 Rugby Rd City, State, Zip Code Phillipsburg, NJ 08865 Name of Contact Telephone Number						
			ASBESTOS CONTROL & LICENSING						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 624 Rugby Rd		Square Feet 1,784	# of Floors 1						
City (5) Phillipsburg, NJ 08865		Bldg. Age 1970							
County (6) Warren	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/07/2026	Scheduled Completion Date (11) 07/14/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Please see attached									
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 06/29/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez				Date 07/01/2026	

VEL Construction LLC				
624 Rugby Road, Phillipsburg, NJ				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Is Location Normally Used Solely by Maintenance/ Custodial Staff?	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type
Kitchen	No	Floor tile & mastic	100 SF	Removal
Dining Room	No	Floor tile & mastic	126 SF	Removal
Living Room	No	Floor tile & mastic	224 SF	Removal
Hallway	No	Floor tile & mastic	42 SF	Removal
Hall Closet to Right Utility Room	No	Floor tile & mastic	6 SF	Removal
Hall Closet to Left of Bathroom	No	Floor tile & mastic	3.75 SF	Removal
Utility Room	No	Floor tile & mastic	18 SF	Removal

3803

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

RECEIVED
Check 3803

JUL 6 2026

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 1502 Walnut Avenue						
			City, State, Zip Code Asbury Park, 07712						
			Name of Contact		Telephone Number				
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 1502 Walnut Avenue			Square Feet 1,313	# of Floors 1	Bldg. Age 1936				
City (5) Asbury Park, 07712			Current Use (Prior if being demolished)						
County (6) Monmouth		County Code (7) (STATE USE ONLY) _____							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9) VEL Construction, LLC					
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201-466-0166	License No. 02126				
Start Date (10) 07/10/2026		Scheduled Completion Date (11) 07/17/2026		Name of OSHA Monitor					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address					
				City, State, Zip Code					
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Bedroom		X		Plywood, Floor tile & mastic	200 SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill				
City, State Elizabeth, NJ				Disposal Date 07/17/2026	City, State Pen Argyl, PA				
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 07/01/2026		

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

Check 3804 RECEIVED

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 2 Russell Rd						
			City, State, Zip Code Fanwood, NJ 07023						
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 2 Russell Rd		Square Feet 2,689	# of Floors 2						
City (5) Fanwood, NJ 07023		Bldg. Age 1917							
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/13/2026	Scheduled Completion Date (11) 07/20/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ Renovation ☒ Full Containment with Negative Pressure ☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Mini-Enclosure ☐ ☐ ☐ Glovebag Procedure ☐ ☐ ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		x		pipe fittings	20	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/20/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 07/01/2026			

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

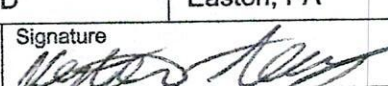
Check 3805
RECEIVED

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 421 Myrtle Ave							
		City, State, Zip Code Scotch Plains, NJ 07076							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 421 Myrtle Ave		Square Feet 1,392	# of Floors 2						
City (5) Scotch Plains, NJ 07076		Bldg. Age 1947							
County (6) Union	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/14/2026	Scheduled Completion Date (11) 07/21/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		x		Floor tiles	684 SF	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 10	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07/21/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 07/01/2026			

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55307677597, 55307677603,
55307677610, 55307677627

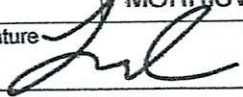
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification 06/18/2026		Name of Building Owner/Operator (2) LNW&A Construction Corp		JUL 6 2026	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended Amendment #1 ☐ Emergency (including justification) ☐ Cancellation		Street Address 4 Denny Road, Suite 1 City, State, Zip Code Wilmington, DE 19809 ASBESTOS CONTROL & LICENSING Name of Contact John Bowey Telephone Number (302) 622-2734	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Apartments Building			Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 255 E. Pearl Street			Square Feet 68,750 SF		Bldg. Age 1980
City (5) Burlington			# of Floors 5		
County (6) Burlington County			County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Apartments Building
Name of Monitoring Firm Hired by Building Owner (8) Iris Environmental Laboratories			ASCM No. 00158		Name of Abatement Contractor (9) True Star Contracting
Street Address 2333 US Highway 22 West			Street Address 54 Hedden Terrace		
City, State, Zip Code Union, New Jersey 07083			City, State, Zip Code North Arlington, New Jersey 07031		
Project Manager for Monitoring Firm			Telephone No. (201) 790-4530		License No. 02047
Start Date (10) 06/22/2026		Scheduled Completion Date (11) 07/10/2026		Name of OSHA Monitor	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: Each apartment will be vacated for abatement. Total:10AP				Street Address	
				City, State, Zip Code	
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	
5th Floor - Apartments		X		Asbestos VAT	
5th Floor - Apartments		X		Black Mastic	
Name of Registered Waste Hauler True Star Contracting		NJDEP Waste Hauler ID No. 0041405		Cubic Yards of Waste 10 YD	
City, State North Arlington, New Jersey		Disposal Date TBD		Name of Registered Landfill Chrin Bro Landfill	
City, State Easton, PA					
Completed by Nestor M. Alvez		Title Project Manager		Signature 	
				Date 06/18/2026	

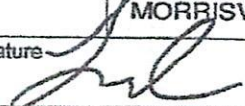
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) WENTWORTH MANAGEMENT							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address PO BOX 1303						
			City, State, Zip Code WEST CALDWELL, NJ 07007						
		Name of Contact AZITA JAVAHERIAN	Telephone Number 7328584499						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) DEMO SITE		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 530 RIVERSIDE AVE		Square Feet 1000	# of Floors +50						
City (5) LYNDHURST		Bldg. Age +50							
County (6) BERGEN	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) COMMERCIAL							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) MALCO ENVIRONMENTAL LLC						
Street Address		Street Address 24 LINCOLN AVE W							
City, State, Zip Code		City, State, Zip Code CRANFORD, NJ 07016							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 7325133487						
			License No. 02113						
Start Date (10) 07/02/2026		Scheduled Completion Date (11) 07/05/2026							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Name of OSHA Monitor							
		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☐ Renovation ☐ ≥160 sf or ≥260 lf ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
EXTERIOR		X		DEBRIS(FLOOR TILE)	1000SF	X			
Name of Registered Waste Hauler CENTURY WASTE		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill United States					
City, State 623 DOWD AVE ELIZABETH, NJ 07201			Disposal Date	City, State MORRISVILLE, PA					
Completed by JENNIFER GOMES		Title PRESIDENT	Signature 			Date 07/01/2026			

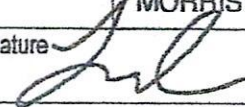
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAS 8:60 and 12:120)

RECEIVED

Date of Notification (1) 05/15/2026 <i>7/1/26</i>		Name of Building Owner/Operator (2) KS GROUP							
Agencies Notified	Type Notification	Street Address 60 PARK PLACE							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code NEWARK, NJ 07102							
		Name of Contact MATHEW DREIFUS	Telephone Number 9739319295						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) NOVA TOWERS COMMERCIAL WAREHOUSE		Type of Facility (4)							
Street Address 32-34 WILLIAMS ST		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) NEWARK	Square Feet 10000	# of Floors 2	Bldg. Age +50						
County (6) ESSEX	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) COMMERCIAL PROPERTY							
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) MALCO ENVIRONMENTAL LLC							
Street Address		Street Address 24 LINCOLN AVE W							
City, State, Zip Code		City, State, Zip Code CRANFORD, NJ 07016							
Project Manager for Monitoring Firm		Telephone No. 5133487	License No. 02113						
Start Date (10) 05/25/2026	Scheduled Completion Date (11) 06/30/2026 <i>7/15/26</i>	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
EXTERIOR ROOF		X		FLASHING	100SF	X			
EXTERIOR ROOF				ROOF MATERIAL	2000SF	X			
Name of Registered Waste Hauler CENTURY WASTE		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill United States					
City, State 623 DOWD AVE ELIZABETH, NJ 07201			Disposal Date	City, State MORRISVILLE, PA					
Completed by JENNIFER GOMES		Title PRESIDENT	Signature 	Date 7/1/26					

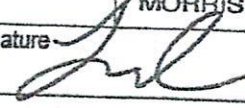
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 05/15/2026 7/1/26		Name of Building Owner/Operator (2) KS GROUP							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☒ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	60 PARK PLACE City, State, Zip Code NEWARK, NJ 07102							
		Name of Contact MATHEW DREIFUS	Telephone Number 9739319295						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) NOVA TOWERS COMMERCIAL WAREHOUSE		Type of Facility (4)							
Street Address 16-24 WILLIAMS ST		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) NEWARK	Square Feet 20000	# of Floors 2	Bldg. Age +50						
County (6) ESSEX	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) COMMERCIAL PROPERTY							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) MALCO ENVIRONMENTAL LLC						
Street Address		Street Address 24 LINCOLN AVE W							
City, State, Zip Code		City, State, Zip Code CRANFORD, NJ 07016							
Project Manager for Monitoring Firm		Telephone No. 5133487	License No. 02113						
Start Date (10) 05/25/2026	Scheduled Completion Date (11) 06/30/2026 7/15/26	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ Renovation ☐ ≥ 160 sf or ≥ 250 lf ☒ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
EXTERIOR ROOF		X		FLASHING	200LF	X			
EXTERIOR ROOF		X		ROOF MATERIAL	12000SF	X			
Name of Registered Waste Hauler CENTURY WASTE		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill United States					
City, State 623 DOWD AVE ELIZABETH, NJ 07201			Disposal Date	City, State MORRISVILLE, PA					
Completed by JENNIFER GOMES		Title PRESIDENT	Signature 			Date 05/15/2026 7/1			

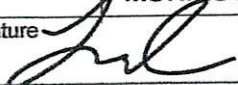
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 05/15/2026 7/1/26		Name of Building Owner/Operator (2) KS GROUP							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☒ DEP ☒ DOL	☒ Initial ☒ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	60 PARK PLACE							
		City, State, Zip Code NEWARK, NJ 07102							
		Name of Contact MATHEW DREIFUS	Telephone Number 9739319295						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) NOVA TOWERS COMMERCIAL WAREHOUSE		Type of Facility (4)							
Street Address 26-30 WILLIAMS ST		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) NEWARK	Square Feet 8000	# of Floors 2	Bldg. Age +50						
County (6) ESSEX	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) COMMERCIAL PROPERTY							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9)						
Street Address			MALCO ENVIRONMENTAL LLC						
City, State, Zip Code			Street Address 24 LINCOLN AVE W						
Project Manager for Monitoring Firm		Telephone No.	City, State, Zip Code CRANFORD, NJ 07016						
Start Date (10) 05/25/2026	Scheduled Completion Date (11) 06/30/2026 7/15/26	Telephone No. 5133487	License No. 02113						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor							
☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
EXTERIOR ROOF		X		FLASHING	200LF	X			
Name of Registered Waste Hauler CENTURY WASTE		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill United States					
City, State 623 DOWD AVE ELIZABETH, NJ 07201		Disposal Date		City, State MORRISVILLE, PA					
Completed by JENNIFER GOMES		Title PRESIDENT	Signature 			Date 05/15/2026 7/1			

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

*check State law / rev
of project*

Date of Notification (1) 06/23/2026 7/1/26		Name of Building Owner/Operator (2) JFK BLVD OWNER LLC		JUL 6 2026																									
Agencies Notified		Type Notification		Street Address																									
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation		261 MADISON AVE 9TH FLOOR City, State, Zip Code NEWA YORK, NY 10016																									
Name of Contact KANAIYA KANSARA				Telephone Number 2018385485																									
FACILITY INFORMATION																													
Name of Facility Where Abatement is Taking Place (3) RAINBOW				Type of Facility (4)																									
Street Address 2865 JFK BLVD				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)																									
City (5) JERSEY CITY				Square Feet 8000	# of Floors 2																								
County (6) HUDSON				Bldg. Age +50																									
County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished) COMMERCIAL PROPERTY																									
Name of Monitoring Firm Hired by Building Owner (8)			ASCM No.	Name of Abatement Contractor (9)																									
Street Address				MALCO ENVIRONMENTAL LLC																									
City, State, Zip Code			Street Address 24 LINCOLN AVE W																										
Project Manager for Monitoring Firm			Telephone No.	Telephone No. 5133487	License No. 02113																								
Start Date (10) 6/22/26 7/10/26		Scheduled Completion Date (11) 07/2/26 7/16/26		Name of OSHA Monitor																									
Occupancy Status During Abatement (Check Only One)				Street Address																									
☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code																									
Scope of Work (Check All That Apply)																													
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure																									
Location of Asbestos-Containing Material (ACM) In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)																								
	Yes	No	N/A																										
BASEMENT		X		BOILER	50SF																								
BASEMENT		X		PIPE INSULATION	65SF																								
MAIN FLOOR		x		FLOOR TILES	40SF																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th colspan="4">Abatement Type</th> </tr> <tr> <th>Removal</th> <th>Repair</th> <th>Encapsulate</th> <th>Enclosure</th> </tr> </thead> <tbody> <tr> <td></td> <td>x</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>x</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>x</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							Abatement Type				Removal	Repair	Encapsulate	Enclosure		x					x					x			
	Abatement Type																												
	Removal	Repair	Encapsulate	Enclosure																									
	x																												
	x																												
	x																												
Name of Registered Waste Hauler CENTURY WASTE		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste	Name of Registered Landfill United States																								
City, State 623 DOWD AVE ELIZABETH, NJ 07201				Disposal Date	City, State MORRISVILLE, PA																								
Completed by JENNIFER GOMES		Title PRESIDENT		Signature 	Date 06/22/2026 7/1/26																								

11364



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

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Print Form

JUL 8 2026

Date of Notification (1) 07/06/26		Name of Building Owner/Operator (2) Township of Bordentown							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation							
Street Address 1 Municipal Drive		City, State, Zip Code Bordentown NJ 08505							
Name of Contact Frederick J. Turek		Telephone Number 845-770-4755							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Municipal Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1 Municipal Drive		Square Feet N/A	# of Floors N/A						
City (5) Bordentown NJ 08505		Bldg. Age N/A							
County (6) Burlington	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Municipal Building							
Name of Monitoring Firm Hired by Building Owner (8) Acer Associates		ASCM No. _____	Name of Abatement Contractor (9) Teal Management						
Street Address 1012 Industrial Drive		Street Address 24 Morley Drive							
City, State, Zip Code West Berlin NJ 08091		City, State, Zip Code Woodland Park NJ 07424							
Project Manager for Monitoring Firm Kristen Masotes		Telephone No. 609-949-1789	Telephone No. 862-243-1471						
License No. 02063		Name of OSHA Monitor Teal Management							
Start Date (10) 07/07/2026		Scheduled Completion Date (11) 07/10/2026							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 24 Morley Drive							
		City, State, Zip Code Woodland Park NJ 07424							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
North Wing Bldg			x	mastic on metal flashing	320 LF	x			
Name of Registered Waste Hauler Teal Management		NJDEP Waste Hauler ID No. 40229	Cubic Yards of Waste 5 CY	Name of Registered Landfill Fairless Landfill					
City, State Woodland Park NJ 07424		Disposal Date 07/15/2026		City, State Morrisville PA					
Completed by Tome Maslarkov		Title Project Manager		Signature		Date 07/06/2026			

2361

PAID

RECEIVED

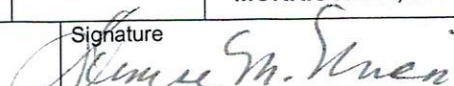
JUL 14 2026

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

Date of Notification (1) 07/09/2026		Name of Building Owner/Operator (2)	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	
Street Address 2-37 Hartly Pl. City, State, Zip Code Fair Lawn, NJ, 07410 Name of Contact Telephone Number		ASBESTOS CONTROL & LICENSING	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Residence Street Address 2-37 Hartly Pl. City (5) Fair Lawn County (6) Bergen County		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & Commercial buildings, homes, etc.) Square Foot 1,000 # of Floors 1 Bldg. Age 55+ Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code		ASCM No. Name of Abatement Contractor (9) Unicorn Contracting Corp. Street Address 14 Willow Street City, State, Zip Code Bloomfield, NJ 07003	
Project Manager for Monitoring Firm Telephone No.		Telephone No. 973-333-9176 License No. 01331	
Start Date (10) 07/11/2026		Scheduled Completion Date (11) 07/13/2026	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 8am-4:30pm		Name of OSHA Monitor Envirovision Consultants, Inc. Street Address 20-21 Wagaraw Rd., Bldg. 35-E City, State, Zip Code Fair Lawn, NJ 07410	
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure			
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Amount (Specify SF or LF) 6 SF		
Basement boiler room	X		ACM Board Insulation
Name of Registered Waste Hauler Unicorn Contracting Corp. City, State Bloomfield, New Jersey		NJDEP Waste Hauler ID No. 0035844 Cubic Yards of Waste 1+ Disposal Date TBD	
Name of Registered Landfill Fairless Hills Landfill City, State Morrisville, PA		Signature 61 Date 07/09/2026	
Completed by Blazhe Grozdanov		Title Project Manager	

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

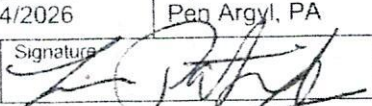
RECEIVED

Date of Notification (1) 06 / 29 / 26		Name of Building Owner/Operator (2) VIRTUA HEALTH							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☒ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 20 WEST STOW ROAD-STE. 3							
		City, State, Zip Code MARLTON, NJ 08053							
		Name of Contact PATRICIA DUFRENE	Telephone Number (609) 267-0700						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) VIRTUA MOUNT HOLLY HOSPITAL		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 175 MADISON AVENUE		Square Feet 650,000	# of Floors 7						
City (5) MOUNT HOLLY, NJ		Bldg. Age 50+/-							
County (6) BURLINGTON	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) HOSPITAL							
Name of Monitoring Firm Hired by Building Owner (8) VERTEX COMPANIES	ASCM No.	Name of Abatement Contractor (9) PEPPER ENVIRONMENTAL SERVICES, INC.							
Street Address 2501 SEAPORT DRIVE-SUITE BH 110		Street Address 2251 FRALEY STREET							
City, State, Zip Code CHESTER, PA 19013		City, State, Zip Code PHILADELPHIA, PA 1917							
Project Manager for Monitoring Firm DON HEIM	Telephone No. (610) 787-0402	Telephone No. (215) 533-5155	License No. 01166						
Start Date (10) 06 / 22 / 26	Scheduled Completion Date (11) 07 / 31 / 26	Name of OSHA Monitor VERTEX COMPANIES							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: <u> </u> AM- <u>4</u> PM/ <u> </u> PM- <u>12</u> AM		Street Address 2501 SEAPORT DRIVE-SUITE BH 110							
		City, State, Zip Code CHESTER, PA 19013							
Scope of Work (Check all that apply)									
☐ >3 sf or >3 lf ☒ >160 sf or >260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler HORIZON DISPOSAL SERVICES		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill WASTE MANAGEMENT					
City, State TRENTON, NJ			Disposal Date	City, State MORRISVILLE, PA					
Completed By (Print or Type) DENISE M. NIVEN		Title ADMIN. ASST.	Signature 			Date 6/29/26			

LOCATION OF ASBESTOS CONTAINING MATERIAL (ACM) TO BE ABATED IN FACILITY	IN LOCATION NORMALLY USED SOLELY BY MAINTENANCE/ CUSTODIAL STAFF? YES/NO/N/A	DESCRIPTION OF ASBESTOS CONTAINING MATERIAL (ACM) (I.E. THERMAL SYSTEMS INSULATION, SURFACING, VAT, OR OTHER MISCELLANEOUS)	AMOUNT (SPECIFY SF OR LF)	ABATEMENT TYPE			ABATEMENT TYPE
				REMOVAL	REPAIR	ENCAPSULATE	
4TH FLOOR CHEMISTRY LAB	N/A	VAT/MASTIC (ON HOLD)	4500 SF	YES	NO	NO	NO
LAB "T" 4094	N/A	ACPI (ON HOLD)	2 LF	YES	NO	NO	NO
4TH FLOOR SLEEP CENTER (10 SEPARATE LOCATIONS ABOVE CEILING <1 LF EACH)	N/A	WHITE SEAM MASTIC	5 LF	YES	NO	NO	NO
4TH FLOOR SLEEP CENTER	N/A	FLOOR MASTIC	6 SF	YES	NO	NO	NO

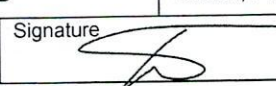
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
 (Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 6/22/2026		Name of Building Owner/Operator (2) River Edge School District		JUL 6 2026					
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		Street Address 410 Bogert Rd City, State, Zip Code River Edge, NJ 07661 Name of Contact Alexander Gomez Telephone Number 201-261-3404					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Cherry Hill Elementary School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 410 Bogert Rd				Square Feet >75,000	# of Floors 3				
City (5) River Edge				Bldg. Age 77					
County (6) Bergen		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) School					
Name of Monitoring Firm Hired by Building Owner (8) Environmental Design, Inc			ASCM No	Name of Abatement Contractor (9) National Flooring Removal L.L.C.					
Street Address 5434 King Ave, Suite 101			Street Address PO Box 58						
City, State, Zip Code Pennsauken, NJ 08109			City, State, Zip Code Augusta, NJ 07822						
Project Manager for Monitoring Firm Tim		Telephone No. 888-306-4545		Telephone No. 973-919-5743	License No. 02093				
Start Date (10) 7/6/2026		Scheduled Completion Date (11) 7/8/2026		Name of OSHA Monitor N/A					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:				Street Address City, State, Zip Code					
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Gymnasium		X		Cove Base Glue	360 LF	X			
Name of Registered Waste Hauler National Flooring Removal L.L.C.		NJDEP Waste Hauler ID No 105431		Cubic Yards of Waste <5	Name of Registered Landfill Grand Central Landfill				
City, State Augusta, NJ		Disposal Date 7/14/2026		City, State Pen Argyl, PA					
Completed by Timothy Patrick		Title CEO		Signature 		Date 6/18/2026			

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

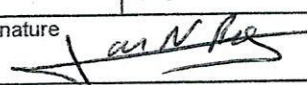
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Date of Notification (1) 06/01/2026		Name of Building Owner/Operator (2) Piscataway Board of Education		JUL 6 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended Amendment # <u>3</u> ☐ Emergency (including justification) ☐ Cancellation		Street Address 1515 Stelton Road City, State, Zip Code Piscataway, NJ 08854 Name of Contact Robert Uhrin Telephone Number (732) 572-2289 ext. 2611					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Fellowship Farms School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 1515 Stelton Road				Square Feet 42,500 # of Floors 1 Bldg. Age 1928					
City (5) Piscataway		County (6) Middlesex		County Code (7) (STATE USE ONLY) _____ Current Use (Prior if being demolished) Educational					
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection, Inc		ASCM No. 30		Name of Abatement Contractor (9) Spes Contracting LLC					
Street Address 120 North Warren Street		City, State, Zip Code Trenton, NJ 08608		Street Address 59 Beaverbrook Rd. Ste 302 E City, State, Zip Code Lincoln Park, NJ, 07035					
Project Manager for Monitoring Firm Mike Moore		Telephone No. (609) 392-4200		Telephone No. (973) 807 6330 License No. 01383					
Start Date (10) 06/15/2026		Scheduled Completion Date (11) 07/18/2026		Name of OSHA Monitor Spes Contracting LLC					
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>Work Area Facility Non Occupied</u>				Street Address 59 Beaverbrook Rd. Ste 302 E City, State, Zip Code Lincoln Park, NJ, 07035					
Scope of Work (Check All That Apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure O&M Wrap & Cut ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement Hallway across from Nurses Office		X		Pipe & Fitting Insulation	25 LF	X			
Crawlspace		X		Pipe & Fitting Insulation	200 LF	X			
Basement Hallway across from Boiler Rm.		X		Pipe & Fitting Insulation	20 LF	X			
Basement Classroom adjacent to Nurses Office		X		Pipe & Fitting Insulation	30 LF	X			
Name of Registered Waste Hauler Spes Contracting LLC		NJDEP Waste Hauler ID No. 0038075		Cubic Yards of Waste 20CY	Name of Registered Landfill Tri State Transfer & Associates				
City, State Lincoln Park, NJ		Disposal Date TBD		City, State Bronx, NY					
Completed by Branislav Pavlov		Title General Manager		Signature 		Date 06/29/2026			

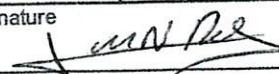
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 06/28/2026		Name of Building Owner/Operator (2) JUL 7 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 77 Hansell Rd							
		City, State, Zip Code New Providence NJ 07974							
		ASBESTOS CONTROL & LICENSING Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Home		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 77 Hansell Rd									
City (5) New Providence		Square Feet _____	# of Floors 2						
		Bldg. Age +50							
County (6) Union		County Code (7) (STATE USE ONLY) _____							
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) United Demo LLC							
Street Address		Street Address 143 Acme St							
City, State, Zip Code		City, State, Zip Code Elizabeth Nj 07202							
Project Manager for Monitoring Firm		Telephone No. 862-218-3930	License No. 02045						
Start Date (10) 07/09/2026		Scheduled Completion Date (11) 07/24/2026							
Name of OSHA Monitor United Demo LLC									
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 143 Acme St							
		City, State, Zip Code Elizabeth NJ 07202							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ Renovation ☒ ≥160 sf or ≥260 lf ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 8548 Sf	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
2nd FL : 4 bedrooms, hallway,			X	Sheetrock walls and ceiling	8548 Sf				
bathrooms ceiling									
living, foyer, dining, kitchen, bath 1									
fireplace room, laundry, sunroom,									
Name of Registered Waste Hauler United Demo LLC		NJDEP Waste Hauler ID No. 0040986		Cubic Yards of Waste As Needed	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth NJ		Disposal Date TBD		City, State Morrisville PA					
Completed by Jose N Rosas		Title Project Manager		Signature 			Date 06/28/2026		

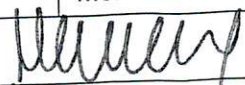
**State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)**

Date of Notification (1) 06/27/2026		Name of Building Owner/Operator (2) -		RECEIVED					
Agencies Notified		Type Notification		Street Address					
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		16-20 Morlot Ave					
				City, State, Zip Code Fair Lawn NJ 07410					
				Name of Contact _____ Telephone Number _____					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Home				Type of Facility (4)					
Street Address 16-20 Morlot Ave				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Fair Lawn				Square Feet	# of Floors				
				Bldg. Age					
County (6) Bergen		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) Lawal Environmental Services Corp		ASCM No. _____		Name of Abatement Contractor (9) United Demo LLC					
Street Address 55 East Mosholu Pkway N Apt 3G				Street Address 143 Acme St					
City, State, Zip Code Bronx NY10467				City, State, Zip Code Elizabeth NJ 07202					
Project Manager for Monitoring Firm Lawal Prince Ahmed		Telephone No. 646-528-0913		Telephone No. 862-218-3930	License No. 02045				
Start Date (10) 06/28/2026		Scheduled Completion Date (11) 06/28/2026		Name of OSHA Monitor United Demo LLC					
Occupancy Status During Abatement (Check Only One)				Street Address 143 Acme St					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code Elizabeth NJ 07202					
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Floor Tile	35 Sf	X			
Name of Registered Waste Hauler United Demo LLC		NJDEP Waste Hauler ID No. 0040986		Cubic Yards of Waste As Needed	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth NJ				Disposal Date TBD	City, State Morrisville PA				
Completed by Jose N Rosas		Title Project Manager		Signature 			Date 06/27/2026		

1046

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

RECEIVED

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) PAID	
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	Type Notification ☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 88 1/2 Elm St	
		City, State, Zip Code Montclair, NJ 07042	
		Name of Contact	Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) private house		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 88 1/2 Elm St		Square Feet	# of Floors
City (5) Montclair		Bldg. Age	
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) MHM Restoration LLC
Street Address		Street Address 164 Meriline Ave Apt C	
City, State, Zip Code		City, State, Zip Code Woodland Park NJ 0744	
Project Manager for Monitoring Firm		Telephone No. 862-386-8433	License No. 02090
Start Date (10) 06/27/2026		Scheduled Completion Date (11) 06/30/2026	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Name of OSHA Monitor MHM Restoration LLC	
		Street Address 164 Meriline Ave Apt C	
		City, State, Zip Code Woodland Park NJ 07424	
Scope of Work (Check All That Apply)			
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
basement		*	ceiling plaster
Name of Registered Waste Hauler MHM Restoration LLC		NJDEP Waste Hauler ID No. 0042035	Cubic Yards of Waste N/A
City, State Woodland Park		Disposal Date TBD	Name of Registered Landfill Fairless
Completed by Mike Hadzic		Title owner	Signature 
			Date 06/26/2026

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

RECEIVED

Date of Notification (1) June 29, 2026		Name of Building Owner/Operator (2) Bloomfield Board of Education							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA		Type Notification ☐ Initial ☒ Amended Amendment #1 _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 155 Broad Street		City, State, Zip Code Bloomfield, NJ 07003							
Name of Contact Duvany Acosta		Telephone Number 201-794-3700 X 3760							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Franklin Elementary School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 85 Curtis Street		Square Feet	# of Floors						
City (5) Bloomfield		Bldg. Age							
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Briggs Associates		ASCM No.	Name of Abatement Contractor (9) Osiyo Inc						
Street Address 3 Crosswicks Street		Street Address 292 Main Street, #261							
City, State, Zip Code Bordentown, NJ 08505		City, State, Zip Code Harleysville, PA 19438							
Project Manager for Monitoring Firm Michael Hoodak		Telephone No. 609-298-5520	Telephone No. 610-400-8711						
License No. 01373		Name of OSHA Monitor Schneider Laboratories Global Inc.							
Start Date (10) July 13, 2026		Scheduled Completion Date (11) July 31, 2026							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: Areas vacated during entire period of abatement		Street Address 2512 West Cary Street							
		City, State, Zip Code Richmond, VA 23220							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED LIST		X		SEE ATTACHED LIST		X			
Name of Registered Waste Hauler Century Waste Services LLC		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Morrisville, PA					
Completed by Carol Bradford		Title President		Signature <i>Carol Bradford</i>				Date June 29, 2026	



OSIYO INC.

292 Main Street, Box 261
Harleysville, PA 19438-2416
610-400-8711

Scope of Work: Removal and disposal of asbestos containing materials from the Franklin Elementary School. The scope of work shall include the following, but is not limited to all areas and rooms.

Location	Materials	Quantity	Abatement Method
Franklin School			
Room G-3	Pipe Insulation	20 lf	Wrap/Cut Procedures
Room G-3	Fitting Insulation	4	Wrap/Cut Procedures
Room G-3	9x9 Floor Tile/Mastic	40 sf	Non-Friable Procedures
Custodian Office	Pipe Insulation	15 lf	Wrap/Cut Procedures
Art Room G-2	Fitting Insulation	3	Wrap/Cut Procedures
Art Room G-2	Pipe Insulation	20 lf	Wrap/Cut Procedure
Room G-1	Fitting Insulation	3	Wrap/Cut Procedures
Room G-1	Pipe Insulation	20 lf	Wrap/Cut Procedures
Room 103	Fitting Insulation	8	Wrap/Cut Procedures
Room 103	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 102	Pipe Insulation	15 lf	Wrap/Cut Procedures
Room 102	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 101	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 101	Fitting Insulation	8	Wrap/Cut Procedures
Room 101	Pipe Insulation	20 lf	Wrap/Cut Procedures
Room 107	Fitting Insulation	4	Wrap/Cut Procedures
Room 107	Pipe Insulation	20 lf	Wrap/Cut Procedures
Room 107	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 106	Fitting Insulation	4	Wrap/Cut Procedures
Room 106	Pipe Insulation	20 lf	Wrap/Cut Procedures
Room 106	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 108	Fitting Insulation	4	Wrap/Cut Procedures
Room 108	Pipe Insulation	20 lf	Wrap/Cut Procedures
Room 109	Fitting Insulation	4	Wrap/Cut Procedures
Room 109	Pipe Insulation	20 lf	Wrap/Cut Procedures



OSIYO INC.

292 Main Street, Box 261
Harleysville, PA 19438-2416
610-400-8711

<u>Location</u>	<u>Materials</u>	<u>Quantity</u>	<u>Abatement Method</u>
Room 105	Fitting Insulation	4	Wrap/Cut Procedures
Room 105	Pipe Insulation	20 lf	Wrap/Cut Procedures
Room 105	9x9 Floor Tile/Mastic under VCT	120 sf	Non-Friable Procedures
Room 104	Fitting Insulation	4	Wrap/Cut Procedures
Room 104	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 202	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 201	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 207	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 206	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 205	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 204	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures
Room 203	9x9 Floor Tile/Mastic	120 sf	Non-Friable Procedures

5307691144

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

RECEIVED

JUL 8 2026

Date of Notification (1) 07/03/2026			Name of Building Owner/Operator (2)						
Agencies Notified		Type Notification		Street Address					
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		733 9th Street					
				City, State, Zip Code					
				Carlstadt, New Jersey 07072					
				Name of Contact	Telephone Number				
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Home			Type of Facility (4)						
Street Address			☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
733 9th Street									
City (5) Carlstadt			Square Feet	# of Floors	Bldg. Age				
			1,267 SF	1	Built in 1958				
County (6) Bergen County		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Home					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9)					
				True Star Contracting					
Street Address		Street Address							
		54 Hedden Terrace							
City, State, Zip Code		City, State, Zip Code							
		North Arlington, New Jersey 07031							
Project Manager for Monitoring Firm		Telephone No.		Telephone No.	License No.				
				(201) 790-4530	02047				
Start Date (10) 07/13/2026		Scheduled Completion Date (11) 07/14/2026		Name of OSHA Monitor					
Occupancy Status During Abatement (Check Only One)			Street Address						
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			City, State, Zip Code						
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior House Siding			X	Asbestos Siding	800SF	X			
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.		Cubic Yards of Waste	Name of Registered Landfill				
True Star Contracting		0041405		5	Chrin Brothers Landfill				
City, State				Disposal Date	City, State				
North Arlington, New Jersey				TBD	Easton, PA				
Completed by		Title		Signature			Date		
Nestor M. Alvez		Project Manager					07/03/2026		

55307691137

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

RECEIVED

Date of Notification (1) 07/03/2026		Name of Building Owner/Operator (2) JUL 8 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 36 Lorelei Road ASBESTOS CONTROL & LICENSING							
		City, State, Zip Code West Orange, New Jersey 07052							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Home		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 36 Lorelei Road		Square Feet 1,656 SF	# of Floors 2						
City (5) West Orange		Bldg. Age Built in 1956							
County (6) Essex County		County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Home						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) True Star Contracting						
Street Address		Street Address 54 Hedden Terrace							
City, State, Zip Code		City, State, Zip Code North Arlington, New Jersey 07031							
Project Manager for Monitoring Firm		Telephone No. (201) 790-4530	License No. 02047						
Start Date (10) 07/14/2026	Scheduled Completion Date (11) 07/15/2026		Name of OSHA Monitor						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address						
			City, State, Zip Code						
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Basement Flooring			X	Asbestos VAT	350SF	X			
Name of Registered Waste Hauler True Star Contracting		NJDEP Waste Hauler ID No. 0041405	Cubic Yards of Waste 5	Name of Registered Landfill Chrin Brothers Landfill					
City, State North Arlington, New Jersey		Disposal Date TBD		City, State Easton, PA					
Completed by Nestor M. Alvez		Title Project Manager		Signature			Date 07/03/2026		

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

1008
RECEIVED

Date of Notification (1) 06/29/26		Name of Building Owner/Operator (2) Springfield Public Schools							
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 139 Mountain Ave.		City, State, Zip Code Springfield, NJ 07081							
Name of Contact Dave Walker		Telephone Number 973-919-4279							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Jonathan Dayton High School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 139 Mountain Ave.		Square Feet 184,725 sf.	# of Floors 2						
City (5) Springfield		Bldg. Age 89 Yrs							
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) EnviroVision Consultants Inc.		ASCM No. 00079	Name of Abatement Contractor (9) Lesco Services Inc.						
Street Address 20-21 Wagaraw Rd.		Street Address 156 Maple Ave.							
City, State, Zip Code Fair Lawn, NJ 07410		City, State, Zip Code Wallington, NJ 07057							
Project Manager for Monitoring Firm Frederick Larson		Telephone No. 973-633-9145	Telephone No. 862-22-9092						
Start Date (10) 07/09/26		Scheduled Completion Date (11) 07/11/26	License No. 01107						
Name of OSHA Monitor Leslaw Nalodka		Name of OSHA Monitor Leslaw Nalodka							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 156 Maple Ave.							
		City, State, Zip Code Wallington, NJ 07057							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
☒ WRAP CUT Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Mechanical Room		*		pipe insulation	10 lf.	*			
Name of Registered Waste Hauler Century Waste Services LLC.		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 1 Cy	Name of Registered Landfill GC SL					
City, State Elizabeth, NJ		Disposal Date 06/29/26-07/13/26		City, State Pen Argyl, PA					
Completed by Leslaw Nalodka		Title President	Signature <i>Leslaw Nalodka</i>			Date 06/29/26			

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

1007
RECEIVED

Date of Notification (1) 06/29/26		Name of Building Owner/Operator (2) Springfield Public Schools		JUL 9 2026					
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		Street Address 139 Mountain Ave. City, State, Zip Code Springfield, NJ 07081 Name of Contact Dave Walker Telephone Number 973-919-4279					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Florence M. Gaudineer Middle School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 75 South Springfield Ave.				Square Feet 184,725 sf. # of Floors 2 Bldg. Age 89 Yrs					
City (5) Springfield		County (6) Union		County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) School					
Name of Monitoring Firm Hired by Building Owner (8) EnviroVision Consultants Inc.		ASCN No. 00079		Name of Abatement Contractor (9) Lesco Services Inc.					
Street Address 20-21 Wagaraw Rd.		Street Address 156 Maple Ave.							
City, State, Zip Code Fair Lawn, NJ 07410		City, State, Zip Code Wallington, NJ 07057							
Project Manager for Monitoring Firm Frederick Larson		Telephone No. 973-633-9145		Telephone No. 862-22--9092 License No. 01107					
Start Date (10) 07/09/26		Scheduled Completion Date (11) 07/11/26		Name of OSHA Monitor Leslaw Nalodka					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Other - Describe:				Street Address 156 Maple Ave. City, State, Zip Code Wallington, NJ 07057					
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Mechanical Room on Stage		*		elbows/fittings	10	*			
Stage Storage Room		*		elbows/fittings	10	*			
Name of Registered Waste Hauler Century Waste Services LLC.		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 1 Cy		Name of Registered Landfill GCSL			
City, State Elizabeth, NJ				Disposal Date 07/13/26		City, State Pen Argyl, PA			
Completed by Leslaw Nalodka		Title President		Signature L Nal		Date 06/29/26			

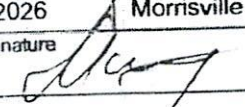
2474

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

RECEIVED

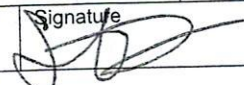
Print Form

JUL 9 2026

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) Manville Board of Education							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment ☐ Emergency (including justification) ☐ Cancellation	Street Address 410 Brooks Boulevard							
		City, State, Zip Code Manville, New Jersey 08835							
		Name of Contact Keith Gardner	Telephone Number 908-528-7137						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Alexander Batcho Intermediate School		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 100 N. 13th Avenue		Square Feet N/A	# of Floors N/A						
City (5) Manville, New Jersey 08835		Bldg. Age N/A							
County (6) Somerset	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) McCabe Environmental Services		ASCM No. 00118	Name of Abatement Contractor (9) Teal Management						
Street Address 464 Valley Brook Ave		Street Address 24 Motrley Drive							
City, State, Zip Code Lyndhurst NJ 07071		City, State, Zip Code Woodland Park NJ 07424							
Project Manager for Monitoring Firm John H. Chiaviello		Telephone No. 1800-423-0766	Telephone No. 862-243-1471						
		License No. 02063							
Start Date (10) 07/06/2026	Scheduled Completion Date (11) 07/28/2026		Name of OSHA Monitor Teal Management						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: OCCUPIED BUILDING		Street Address 24 Morley Drive							
		City, State, Zip Code Woodland Park NJ 07424							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Gymnasium			x	Asphalt Under Hardwood Floor	5312 SF	x			
Gymnasium			x	Cove Base	240 LF				
Name of Registered Waste Hauler Teal Management		NJDEP Waste Hauler ID No. 40229	Cubic Yards of Waste 30 CY	Name of Registered Landfill Fairless Hills Landfill					
City, State Woodland Park NJ 07424		Disposal Date 04/10/2026		City, State Morrisville PA					
Completed by Tome Maslarkov		Title Project Manager		Signature 				Date 06/26/2026	

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

RECEIVED

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) John J. DiGirolamo							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 200 Liberty Street		City, State, Zip Code New York, NY 10281							
Name of Contact John J. DiGirolamo		Telephone Number 929-208-6944							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Santander Bank		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 3500 US Highway 9		Square Feet 5,000	# of Floors 2						
City (5) Old Bridge		Bldg. Age 75							
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Bank							
Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting, LLC		Name of Abatement Contractor (9) Shade Environmental, LLC							
Street Address 304 Harper Drive, Suite 207		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Rafael Torres		Telephone No. 856-581-9055	Telephone No. 856-755-0099						
Start Date (10) 07/18/2026		Scheduled Completion Date (11) 07/22/2026	License No. 00842						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Name of OSHA Monitor EMSL Analytical, Inc.							
		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Ground Floor Main Lobby		X		Stone Floor Tile & Mortar/Weatherproofing	650 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 5	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 07/22/2026		City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator		Signature 				Date 07/02/2026	

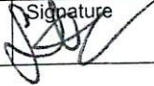
11175

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

RECEIVED

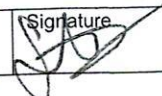
Print Form

JUL 9 2026

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) John J. DiGirolamo							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 200 Liberty Street							
		City, State, Zip Code New York, NY 10281							
		Name of Contact John J. DiGirolamo	Telephone Number 929-208-6944						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Santander Bank		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 554 Central Avenue		Square Feet 5,000	# of Floors 2						
City (5) East Orange		Bldg. Age 75							
County (6) Essex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Bank							
Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting, LLC		ASCM No. _____	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 304 Harper Drive, Suite 207		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Rafael Torres		Telephone No. 856-581-9055	License No. 00842						
Start Date (10) 07/11/2026	Scheduled Completion Date (11) 07/15/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other – Describe: _____		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st Floor Foyer		X		Ceiling Tile & Mastic	40 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 07/15/2026		City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator				Signature 		Date 07/02/2026	

PAID
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:26 and 12:120)

RECEIVED

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) BMG Properties		JUL 9 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 132 W. State Street		ASBESTOS CONTROL & LICENSING				
			City, State, Zip Code Trenton, NJ 08608						
			Name of Contact Gerry Gibbs			Telephone Number 609-273-2394			
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Office Building			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 132 W. State Street			Square Feet 3,831	# of Floors 4	Bldg. Age 80				
City (5) Trenton			Current Use (Prior if being demolished) Office						
County (6) Mercer		County Code (7) (STATE USE ONLY) _____							
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv		ASCM No. _____		Name of Abatement Contractor (9) Shade Environmental, LLC					
Street Address PO Box 341		Street Address 623 Cutler Avenue							
City, State, Zip Code Chesterfield, NJ 08515		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Nora Pearse		Telephone No. 609-298-4070		Telephone No. 856-755-0099	License No. 00842				
Start Date (10) 07/29/2026		Scheduled Completion Date (11) 08/03/2026		Name of OSHA Monitor EMSL Analytical, Inc.					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address 200 Route 130 North						
			City, State, Zip Code Cinnaminson, NJ 08077						
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Boiler Room			X	Boiler Insulation	35 SF	X			
Name of Registered Waste Hauler Shade Environmental, LLC		NJDEP Waste Hauler ID No. 32426		Cubic Yards of Waste 1	Name of Registered Landfill Fairless Landfill				
City, State Maple Shade, NJ		Disposal Date 08/03/2026		City, State Morrisville, PA					
Completed by Samantha Brown		Title Operations Coordinator			Signature 		Date 07/02/2026		

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

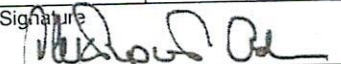
RECEIVED

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) JUL 9 2026							
Agencies Notified	Type Notification	Street Address 29 Bedford Road							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Kendall Park, NJ 08824							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
Street Address 29 Bedford Road		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Kendall Park	Square Feet 1,392	# of Floors 2	Bldg. Age 65						
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address PO Box 341		Street Address 623 Cutler Avenue							
City, State, Zip Code Chesterfield, NJ 08515		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Nora Pearce		Telephone No. 609-298-4070	Telephone No. 856-755-0099						
Start Date (10) 07/24/2026		Scheduled Completion Date (11) 07/28/2026	License No. 00842						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor EMSL Analytical, Inc.							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Dining Room			X	Floor Tile & Mastic	126 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 07/28/2026		City, State Morgantown, PA					
Completed by Shannon Thomson		Title Operations Manager		Signature <i>Shannon Thomson</i>				Date 07/02/2026	

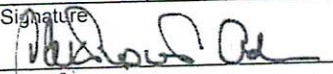
4130

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

RECEIVED

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) Manalapan-Englishtown Regional Schools		JUL 4 9 2026 Check No. 4130					
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation		Street Address 54 Main Street		ASBESTOS CONTROL & LICENSING				
			City, State, Zip Code Englishtown, NJ 07726						
			Name of Contact Veronica Wolf		Telephone Number 732-789-2500				
	FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Lafayette Mills Elementary School			Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 66 Maxwell Lane			Square Feet 15000		# of Floors 2				
City (5) Manalapan, NJ 07726			Bldg. Age 50+						
County (6) Monmouth		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Elementary School					
Name of Monitoring Firm Hired by Building Owner (8) AHERA Consultants, Inc.		ASCM No. 00057		Name of Abatement Contractor (9) Lilich Corporation					
Street Address P.O. Box 385			Street Address 246 Union Boulevard						
City, State, Zip Code Oceanville, New Jersey 08231			City, State, Zip Code Totowa, New Jersey 07512						
Project Manager for Monitoring Firm Domenic D'Errico		Telephone No. 609-652-1833		Telephone No. 973-225-8400					
				License No. 01104					
Start Date (10) 06/29/2026		Scheduled Completion Date (11) 07/07/2026		Name of OSHA Monitor LIS CONSULTING SERVICES, LLC					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address 3 B Cottage Court						
			City, State, Zip Code Whiting, New Jersey						
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glove Bag Procedure / Limited Containment & Tent ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF of LF) 100 ea.	Abatement				
	Yes No N/A	Removal Repair Encapsulate Enclosure							
Throughout building		X	Fittings (Wrap & Cut)	100 ea.	X				
Main Office		X	VAT & Mastic	330 SF	X				
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5		Name of Registered Landfill Grand Central Landfill			
City, State Elizabeth, New Jersey				Disposal Date July/2026		City, State Pen Argyl, PA			
Completed by Adriana Olejarova		Title President		Signature 		Date 07/01/2026			

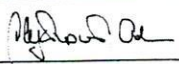
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 06/19/2026		Name of Building Owner/Operator (2) Manalapan-Englishtown Regional Schools		Check No. 4117					
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 54 Main Street						
			City, State, Zip Code Englishtown, NJ 07726						
			Name of Contact Veronica Wolf		Telephone Number 732-789-2500				
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Lafayette Mills Elementary School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 66 Maxwell Lane				Square Feet 15000	# of Floors 2				
City (5) Manalapan, NJ 07726				Bldg. Age 50+					
County (6) Monmouth		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Elementary School					
Name of Monitoring Firm Hired by Building Owner (8) AHERA Consultants, Inc.		ASCM No. 00057		Name of Abatement Contractor (9) Lilich Corporation					
Street Address P.O. Box 385		Street Address 246 Union Boulevard							
City, State, Zip Code Oceanville, New Jersey 08231		City, State, Zip Code Totowa, New Jersey 07512							
Project Manager for Monitoring Firm Domenic D'Errico		Telephone No. 609-652-1833		Telephone No. 973-225-8400	License No. 01104				
Start Date (10) 06/29/2026		Scheduled Completion Date (11) 07/07/2026		Name of OSHA Monitor LIS CONSULTING SERVICES, LLC					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address 3 B Cottage Court					
				City, State, Zip Code Whiting, New Jersey					
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glove Bag Procedure / Limited Containment & Tent ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF of LF)	Abatement			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Throughout building		X		Fittings (Wrap & Cut)	100 ea.	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Landfill				
City, State Elizabeth, New Jersey				Disposal Date July/2026	City, State Pen Argyl, PA				
Completed by Adriana Olejarova		Title President		Signature 			Date 06/19/2026		

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

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

RECEIVED

Date of Notification (1) 07/03/2026		Name of Building Owner/Operator (2) Manalapan-Englishtown Regional Schools		Check No.4132					
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 54 Main Street City, State, Zip Code Englishtown, NJ 07726 Name of Contact Veronica Wolf Telephone Number 732-789-2500					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Pine Brook Elementary School			Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 155 Pease Road			Square Feet 15000						
City (5) Manalapan, NJ 07726			# of Floors 2		Bldg. Age 50+				
County (6) Monmouth		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Elementary School					
Name of Monitoring Firm Hired by Building Owner (8) AHERA Consultants, Inc.			ASCM No. 00057		Name of Abatement Contractor (9) Lilich Corporation				
Street Address P.O. Box 385			Street Address 246 Union Boulevard						
City, State, Zip Code Oceanville, New Jersey 08231			City, State, Zip Code Totowa, New Jersey 07512						
Project Manager for Monitoring Firm Domenic D'Errico		Telephone No. 609-652-1833		License No. 01104					
Start Date (10) 07/13/2026		Scheduled Completion Date (11) 07/26/2026		Name of OSHA Monitor LIS CONSULTING SERVICES, LLC					
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>Occupied</u>			Street Address 3 B Cottage Court City, State, Zip Code Whiting, New Jersey						
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glove Bag Procedure / Limited Containment & Tent ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1. Multi-user Toilet Rooms		X		Ceramic wall tile & mortar FROM CMU block walls	816SF	X			
1. Multi-user Toilet Rooms		X		Ceramic wall tile/mortar bed AND select CMU Block	500 SF	X			
2. Nurses Toilet Room		X		Ceramic wall tile & mortar FROM CMU block walls	50SF	X			
2. Nurses Toilet Room		X		Ceramic wall tile/mortar bed AND select CMU Block	100SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 40	Name of Registered Landfill Grand Central Landfill				
City, State Elizabeth, New Jersey				Disposal Date July/2026	City, State Pen Argyl, PA				
Completed by Adriana Olejarova		Title President		Signature 		Date 07/03/2026			

10635

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

JUL 13 2026

Date of Notification (1) 7/8/26		Name of Building Owner/Operator (2) Dean Enterprises Inc							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation							
Street Address PO Box 1874		ASBESTOS CONTROL & LICENSING							
City, State, Zip Code Mount Laurel NJ 08054		Telephone Number							
Name of Contact									
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Vacant House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 248 Whiskey Mill Rd		Square Feet 1000+	# of Floors 1						
City (5) Clarksboro NJ 08061		Bldg. Age 50+							
County (6) Gloucester	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) House							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) Pernaco Inc.						
Street Address		Street Address PO Box 329							
City, State, Zip Code		City, State, Zip Code West Berlin NJ 08091							
Project Manager for Monitoring Firm		Telephone No. 856-753-9800	License No. 00727						
Start Date (10) 7/17/26	Scheduled Completion Date (11) 7/22/26	Name of OSHA Monitor Same							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Siding			x	Exterior Siding	1750	x			
Name of Registered Waste Hauler Pernaco Inc		NJDEP Waste Hauler ID No. 21787	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Hills					
City, State Berlin NJ		Disposal Date 7/22/26		City, State Morrisville PA 19067					
Completed by Anthony T Perna		Title President		Signature 			Date 7/8/26		

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

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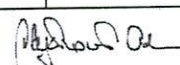
ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/06/2026		Name of Building Owner/Operator (2) UNION TOWNSHIP BOARD OF EDUCATION							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 149 PERRYVILLE ROAD							
		City, State, Zip Code UNION TOWNSHIP							
		Name of Contact BRIAN FANICASE	Telephone Number 908-735-5511						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) UNION TOWNSHIP MIDDLE SCHOOL		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 140 PERRYVILLE ROAD		Square Feet	# of Floors						
City (5) UNION TOWNSHIP		Bldg. Age							
County (6) UNION	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) TWO BROTHERS CONTRACTING, INC.						
Street Address		Street Address 11 VREELAND AVENUE							
City, State, Zip Code		City, State, Zip Code TOTOWA, NJ 07512							
Project Manager for Monitoring Firm		Telephone No. 973-956-8700	License No. 00494						
Start Date (10) 07/16/2026	Scheduled Completion Date (11) 07/31/2026	Name of OSHA Monitor SAME AS (9) ABOVE							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: OCCUPIED		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
NURSE'S OFFICE		X		PIPE ELBOW INSULATION	2 FITTINGS	☒			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING, INC.		NJDEP Waste Hauler ID No. 18743	Cubic Yards of Waste 1+/-	Name of Registered Landfill WASTE MANAGEMENT					
City, State TOTOWA, NJ 07512			Disposal Date 07/31/2026	City, State MORRISVILLE, PA					
Completed by ELIZABETH MLADENOVIC		Title VP OF OPERATIONS	Signature <i>Elizabeth Mladenovic</i>			Date 07/06/2026			

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

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Date of Notification (1) 07/06/2026		Name of Building Owner/Operator (2) Ilearn Facility Development Inc		Check # 4133 2026				
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 33-00 Broadway					
			City, State, Zip Code Fair Lawn, NJ 07410					
			Name of Contact Richard Arslan		Telephone Number 708-967-5720			
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Bergen arts & Science Charter School			Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial bldgs., homes, etc.)					
Street Address 30 Madonna Place			Square Feet 50,000	# of Floors 1	Bldg. Age +55			
City (5) Garfield, New Jersey 07026								
County (6) Bergen		County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Educational					
Name of Monitoring Firm Hired by Building Owner (8) Detail Associates, Inc		ASCM No. 0012	Name of Abatement Contractor (9) Lilich Corporation					
Street Address 560 Sylvan Ave, Suite 3065		Street Address 246 Union Boulevard						
City, State, Zip Code Englewood Cliffs, NJ 07632		City, State, Zip Code Totowa, New Jersey 07512						
Project Manager for Monitoring Firm Nadine Bello, MS, RPIH, CIEC, AST		Telephone No 973-981-4850	Telephone No. 973-225-8400	License No. 01104				
Start Date (10) 07/21/2026	Scheduled Completion Date (11) 08/15/2026		Name of OSHA Monitor LIS CONSULTING SERVICES, LLC					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address 3 B Cottage Court					
			City, State, Zip Code Whiting, New Jersey					
Scope of Work (Check All That Apply)								
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glove bag Procedure / Limited Containment & Tent ☐ Non-Exempted (*) and Non-Friable Procedure				
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Boiler Room	X		TSI Pipe Insulation	700 LF	X			
Boiler Room closet	X		TSI Pipe Insulation	70 LF	X			
Boiler Room	X		Boiler Insulation overhead	420 LF	X			
Boiler Room	X		Breeching Insulation	160 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 40	Name of Registered Landfill Grand Central Landfill				
City, State Elizabeth, New Jersey		Disposal Date August/2026		City, State Pen Argyl, PA				
Completed by Adriana Olejarova		Title President	Signature 		Date 07/06/2025			

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

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Date of Notification (1) 6/29/26		Name of Building Owner/Operator (2) Princeton University						
Agencies Notified	Type Notification	Street Address E.A. MacMillian Building						
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Princeton, NJ 08544						
		Name of Contact	Telephone Number					
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) 62 Lower Harrison St.		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 62 Lower Harrison St.		Square Feet 2,000	# of Floors 2					
City (5) Princeton		Bldg. Age 75						
County (6) Mercer	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence						
Name of Monitoring Firm Hired by Building Owner (8) Pennoni		ASCM No.	Name of Abatement Contractor (9) Plymouth Environmental Co., Inc.					
Street Address 515 Grove St., Suite 1B		Street Address 923 Haws Ave.						
City, State, Zip Code Haddon Heights, NJ 08035		City, State, Zip Code Norristown, PA 19401						
Project Manager for Monitoring Firm Richard Egner		Telephone No. 856-656-2874	License No. 00398					
Start Date (10) 7/14/26	Scheduled Completion Date (11) 7/24/26		Name of OSHA Monitor Plymouth Environmental Co., Inc.					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 923 Haws Ave.						
		City, State, Zip Code Norristown, PA 19401						
Scope of Work (Check All That Apply)								
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition						
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
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	Yes	No			N/A	Removal	Repair	Encapsulate
1st Floor Throuhgout		X	Plaster Ceiling	770 SF	X			
1st Floor Kitchen		X	Sink Undercoat	5 SF	X			
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. 17273	Cubic Yards of Waste 10	Name of Registered Landfill Fairless Landfill				
City, State Newton, PA		Disposal Date TBD	City, State Morrisville, PA					
Completed by Matthew Kelly		Title Project Manager	Signature <i>Matthew Kelly</i>			Date 6/29/26		