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Date of Notification (1) 6/7/16				Building C	Owner/C	perator	(2)	<u> </u>		JUN	1 9	2	016		المست
Agencies Notified Type Notification X EPA DEP Amended Amendment #		C		ddress te, Zip Coonsack, N		172			ĀSI	JESTC LIS	ENS OS C	ON	TRO)L &	
Emergency (in in justification) DCA Emergency (in justification) Cancellation		N	ame of	Contact nok Kim					Tele	ephone N	Numbe	er			
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Name of Facility Where Abatement is Taking Street Address	Place (3)							of Facility (4 School (K-1) Subchapter Other (i.e. p	2) 8 (Othe			ouild	ings,	home	es,
City (5) Hackensack								e Feet	# of 2	Floors		BI 69	dg. A	ge	
County (6) Bergen				Code (7) ISE ONLY)	* <u>250</u>		Currer	nt Use (Pric	or if bei	ng demo	lished)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	l No.				ement Con onmental			LC				
Street Address						100000000000000000000000000000000000000	Addres ox 48	s 3, 4 E G	ate Di	rive					
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Project Manager for Monitoring Firm		T	elephor	ne No.		Teleph 973-7	one No 764-22			License 703	e No.				
	Scheduled 7/31/16	Comp	oletion [Date (11)		Name	of OSH	A Monitor							
Occupancy Status During Abatement (Check	Only One)					Street	Addres	S							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: roof			ent			City, St	tate, Zij	p Code							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	processor .	novatio				×	Min Glo	Containme i-Enclosure vebag Proc i-Exempted	edure	5				e	
	Is I	ocatio	n											ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	No Used Maint Custoo (rmally Solely enanc dial Sta 12)	by ce/ aff?		os Cont thermal surfa	scription taining M systems cing, VA niscellan	laterial insula T, or		(S	mount Specify or LF)		Removal	Repair	e Encapsulate	Enclosure
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Completed by A. Scott Higgins	Title Preside	ent			S	Signature	4	h		-	Date 6/7/	16			

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Date of Notification (1) 6/7/16					Building (Virs. Blag		perator	(2)		J	UN	g 2()16	-]
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DOH DCA	justification) Cancellation		100	Name of Pat Bla	Contact agman					Tele	phone N	umber			
		·		FACII	LITY INFO	RMATI	ON								
Name of Facility Where A	Abatement is Takir	ig Place (3	3)					Type	of Facility (4)					
home									School (K-12		0.00				
Street Address								×	Subchapter (Other (i.e. pretc.)				ilding	s, hom	es,
City (5) Leonia								Squa 2200	re Feet)	# of 2	Floors		Bldg. 66	Age	
County (6) Bergen				County (Code (7) JSE ONLY)			Curre	nt Use (Prio	r if beir	ng demoli	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.		Name	of Aba	tement Cont	tractor	(9)	-			
							ABS	Envir	onmental			C			
Street Address								Addre	ss 33, 4 E Ga	ate Dr	rive				
City, State, Zip Code			66 74 5						ip Code , NJ 0741	18					
Project Manager for Mon	itorina Firm		- [Telephor	ne No.			none N			License	No.			
,							35.55.35.25.25.3	764-2			703				
Start Date (10) 6/20/16		Schedul 7/20/1		npletion (Date (11)		Name	of OSI	HA Monitor						
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X Other – Describe:						_									
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TO BE ABA	ATED	1252500	iintenar todial S	100000000000000000000000000000000000000		thermal	system	s insula		1	pecify	Z e	70	Encapsulate	Enclosure
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		Yes	No	N/A								<u>m</u>		ate	Гe
baseme	ent			х		pipe	insula	ation		6	0 LF	х			
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City, State Freehold NJ						Dispo TBD	sal Date)	City, State Birdsbor		4				
Completed by		Title				5	Signatur	e	1		1.25	Date			
A. Scott Higgins		Pres	ident					1			(6/7/16	3		

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DEP X DOL	Amended Amendment	#			te, Zip Cod v, NJ 07				1		LICE	MSW	iG_		
I I I I I I I I I I I I I I I I I I I	Emergency	(including			Contact	002				Telephon	e Nun	nher			
DOH DCA	justification) Cancellation		11/23		vapinews	ski				1					
				FACIL	LITY INFO	RMAT	ION		7= 7					V	
Name of Facility Where a funeral home	Abatement is Takin	g Place (3)					_	of Facility (4						
Street Address									School (K-12 Subchapter	2) 8 (Other tha	n K-12	2)			
336 Cleveland Ave	nue							×	other (i.e. pr tc.)	rivate & com	merci	al build			es.
City (5) Harrison								Squar 3200	e Feet	# of Floor	rs	7	ldg. Ag 3	je	
County (6) Hudson				County C STATE L	Code (7) JSE ONLY)	·		Currer	nt Use (Prio	r if being de	molish	ned)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	l No.				ement Con onmental	tractor (9) Services,	, LLC				
Street Address			-					Addres Box 48	s 3, 4 E Ga	ate Drive		100000000000000000000000000000000000000	330 300 30		
City, State, Zip Code							state, Zi wood,	p Code NJ 074	18						
Project Manager for Mor	nitoring Firm		- 1	Telephor	ne No.		Teleph	none No).	Lice	nse N	0.			
		Illustration from the second					973-	764-22	276	703	3				
Start Date (10) 6/ <i>15</i> /16		8/10/16		pletion [Date (11)		Name	of OSH	IA Monitor						
Occupancy Status Durin	g Abatement (Che	ck Only Or	ie)			90.111	Street	Addres	S						
× Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	Period of / nal Facility	\batem Hours	ent			City, S	state, Zi	p Code						
Scope of Work (Check A	VII That Apply)								-						
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		la	Logotie	0.0				1 1101	Lacinpled	() and 1101	111100	1	Abate		
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Asbestos-Containing <u>TO BE</u> AB In Faci (13)	Material (ACM) <u>ATED</u> lity	Ma Cus	d Solel intenar todial S (12)	ice/ staff?		os Cor therma surfa	ntaining N al system acing, VA miscellar	Material s insula T, or		Amour (Specif SF or L	fy	Removal	Repair	Encapsulate	Enclosure
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bee was an analysis	ne of Registered Waste Hauler						c Yards aste		West of the Control o	Registered L					
Freehold Cartage			auler ID 5939		TBD				n Berks La	anatil	l ———				
City, State Freehold NJ						Dispo	osal Date		City, State Birdsbo						
Completed by A. Scott Higgins		Title Pres	dent				Signature	e de		_	Da	ate			

	١		CATION	OF ASBE	STOS	ABATE			ENG	EIB	500	1	1	
Date of Notification (1) 6/3/16				Building C		perator	(2)				/ \	10		
Agencies Notified Type Notification		5	Street A						لال	<u>N 9</u>	2016		٧	
X EPA X Initial DEP Amended X DOL Amendment #			City, Sta	te, Zip Coo Hills, NJ	de				SBES	TOS CO	INTR	OL 8	Ł	-
Emergency (in justification) DCA Emergency (in justification) Cancellation		1	Name of	Contact el Waelz				L		phone Nu				_
DCA Cancellation				LITY INFO		ON			-			-		
Name of Facility Where Abatement is Taking Classrooms 128-132	Place (3	5)	170					of Facility (
Street Address 131 Martinsville Road					7. 1 4 m		Ħ (Subchapter Other (i.e. petc.)				dings,	home	es,
City (5) Basking Ridge							-	re Feet	# of 2	Floors	100	ldg. A 5	ge	
County (6) Somerset				Code (7) USE ONLY)	· .	_	Curre	nt Use (Pri	or if bein	g demolis	shed)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCN	1 No.				tement Co onmenta			0			
Street Address						ST-11/10 (5/6)	Addres Box 48	ss 33, 4 E G	ate Dri	ive				
City, State, Zip Code								ip Code , NJ 074	18					
Project Manager for Monitoring Firm		1	Γelepho	ne No.			none N 764-2			License 703	No.			
	Schedule 7/18/16		pletion I	Date (11)		Name	of OSH	HA Monitor						
Occupancy Status During Abatement (Check	Only Or	ne)				Street	Addres	SS						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: performing on Saturda	I Facility		ent			City, S	state, Z	ip Code						
Scope of Work (Check All That Apply)					_									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renovat Demoliti				×	Mir Glo	l Containm ni-Enclosur ovebag Pro n-Exempte	e cedure				e	
	ls	Locatio	on										ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall ed Solel intenan todial S (12)	y by ce/		os Con thermal surfa	scription taining N system: cing, VA niscellar	/laterial s insula T, or		(S _I	nount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A										W	
Classrooms 128-130			Х		fui	me hoo	od			0 SF	x			
Classrooms 132-130			Х		fui	me hoo	od		60) SF	x			
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic	Yards		Name of	Register	ed Landf	ıl			
Freehold Cartage		100000	auler ID 1939	No.	of Wa TBD	ste		Wester	n Berk	s Landf				
City, State Freehold NJ					TBD	sal Date		City, Sta						
Completed by A. Scott Higgins	Title Presi	dent			5	Signature	le				ate 5/3/16			

CK 16	51	N		CATION	te of New OF ASBE O NJAC 8	ESTOS A	BATE					7_	了,	M		
Date of Notification (1) 05/14/2016					Building (A BELL		perator	(2)	IM	JUN	9 7	2016		IU		
Agencies Notified	Type Notification			Street Ad	idress							UTD/	21	8		
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				FACIL	LITY INFO	DRMATI	ON									
Name of Facility Where RESIDENTIAL	Abatement is Taking	g Place (3))					Тур	School (K-	12)	a than V	12)				
Street Address									Subchapte Other (i.e. etc.)	private 8	k comme					es,
City (5) RICHLAND					ä			74		1	Floors		7	dg. A	ge	
County (6) ATLANTIC				County C	Code (7) ISE ONLY)			rrent Use (Pri ESIDENTI		ng demo	lished)		25	
Name of Monitoring Firm ACER ASSOC.	n Hired by Building (Owner (8)		ASCM	No.		Name ASS	of Al	batement Co ED ENVIR	ntractor ONME	(9) ENTAL	SER	VIC	CES	INC.	
Street Address 1012 INDUSTRIAL	DRIVE						Street 570		ress EMS RUN							
City, State, Zip Code WEST BERLIN NJ	08091						City, S MUL	State, _LIC	Zip Code A HILL NJ	08062	2					
Project Manager for Mor MATT DEPALMA	nitoring Firm			Telephor 856-80	ne No. 09-1202		Teleph 610-		No. 1-4676		License 01145					
Start Date (10) 05/26/2016		Schedule 05/27/2			Date (11)		Name EMS	2935	SHA Monitor					•	41. 36.	
Occupancy Status Durin	g Abatement (Chec			nent.			Street 200		ress 130 NOR	ГΗ		_		_		
	ned Outside of Norm RESIDENTIAL-BAS								Zip Code MINSON N	J 0807	77 .	_	H 22			
Scope of Work (Check A	All That Apply)											-	i			
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		la la	Locat	ion					TOTAL MANUFACTURE	- ()					ment	
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TO BE AB In Faci (13)	ATED lity	U (0.010.000)	ntena odial ((12)	0.0000000000000000000000000000000000000	(i.e.		system cing, VA niscellar	T, or	Г		specify or LF)		Remova	Repair	Encapsulate	Enclosure
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City, State MULLICA HILL NJ							sal Date 3/2016		City, Sta WAYN		RG, Ol	Н				
Completed by RON SWANSON		Title GEN	ERA	L MANA	AGER	S	Signatur	Ka	well y	CHO	M	Date 05/	4/2	2016		

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

GAC Project # 548-16							1 12	Un I			-111
Date of Notification (1)				1	Name of Building Owner/C						
June 3, 2	2016	L-			CELGENE CORPORA	TION			0 0	1040	$+i \cup J$
Agencies Notified		Notification 7		T-A3	Street Address	_		JUN	9 2	2016	
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DCA	a live dia	new mater	als, loca	ations and	SUMMIT, NJ 07901			FOTOS	CON	STROI	_ &
X DOL		quantities			Name of Contact		Teleph	none Nun	nber	.G	
☑ DEP- No Longer REQUIRE	ED	☐ Emerge	ency (in	cludina	MR. RAY SANTILLA	2000					
⊠ DOH		justific			Environmental Hea	lth &					
A CONTRACTOR CONTRACTO		□ Cancel			Safety						
		L Cancel	ieu		1 Company of the Comp				37.32		
				FACILITY INF							
Name of Facility Where Abateme	ent is Tak	ing Place (3)			Type of Facility (4)						
CELGENE CORPORATIO	N – "B"	BUILDING			School (K-12)						
Street Address			- 16		Subchapter 8 (other than						
86 MORRIS AVENUE					Other (i.e. private & con						
00 WORKS AVEIOE					Sq. Feet: 26,512 # 0	of Floors: 2	Bldg. A	Age: ~	70+ y€	ars	
City (5)	County (6)			Code (7)					TO /= 0	SEELOE	
SUMMIT	MO	RRIS	(State L	Ise Only)	Current Use (prior if being	g demolished)	: ADM	INISTRA	TIVE	FFICE	.5
Name of Monitoring Firm Hired I		wner (8)	ASCM N		Name of Contractor (9)						
McCABE ENVIRONMEN	NTAL		0011	8	GREENWOOD ABAT	EMENT CO	IIIZMC	TANT	SINC		
SERVICES, LLC						CIVILIAI CO	JI400I	LIMIT	5, 1140	•	
Street Address		"0.0			Street Address						
464 VALLEY BROOK AV	/ENUE	#3A			268 MAIN STREET						
City, State, Zip Code					City State, ZipCode						
LYNDHURST, NJ 07071					BUTLER, NJ 07405		Licono	e Numbe	-		
Project Manager for Monitoring	Firm	Telephone N		**	Telephone Number		Licers	e Numbe	<u>-</u>		
JOHN CHIAVELLO		201-438-	4839		973-492-0477		0084	0			
Scheduled Start Date (10)		Scheduled C	Completion	n Date (11)	Name of OSHA Monitor						
04/22/16		12/31/16	ompiouo.								
0-4/22/10		12/01/10			ENVIROVISION, INC	D					
Occupancy Status During Aba	atement (Check only o	ne)		Street Address						
☐ Facility Closed/Vacated Du	ıring Enti	re Period of A	batemer	nt		DOAD					
☐ Abatement Performed Out	side of N	ormal Facility	Hours		20-21 WARGARAW	RUAD					
Describe					City, State, Zip Code						
▼ Facility Occupied During E					FAIRLAWN, NJ 0741	10					
SUB 8 - PHASE I FRI 4/22 -	MON 4/2	25, Additiona	I phases	to be	Transcerior, no or in	. •					
determined - M - F 7am - 4		rrs & weeker	nds as ne	eeded)				5,01151			
Source of Work (Check all that	apply)				roi.	F. II O t-i		th Noneti	us Dro	ocuro.	
				- ·		Full Contains			ve Fies	ssure	
$\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$				■ Renovation	10.00	Mini-Enclosu	Contracting the second				
\ge 160 sf or \ge 2	260 If			Demolition	X	Glovebag Pr				0	F112220
					X	Non-Exempt		Abatem			ure
Location of Asbestos-Containing		cation Norma	lly Used	Description of Ast	bestos Containing Material al systems insulation, surfaci	ng, (Speci		Abatem	ent Typ	≅	
Material (ACM) in Facility (13)		ly by Maint. stodial Staff? (*	12)	VAT, or other mis	cell.)	or LF)		Remove	Repair	Encap I	Enclose
	YES		NA	, 2. 23,0,	ore season #1						
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Various Locations		X	İ	TSI		100	LF	X			
Various Locations	_	X		CAULKING (do	or, window, expansion, et	tc.) 50	LF	×			
Various Locations	_	X			soffits, ceilings, walls, et		SF	X			
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various Locations		100	-	3353.1				-	1	1	
									-		
		LUDEDII	1-11-1	ID#	T	40.03/	Namo	of Regist	ered I s	andfill	1
Name of Reg. Waste Hauler		NJDEP Was		10#	Cubic Yards of Waste:	40 CY	GR	O.W.S.	North	Landf	ill
Newark Carting, Inc.		NJ DEP	# 4509				0.14.	0.11.0.	1101111	Larrar	
Newark, NJ 04509				1		I Diseased D	1-	10	Pitu Cto	to	_
						Disposal Da 12/31/16	110		Oity, Sta	v Ford M	Aill Rd.
Notes: None						12/31/16		1000		lle, Pa 1	
								2	15-736	-1700	
Completed by (Print or Type)		Title			Signature		Date				
RAYMOND C. PEDALI	NO	SENIOR P	ROJEC	CT	Raymand C. Fe	dalino	Jun	e 3, 20°	16		
		MANAGE	7								

State of New Jersey - Notification of Asbestos Abatement

CK 122/14 (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) IIIN The Valley Hospital June 6, 2016 Street Address Notification Type Agencies Notified 223 North Van Dien Avenue Initial Notification X EPA ASBESTOS CONTROL & x Amendment # 1 City, State, Zip Code DCA LICENSING x DOL Ridgewood, NJ 07450-2736 X DEP Emergency (including Name of Contact Telephone Number x DOH William Stasiak justification) FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) The Valley Hospital Subchapter 8 (other than K-12) Bergen Wing, Bsmt-Mechanical Room Other (i.e. private & commercial buildings, homes, etc.) Street Address Sq. Feet: Unknown # of Floors: 4 Bldg. Age: 50+ years 223 North Van Dien Avenue County Code (7) City (5) County (6) Current Use (prior if being dernolished): Hospital (State Use Only) Ridgewood Bergen Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. GREENWOOD ABATEMENT CONSULTANTS, INC. **Colden Corporation** Street Address Street Address **268 MAIN STREET** 28 Washington Street City State, ZipCode City, State, Zip Code Butler, NJ 07405 Ballston Spa, NY 12020 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 00840 973-492-0477 347.435.3561 Jim Miades Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) June 7, 2016 EMSL inc. June 4, 2016 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Road Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe Piscataway, NJ 08854 Other - Describe: Source of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation > 3 sf or > 3 lf x Glovebag Procedure Demolition □> 160 sf or ≥ 260 Non-Exempted (*) and Non-Friable Procedure Abatement Type Description of Asbestos Amount Location of Asbestos-Containing Is Location Normally Used Solely (Specify SF Containing Material (ACM) (i.e. by Maint./Custodial Staff? (12) Material (ACM) in Facility (13) Remove Repair Encap Enclose or LF) thermal systems insulation, YES NO NA surfacing, VAT, or other miscell.) X Pipe & Fittings 9 ea. X Mechanical Room X Fittings 7 ea. Name of Registered Landfill Cubic Yards of Waste: Name of Reg. Waste Hauler NJDEP Waste Hauler ID# Meadowfill Landfill See Below See Hauler Below #1 & 2 City, State Disposal Date Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Route 2, Box 68 June 7,2016 NJ DEP # 12561 Bridgeport, WVA Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551 304-842-2784 Signature Completed by (Print or Type) June 6, 2016 SENIOR PROJECT Marin Graure Marin Graure MANAGER

GAC # 2016-566- Amendment # 1 - Additional acm fittings - 7 each

CK 2389

CX 230 1	NOTE (P	ursu	ant to NJ	AC 8:60 and	12:120)		7	EPE	N W	E		1
CN (Fration (1) d 1 1 1	I	Nan	ne of Build	ding Owner/Or	perator (2)	1101		11 121		-11	
te of Notification (1)			10e	MM	201	TRU		HIM	9 20	16		
encies Notified Type Notificat	ion	Stre	- Addro				111	JUN	9 20	10	-	1
EPA Initial		City	State, Z	ip Code	5 1 10	. \.	04	NITED	20	6	18	
DEP Amende	nent #		1560	in M	gue	V M	Te	elephone Number	F.SING	0.02		1
Emerge justificat	ncy (including ion)		me of Cor				11.0					
DOH Justinicat	ation			INFORMATI	ON							+
ame of Facility Where Abatement is T	aking Place (3)		TAGILIT			Type of F						
arrie of Facility Vinores	* C == C					=	ool (K-12) chapter 8 (Of	ther than K-12)	ildina	e hon	nes	
reet Address	\sim					Othe etc.)	i so	e & commercial b				_
(1 (2010) (110)						Square F	eet #	of Floors	1 1	Age		
1005) DIA MANGO	1 LLRST	[2 7			611	lea (Prior if h	eing demolished				
ounty (6)	1 Voca	C	ounty Coc	le (7) ONLY)		Current	Linne					
1 Y Y X X 1	0 (0)	1	ASCM N		Name	e of Abatem	nent Contrac	tor (9)				
lame of Monitoring Firm Hired by Bui	Iding Owner (6)		7001111			k Industr	ies Inc.					_
Street Address						t Address Box 91	5					
Stieer Address					1	State, Zip						
City, State, Zip Code					Brid	ck, New	Jersey 087	'23				_
Project Manager for Monitoring Firm		T	Telephone	No.	Tele	phone No.	100	License No 01196	•			
Project Manager for Monitoring 1 min						2)899-74 ne of OSHA		0				
Start Date (10)	Scheduled	Com	pletion Da	ate (11)	Ivali	10 01 001						_
6/10/16	t (Check Only One))	10		Stre	et Address						
Occupancy Status During Abatemen	Entire Period of Ab	atem	nent		Oite	, State, Zip	Code					
Abatement Performed Outside	of Normal Facility F	Hours	3		City	, State, Zip	0000					_
Other - Describe:	v) /											
Scope of Work (Check All That Appl	Re	enova	ation			Full Mini	Containment -Enclosure	t with Negative F	ressure	3		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		emoli					Dracos	dure *) and Non-Friat	ie Proc	edure		
						L Non	-Exempled (j and real		Abate Typ	ment	
	1.0	Locat	19007/5/20		Descrip	ition of				1 91		-
Location of Asbestos-Containing Material (A	Used	d Sol	ely by ance/	Asbestos (ontainir	ng Material tems insula	(ACM)	Amount (Specify	Re	R	Encapsulate	Enc
TO BE ABATED	Cust	odial	Staff?	S	urfacing.	. VAI, or		SF or LF)	Remova	Repair	psula	Enclosure
In Facility (13)		(12)		otr	ner misc	ellaneous)			1 2		ite	CI
	Yes	No	N/A	(C) 200	200	= (d' =	0 6	anip	8			
				OSHES	(U)	5idin	8	19001				
			NJDEP \	Maste C	ubic Ya	rds	Name of F	Registered Land	fill	11		
Name of Registered Waste Hauler			Hauler II	Vasic -	f Waste	10	GROW	S Inc.				
Brick Industries Inc.			21602		Disposal	Date	City, State	Э				
City, State					5/21	116	PA		Date	1. 1	1 1	
Brick, New Jersey Completed by	Title	200	651		Sign	nature	H		6/	11	10	1
Eric Plackis	Pres	side	nt				UY		U			



K O O I							nd 12:120)	TEN F		V E		1		
Date of Notification (1) 0	5/23/2016			Name o			/Operator (2)				2 400			
Agencies Notified	1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (tion Type		Street A 5100 Ha		Highway		J. J	UN 9 2	016				
X EPA X DEP X DOL	Initial x Ame			City, Sta Mays La		Co NJ 08330)	ASBE	STOS CON	ITRO	L &		1	
□ DOH	Jus	ergency (Includ tification)	ding	Name o		100000			4GENSIN	Nim	pót			
□ DCA	☐ Can	cellation		Bryon	Brain	ard			1 -					_
				FAC	ILITY I	NFORMA	TION	T 4 Facilly	h : (4)					_
Name of Facility Where A	Abatemen	t is Taking Pla	ce (3)					Type of Facilit	12)					
Street Address 4 Avalon Blvd						V		Subchapte x Other (i.e. p homes, et	rivate & comm c.	nercial	build			
City (5) Swaintown	2							Square Feet 100	# of Floor:	S		g. A yeai		
County (6) Cape may						ounty Coo SE ONLY	ie (7) (STATE)	Current Use (Electrical Sub		lemolis	shed)	9		
Name of Monitoring Firm Harvard Environmen		Bldg. Owner (8)	ASCM	No.		of Contractor (9) ty Environmer	ntal						
Street Address 760 Pulaski Highwa				•		Street / 461 N	Address Iew Churchma	250000						
City, State, Zip Code New Castle, DE 197	720						ate, Zip Code Castle, DE 19	720						
Project Manager for Mon Wesley Morrison		m	SUBSTITUTE OF STREET	one No. 326-23	333		one Number 322-8946		License N 00578	lumbe	Γ			
Scheduled Start Date (10 06/07/2016	0)	Scheduled Co 06/07/2016	-			100000000000000000000000000000000000000	of OSHA Monitor ty Environmer							
Occupancy Status During	g Abatem	ent (Check on	ly one)				Address Iew Churchma	ans Road						
X Facility Closed/Vacate Abatement Performed Other – Describe:	d During I d Outside	Entire Period of Normal Fac	of Abater cility Hou	nent rs -			tate, Zip Code Castle, DE 19	720						
Scope of Work (Check a	II that app	ly)					Full Contain	ment with Negat						
\geq 3 sf or \geq 3 lf X \geq 160 sf or \geq 260 lf					☐ Ren X Dem	ovation olition	☐ Mini-Enclo	osure Glove pted (*) and Nor	ebag Procedu n-Friable Proc					
				Is Locat							Ab	ater Typ		nt
				Norma sed Sole	ely by		Description stos Containing N	Naterial (ACM)	Amoun (Specifi			Г	п	
Asbestos-Contain TO BE A	tion of ling Mater ABATED ility (13)	ial (ACM)	N	Maintena Custod Staff (12)	ial ?	(i.e	. thermal systems surfacing, VA other miscellar	T, or	(Specify SF or LF		Removal	Renair	ncanculate	Enclosure
			Yes	No	N/A		tee coment none	la (transita)	532 SF		~		_	
Exterior walls & roof pan Exterior walls & roof pan			X				tos cement pane tos building caul		130 LF		X			
												-		
Name of Reg. Waste Ha Miller Environmenta)		JDEP W No. 1A		auler	Cubic Yards of Waste 40	Name of R ACUA La	eg. Landfill andfill					
City, State 105 Riverview Ave Pauls	sboro, NJ	08066					Disposal Date TBA	City, State 6700 Delila 08234	ah Rd. Egg Ha		owns	hip,	NJ	
Completed by Ben Hodgdon	Title PM						Signature		6	Date 05/2	3/16	;		



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

CK 6082			TION OF	of New Jersey ASBESTOS A JJAC 8:60 and	BATEN			E	C E		<u> </u>	E,	
Date of Notification (1)				ilding Owner/Op	perator	(2)		C	JUN	9 2	2016		U
6/6/2016		1	eet Addre							_		-	
Agencies Notified Type Notification EPA Initial		90	00 Bloo	mfield Aven	ue		,	ASBE	STOS			DL 8	ķ.
DEP Amended		1		Zip Code			1		LICE	101.4	9		
DOL Amendment #_ Emergency (inc	hiding		erona,					Talan	hana Ni	umbar			_
DOH justification)	Judning	100000	me of Co					reiep	hone Nu	Illipei			
DOH justification) Cancellation				eev Varghee									-
Name of Facility Where Abatement is Taking F	Place (3)		FACILII	YINFORMATI	ON	Тур	oe of Facility (4)					-	
Residence	1400 (0)						School (K-12) Subchapter 8	(Other	than K-1	12)			
Street Address						×	Other (i.e. privetc.)	vate &	commerc	cial bu			
City (5)							uare Feet 500	# of 1	Floors		Bldg 80	, Age	A CONTRACTOR OF THE CONTRACTOR
Newark,		Cr	ounty Co	de (7)	90	150	rrent Use (Prior	if bein	g demoli:	shed)			
County (6) Essex			TATE US				esidence						
Name of Monitoring Firm Hired by Building Ox	wner (8)	1	ASCM N	Vo.			batement Conti						
Iris Environmental	(0)		N/A	5-70-18-4			neral Constr	uction	n, Inc.				
Street Address					Stree	t Add	dress			040			
2333 Route 22 West							lifton Avenue	e, PM	B Suite	218			
City, State, Zip Code							e, Zip Code						
Union, NJ 07083					1		NJ 07012			514			
Project Manager for Monitoring Firm			elephone		Telep				License 00693				
Rick Estaquel			908-206		0.0000		9-0089		00033	,			_
Start Date (10)	Scheduled		oletion Da	ate (11)			OSHA Monitor eneral Consti	ructio	n Inc				
6/17/2016	6/18/201						dress	uotio	11, 1110.				
Occupancy Status During Abatement (Check							lifton Avenu	e. PIV	IB Suite	e 218	3		
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of Ab	ateme	ent		100000000000000000000000000000000000000		e, Zip Code			15			
Abatement Performed Outside of Norm Other – Describe:	al Facility F	lours		0.5			, NJ 07012						
					0		, , , , , , , , , , , , , , , , , , , ,						3500
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Re De	novati molitic	ion on			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure					
	T		T									bate	ment
		ocation	20000	г)escripti	on o	f			-		Ту	76
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Custo	tenar	nce/	Asbestos Co (i.e. therm sur	ntaining	Ma ms i VAT,	terial (ACM) nsulation, or	(Amount Specify F or LF)		Removal	Repair	Encapsulate
(13)	Yes	No	N/A	Olife			*				=		ite
Basement			Х	Pi	pe Insu	latio	on		9 LF	-	K		
Basement			X	De	bris or	n Flo	or		130 SF		K		
Dascinett			X										
Name of Registered Waste Hauler		IN	JDEP W	1000	oic Yard	s	Name of	Regis	tered Lar	ndfill			
Service Transport Group		10.7	Hauler ID 20990	3 (Minen		ndfill				
City, State New Castle, DE 19720					posal D 1 6 /201		City, Sta Wayn	ne esbur	g, OH	_			
Completed by	Title	-4 N A	lanage	r	Signa	turle		_/		Date	e 16/20	016	

State of NJ
Notification of Asbestos Abatement

B & G proj. #:	2016-96		(P	ursuant	to NJAC 8:	60-7 and	d 12:120-7)	Check#	7870		\mathbb{V}	E	7
Date of Notification		- 11		175W pa w	r/Operator (2) Board of Ed	ducation			JUN	9	20	16	
Agencies Notified	Type Notificat		treet Address		Dodra or Ec	addation							+
☐ EPA	720		P.O. Box					L_ AS	BESTOS	S CC	TNC	ROL	&
☐ DEP	X Initial		ity, State, Zip						LISE	NO	HIO.		=
X DOL	Amenda	ment	Annanda	le, NJ 0	8801								_
X DOH			ame of Conta	act				Telephone	Number				
☐ DCA	Cancella	ation	Anthony	Juskiew	ricz					_			_
				FACIL	ITY INFORMA	ATION							
Name of facility wi	here abatement i	s taking pla	ice (3)					Type of Facility (4	i) (K - 12)				
Spruce Run S	School (Non-S	Sub 8)							pter 8 (Othe	er tha	an K-	12)	
Street Address								Other (F	Private/Com	nmer			
27 Belvidere	Avenue								lomes, etc. of Floors	Т	Bld	g. Age	9
City (5)		Cour	nty (6)			1 1922 450.	Code (7)						
Clinton, NJ 0	18809	Hu	nterdon			(State us	se only)	Current Use (Pri	9.73	demo	lishe	d)	
Name of Monitorin		4000000		Т	ASCM No.	I Na	me of Abatement (school NON- Contractor (9)	Sub o	_			
	ional & Enviro			Inc.	ASON NO.	2	8 & G Restorati						
Street Address							eet Address	OH, IIIC.		_	_		
401 St. Jam	es Avenue						105 Ryerson R	oad					
City, State, Zip Coo	de					City	, State, Zip Code						
	New Jersey					_ _	Lincoln Park, I	NJ 07035					
Project Manager fo	r Monitoring Firn	1		ne Numbe		Tel	ephone Number (973)696-686	9	License No 003		ar		
Jon Gilbert				08-454-6	2020 (Barra 2000)	Na	me of OSHA Moni						_
Scheduled Start Da	ate (10)		I. Completion	Date (11)	E	8 & G Restorat	ion, Inc.					
06/20/2016			25/2016			1 7 7 7 7	eet Address						
Occupancy Status					¥	11 -	105 Ryerson R	oad		_			
Facility close	d/vacated during erformed outside	entire peri	od of abatem	nent. -		City	, State, Zip Code						
Describe:						- ı	incolnPark, N.	J 07035					
Other-Descr	NICES AND ADDRESS OF THE PARTY					- 11 -						,1,,	_
Scope of Work (cl	neck all that app	Renovatio	n.			□ Full (Containment w/neg	ative pressure	Gloveba	a pro	cedu	re	
_		≥160 sf or			21		enclosure	5		50/			
>3 sf or >3 lf			n normally us	sed solely						R	R	E	_
Location of asbestos-co	ntaining	by mainte	enance/custo			on of asbe	stos-containing	Amount		e m	e p	n	E n
material to b	е	staff(12)			material (otoo oomanii.g	(Specify S	F or	0	a	c a	C
abated in fac	cility (13)	Yes	No	N/A						v e	I r	р	_
Room 110 & 11	1			X	VAT, Mast	tic, & ca	rpet	750 sf & 7		X			
Room 101 & 10	02			×	VAT, Mas			750 sf & 7		X	븨	닠	ᆜ
Room 106 & 10				X	VAT, Mast			750 sf & 7		X	밁	井	부
Room 108 & 10	09			X	VAT, Mast			730 sf & 7		X	밁	님	무
Room 112				X	VAT, Mas			750 sf	[]	X	Ш		Ш
Registered Waste I B & G Restora			EP Hauler ID 19563)# C	ubic Yards of V 85	vaste Na	ame of Registered Tullytown	Resource & Re	covery C	ente	er		
City, State			D	Disposal D		C	City, State Tullytown,						
Lincoln Park,		T:41-			Signature		•		Date			Y.	_
Completed by (Prin		Title Secreta	ry/Treasur	er		G	ordana Luna		06/07/2	2010	6		

Date of Notification	(1) 6/7/16					_	wner / Operato								
Agencies Notified	Type Notific	ation	St	reet	Addre	SS	nship School	15			JUN	9	201	6	1
☐ EPA	D	v.	_			r Roa									
☐ DEP ☐ DOL	Initia	780 St. Co.				Zip Co				49	BEST	25.00	ONTE	ROL	2
		nded				, NJ 0	7722			7.0	1.17	JETK	1112		
□ DOH □ DCA		rgency cellation	1		of Cor					h		elepho	ne N	umb	er
							ORMATION								
Name of Facility WI	here Abatem	ent is Taking Pla					Type of Facil	lity (4)			-				
Conover Road E							School (
Street Address							Subchar	oter 8 (Other than	n K-12)					
76 Conover Road	d						Other (i.	e. priva	ate & com	mercial b	uilding	s, hom	es, e	tc.)	
							Square Feet		# of Floo	rs	Ble	dg. Ag	е		
City (5)		County (6)	Cour	nty C	ode (7	7)						-			
Colts Neck		Monmouth					Current Use	(Prior i	f beina de	molished)				
							School		3						
Name of Monitoring	Firm Hired I	ov Building Owne	r (8)		ASC	M No.	Name of Aba	temen	t Contract	or (9)					
RJB Environmen			. (0)		,,,,,		Bristol Env	ironm							
Street Address							Street Addres								
56 East Bridge S							1123 Beave								
City, State & Zip Co							City, State &								
Morrisville, PA 1		-:	-11-	2672	A I I.		Bristol, PA			Ti e	N.	-			
Project Manager for Rick Beach	ivionitoring i		elepn 267-99		Numb	er	Telephone N			100000000000000000000000000000000000000	nse Nu	imber			
Scheduled Start Da	to (10)	Scheduled Comp					(215)788-60 Name of OSI	-	aitar	005	Ja				
6/28/16	SUBSTITUTE OF STREET		6/30/1		e (11)		Bristol Env			2.					
Occupancy Status [Street Addres	1975-2 1789-271-2	onical inic						_
		During Entire Per			temen	it	1123 Beave		et						
Market State of the Control of the C	Performed O	utside of Normal	Hour	s –			City, State &	-	TANKS OF THE PARTY		7				
Describe:	7 AM to 3 P	M					Bristol, PA	A CONTRACTOR OF THE PARTY OF TH							
☐ Facility Occ	upied During	Abatement													
Scope of Work (Che	eck all that a	oply)					•			oory e	10000	1000			
	_		_						Full Conta		vith Ne	gative	Pres	sure	
≥3 sf or ≥3 l			_		ovation				Mini-Encl						
≥160 sf ≥26	O If			Dem	olition				Glove Ba						
								\boxtimes	Non-Exer		2000		10-11 MOVING		Charles.
	ocation of		Is Lo				Description	n of		Amo		Aba	teme	nt Ty	ype
	os-Containir erial (ACM)	ig	Norma	ely b			Asbestos-Con Material (A			(Spec				m	
	BE ABATED	I N	√lainte				(i.e., thermal s			31 01	LI)	Re	70	nc	Ē
	n Facility	197	Custod			in	sulation, surface					Remova	Repair	sde	Enclsoure
	(13)			12)		C	or other miscell	aneous	5)			val	=	Encapsulate	ure
				No	N/A				92					Ф	
Restroom Pipe C	hase					Pip	e Fitting (Wr	ap & (Cut)	20 E	a.				
Name of Registered	Waste Haul	er		100000000000000000000000000000000000000			Cubic Yards	Name	of Regis	tered Lan	dfill				
Service Transpor	t Inc.			209	ıler ID 990		of Waste 2 Cu YD	Mine	rva Land	dfill					
City, State							Disposal Date	City,							
New Castle, DE						100	6/30/16		nesburg	, Ohio					
Completed By (Print	or Type)			Title	9		Signature	^	` `	, ,		Date			-
Gino Pizzigon					ject		11.	0		./_	0	6/7/	6		
	5)				nagei		Dens 1.	133	rgon	1/7					

CK#25/81

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

Date of Notification (1)	/7/16			Name	of Building	g Owner/Operator	(2) Shaw		.IIIN	C	20	016				
Agencies Notified	Type Notifica	ation	-	Street	Address				17.37			=				
	Initial							į.				_				
EPA DEP	Amended		H	City, S	tate, Zip C	ode		450	110	ENS	UNG	-				
⊠ DOL	Amendme		-	2 <u>2</u>	10 (0		Chester, NJ 07	7930		-111	71, 10					
⊠ DOH	justificati	ion)	Ĺ	Name	of Contac			Telephone Nur	mber							
□ DCA	☐ Cancellat	ion			V	illiam Shaw			,		-					
				FAC	CILITY INF	ORMATION						\neg				
Name of Facility Where	Abatement is T	Taking Place	(3)				Type of Facility (4)									
	Residentia	al-Summ	er Co	ottage)		School (K-1									
Street Address							Subchapter Other (i.e., p	8 (Other than K- private & commer)	12) cial build	lings,						
City (5)							Square Feet	dg. Age								
	Ches	ster, NJ (7930)			1000	1	_ _	95	+/-					
County (6)						7) (STATE	Current Use (P	rior if being demo		- 17 7						
N	Morris			USE	ONLY)			Residentia	al							
Name of Monitoring Firm	n Hired by Build	ding Owner	T	ASCM	No.	Name of Abater										
(8)	MECS					ices, Inc.										
Street Address						Street Address		3ox 322								
	PO Box	341														
City, State, Zip Code																
C:	rosswicks,	NJ 0851.	5				Allentow	n, NJ 08501								
Project Manager for Mo	nitoring Firm			phone		Telephone No.		License Ne-	2000 PROC							
Bill We	eisgarber		(60	9) 29	8-4070	(609) 2.	59-9688		00493	3						
Start Date (10)	15	Scheduled C	omple	tion Da	te (11)	Name of OSHA										
6/16/16			7/1/1	6			M	ECS								
Occupancy Status Duri	ng Abatement	(Check only	one)			Street Address										
☐ Facility Closed/Vaca							PO F	30x 341								
Abatement Performe	12		ty Hou	rs	0	City, State, Zip 0										
Other - Describe:	8am to 4pr	n			-		Crosswic	ks, NJ 08515								
Scope of Work (Check	all that apply)					F. F Co	ntainment with No	active Pressure								
≤ ≥3 sf or ≥3 lf		⊠ Re	enovati	ion			ntainment with Ne closure	galive Flessure								
≥160 sf or ≥260 lf			emolitic			Gloveb	bag Procedure xempted (*) and Non-Friable Procedure									
	111-122	la la	Locatio			Non-Ex	empted (*) and No	on-Friable Proced		-						
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	omally						'	bater, Typ						
Location			d Solel ntenan	y by		Description of		A 4	-							
Asbestos-Containing TO BE ABA			ntenan ustodia			tos Containing Ma thermal systems		Amount (Specify	ا		Enc	Ш				
IN Facilit			Staff?		(1.5.)	surfacing, VAT	, or	SF or LF)	Removal	Repair	Encapsulate	Enclosure				
(13)			(12)			other miscellane	ous)		oval	air	ulat	sure				
		Yes	No	N/A							æ					
Basem	ent		×		Th	ermal Pipe In		60 lf	×							
Basem	ent		X			Boiler Insul	ation	20 sf								
												\Box				
Name of Registered Wa	aste Hauler		IN	JDEP '	Waste	Cubic Yards	Name of Reg	istered Landfill				-				
Stevens Environ		vices Inc	, +	lauler II	0 No. 292	of Waste 2 CU		GROWS La	andfill							
City- State	incitud DOI	, 1005, 1110	<u>- -</u>	104	272	Disposal Date	City, State	SICO III D			_	=				
Oity, Otato	Allentow	m NI				7/11/16 /	10/	Morrisville	PA							
Completed By	Anchow	Title		-		Signature	7 #	Date	, 111			_				
Mahlon E. St	evens	12.000	rojec	t Mar	nager	114	1	6/7/16								
			0,00	- 1.1001												

ASB-41 MAR 00

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

CK#25/80

Date of Notification (1)	6/6/16			Name	of Building	Owner/Operator	(2) Lorenz	2. JUN	9	201	0	T		
Agencies Notified	Type Notifica	tion	+	Street	Address			ASBESTO	S CO ENSI	NTF	ROL	&		
EPA DEP DOL	Initial Amended Amendme		.	City, S	tate, Zip C		nnington, NJ		10. 11	347				
DOH DCA	☐ Emergence justification ☐ Cancellation	on)	t	Name	of Contact			Telephone Numb	er		3			
				FAC		ORMATION			_			_		
Name of Facility Where		aking Place esidentia		=	•		Type of Facility							
Street Address							Subchapter	8 (Other than K-12 private & commercia	i) al build	lings,				
City (5)	Di	oton NII	005	2.4			# of Floors	Bldg. Age 65+/-						
County (6)		gton, NJ	085	Coun	ty Code (7	7) (STATE	2500 Current Use (P	rior if being demolis	hed)	03	1 / -	-		
	Mercer				ONLY)	NI of Abstor	Residential	idential						
Name of Monitoring Firm (8)	n Hired by Build MECS	ing Owner		ASCM	No.		nent Contractor (9	mental Service	es. In	c.				
Street Address		241	_			Street Address	Box 322	vices, me.						
City, State, Zip Code	PO Box	341							-					
	rosswicks, l	NJ 08515	5			City, State, Zip (n, NJ 08501				_		
Project Manager for Mc	onitoring Firm eisgarber		10000	phone I	No. 8-4070	Telephone No.	59-9688	License No.	0493	}				
Start Date (10)		Scheduled C	_			Name of OSHA			0172			=		
6/27/16			/15/	16			M	TECS						
Occupancy Status Duri	. 171	Z		ment		Street Address	PO I	Box 341						
☐ Abatement Performe ☑ Other - Describe:	ed Outside of No	ormal Facilit				City, State, Zip (Code	ks, NJ 08515				_		
Scope of Work (Check	all that apply)					2 5.11 0.	ontainment with Ne	N SCI						
≥3 sf or ≥3 lf = ≥160 sf or ≥260 lf			novat molitic			☐ Mini-Er ☐ Gloveb	nclosure pag Procedure	on-Friable Procedu	re					
			ocatio						Abatement Type					
Location	31577.03	Used	ormally Solel ntenar	y by	Anhon	Description of tos Containing Ma		Amount		. , , ,				
Asbestos-Containing TO BE ABA	ATED	C	ustodia Staff?	3.77.17.14.11		thermal systems surfacing, VAT	insulation,	(Specify SF or LF)	Rer	Re	Enca	Enc		
IN Facili	ty		(12)			other miscellane	eous)	or or Er y	Removal	Repair	Encapsulate	Enclosure		
		Yes	No	N/A							е			
Atti	c	_	×			Vermicul	ite	850 sf	×					
		-							+					
		-							+					
Name of Registered Wa		JUDEP V		Cubic Yards	Name of Reg	istered Landfill								
Stevens Environ	mental Serv	rices, Inc	_ '	lauler ID	292	of Waste 8 CU		GROWS Lar	dfill					
City , State	Allentow	n NI				Disposal Date 7/15/16/1	City, State	/ Morrisville,	РА					
Completed By	Anemow	Title		CORP. 49-		Signature	7/	Date				_		
Mahlon E. St	evens	P	rojec	t Mar	nager	_//			6/6	/16		_		

CK#25/82

Date of Notification (1)	/7/16		Name of Building Owner/Operator (2) Roosevelt Public Schools														
Agencies Notified	Type Notification			Street	Address		2	A School	Lane ASLI	ESTOS			DL 8	i.			
DEP DOL	Initial Amended Amendment #_			City, St	ate, Zip C	ode		osevelt, N.	17 TH VALUE OF THE PARTY NO.	Companies de la companie de la compa		-		=			
☑ DOH □ DCA	☐ Emergency (in justification) ☐ Cancellation	cluding	-	Name	of Contact		chols - Arc			one Numbe	er			\exists			
			-	FAC	ILITY INF								=	=			
Name of Facility Where								Type of Faci	lity (4)					\neg			
Street Address	Roosevelt F	ublic	Sch	ool				School (K-12) Subchapter 8 (Other than K-12)									
Sileet Address	2A Sch	ool L	ane			Other (i.e., private & commercial bu homes, etc.)											
City (5)	Roosevel	NI	0855	5				Square Feet 15000					. Age 85+/-				
County (6)		, 113	0033	Coun	ty Code (7	r) (S	TATE	Current Use	(Prior if bein	g demolisi	ned)	00		=			
Name of Monitoring Firm	nmouth	Owner	_	ASCM I	-	Nan	ne of Abatem	ent Contractor	(9)					=			
	ental Connection							ens Enviro		Service	s, In	c.		_			
Street Address	20 M. Waman S				Stre	eet Address	DC.	Boy 322)								
City, State, Zip Code	20 N. Warren S				City	, State, Zip C	PO Box 322										
	Trenton, NJ 08						Allentown, NJ 08501										
Project Manager for Mo	27.77	phone I	\$25 Y.S	Tele	ephone No. (609) 25	0.0688	Licen	se N o.	0493								
Steve Start Date (10)	Fairess Scher	duled C	_	tion Dat	2-4200 re (11)		- 01	0475			=						
6/20/16	Conce		7/1/1				ne of OSHA N		MECS					_			
Occupancy Status Duri				01	Street Address PO Box 341												
						City	, State, Zip C		BOX 34	l .				_			
Other - Describe:	outside of Norma	i i dollit	y i loui			City	, State, Zip C		icks, NJ (08515				_			
Scope of Work (Check 23 sf or 23 lf 2160 sf or 2260 lf	all that apply)		enovati emolitic		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure												
		ls l	Locatio	n			Non-Exe	empted (*) and	Non-Friable	Procedur	Abatement						
Location	of		ormally Solel			ī	Description of				Туре						
Asbestos-Containing TO BE ABA IN Facilit	Material (ACM)	Mair Cr	ntenan ustodia Staff?	ce/		tos C therr sui	ontaining Mat nal systems i rfacing, VAT,	erial (ACM) nsulation, or	Amo (Spe SF or	ecify	Removal	Repair	Encapsulate	Enclosure			
(13)		Yes	(12) No	N/A		Otne	er miscellaned	ous)			val	Ŧ	ulate	ure			
Room1 a	and 8		×				VAT		133	5 sf _	×						
Rooms 2,3			X				Mastic		_ 210	0 sf_	×						
									_								
				JDEP \	Mosto	Cul	oic Yards	I Name of B	egistered La	andfill							
Name of Registered War		s, Inc	l F	lauler ID		10.000	Naste 6 CU	Name of the		WS Lan	dfill						
City, State							posal Date	City, State	/ Marr	iez/illa	DΛ						
Completed By	Allentown, 1			7/1/16 Morris				Date	Date								
Mahlon E. St	evens	rojec	t Mar	ager	_	////	1/			6/7	/16		_				

Name of Building Comers Street & Coreas City, State Zip Copp WSTETELY Name of Contact ERIN BI FAGILITY INFORMA ce (3)	BELFI N.7 070 ELF) TYPE of Facility 14 School 1K-13	alephone Nunu		CON	201 VTF IG
Street Acress Oily, State Zip Copt WSTETELY INSTER BY FACILITY INFORMA	SELFI SUBSTITUTE Type of Facility (4) School K-12 Subchapter Other (i.e., p) etc.)	Telephone Numi	LICEN	CON	VTF
Oly, State Zip Codd WESTETELS Name of Confact END BI FACILITY INFORMA	TYPE of Facility (4	Telephone Numi	LICEN	CON	JTF IG
Name of Contact FRN BO FACILITY INFORMA	TYPE of Facility (4	Telephone Numi	LICEN	CON	VTF IG
ERN BI	TION Type of Facility (4 School (K-1) Subchapter (EX) Other (n.e. prote))) Other than K-12		ALIEN AMARIAN	
FACILITY INFORMA	TFON Type of Facility (4 School (K-1) Subchapter Other (i.e. p) etc.)	E) a vinskar (han K-17)	i maldinas h	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	School (K-1) Subchapter Diher (i.e. p) etc.)	E) a vinskar (han K-17)	i Freidings h		
	Subchabler Subchabler Subchabler Subchabler	a Managana Kali / i	l L'hieldinas h		
-design to the second s			a marine a	nomes	ł.
		T & cf Floors	Bidg. Ag		
	1356	2	+50	>	
1 County Chair 11	Current Use (Price	r if being damelish	ed)		
STATE USE ONLY	RESIDE	NTIAL	anne e e e e e e e e e e	and the second	_
er (8) SECAN NO	Name of Abatement Con	inc.			
	1 and the second	- 14		- Annual	
	185 Vreeiand Ave.			A-1 - 18-11-104	
- 11 may - 12 may - 1	City Share. Ziu Code				
	The second secon	Lizense N	E		
Taleptona No		50155			
hadried Completon Data (13)	Name of OSHA Monitor		- P San		
	Omega Environme	ntal Services			gradenia da i
	Street Address		4		
od of Abelement		<u> </u>			
Facility Hours	Hackensack, NJ 0	7635			· water
☑ Renovskon	Full Contents	ioni with Negative I	Pressure		
Demoktion .	Zinyahan Pro	reedure	***		
and the second s	L Non-Exemple	id (*) and Non-Engl			
la Location			Ta	yee	·
Used Solely by Aspenies	Containing Material (ACM)	Amount	1 -	9	m
Mannehallow (i.e. the	rmai systems insulation	Specify ST or LPs		SCIPO	ndosure
	nor suscellaneousi		By E	925	SOLUE
Yes No NA	ar mar reason the open or a subsequent			1 4	1
V Pipi	CONTRACTOR OF CO	45 LE			
	Taleptions No. heduled Completion Date (11) 6/36/16 hy One) of Abulement Facility Hours Renovshort Demoktort Is Location Normally Used Solety by Maintenance Custodial Staffs (12) of	Renovakon Demokrativ by Maintenance Custokial Normally Used Soletiv by Maintenance Custokial Staff* Renovakona Demokrativ by Maintenance Custokial Staff* (12) Renovakona Demokrativ by Maintenance Custokial Staff* Custokial Staff* (12) Renovakona Demokrativ by Maintenance Custokial Staff* (13) Renovakona Demokrativ by Maintenance Custokial Staff* (14) Renovakona Demokrativ by Maintenance Custokial Staff* (15) Renovakona Demokrativ by Maintenance Custokial Staff* (16) Renovakona Demokrativ by Maintenance Custokial Staff* (17) Renovakona Demokrativ by Maintenance Custokial Staff* (18) Renovakona Demokrativ by Maintenance	Name of Abatement Contractor (9) A MAC Contracting Inc. Street Address 185 Virestand Ave. Cky State. Zip Code Midland Park, NJ Telephone No. (201)262-5841 Sot 56 Name of OSHA Monitor Omega Environmental Services Street Address 220 Huyler St. Oity State Zip Code Hackensack, NJ 07605 Renovation Demolition Recovery Recovery Recovery Aspectos Containing Idaterial ACMit (Spapify Services) Services (12) Maintenance (Custodia State) Get thermal systems insulation (Spapify Services) Street Address 220 Huyler St. Oity State Zip Code Hackensack, NJ 07605	Name of Abatement Contractor (9) A MAC Contracting Inc. Street Address 185 Vicetand Ave. Cky State. Zip Code Midland Park, No. Talephane No. (201)262-5841 Ont 56 Name of OSHA Monitor Omega Environmental Services Street Address 280 Huyler St. Caty State. Zip Code Hackensack, NJ 07605 Renovation Demolition Renovation Demolition Recation Non-Exampled (1 and Non-Enable Procesor Non-Exampled (1	Name of Abatement Contractor (9) A MAC Contracting Inc. Street Address 186 Vicetand Ave. Cky State. Zip Code Midland Park, NJ Talephane No. [201)262-5841 [3016] Name of OSHA Monitor Omega Environmental Services Street Address 280 Huyler St. Ody State Zip Code Hackensack, NJ 07605 Renovation Demolition Renovation Renovation Demolition Renovation Renovation Demolition Renovation Non-Exampted (1) and Non-Enable Procedure Non-Exampted (1) and N

X 2211	1		CATION	ate of New Jers OF ASBESTOS to NJAC 8:60 at	ABATE			E	C	L	Ĭ.	/ E	1			
Date of Notification (1) 6/6/16				f Building Owner Breenwich Tw			tion									
Agencies Notified Type Notification EPA Initial			Street A 559 Ki	^{ddress} ngs Highway	9				JUN		20	16	1	- 1		
DEP Amended DOL Amendment #				ite, Zip Code ton NJ 08056	5		1	ASBE	ESTO	S C			. &			
Emergency (i justification)	ncluding			f Contact			-	Tele	ephone							
DCA Cancellation				ry Wilson				E								
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	LITY INFORMA	TION	Type of Facility (4)										
John Berkley Library						School (K-12)										
Street Address 559 Kings Highway						Subch	napter 8 (i.e. pri			K-12) mercial buildings, homes,						
City (5) Mickleton, NJ 08056				BG		Square Fe 10000	et	# of 2	Floors	65	Bldg. Age 41					
County (6) Grouster				Code (7) USE ONLY)		Current Use (Prior if being dem Abandoned					olished)					
Name of Monitoring Firm Hired by Building C Epic Environmental	wner (8)		ASCN	/I No.	25/25/25/25	Name of Abatement Contractor (9) Yannuzzi Environmental						1711				
Street Address 1930 Brown Rd					eet Address 85 Kinnelon Rd Suite 102											
City, State, Zip Code Newfield, NJ 08344					State, Zip Co											
Project Manager for Monitoring Firm James Eberts		Telepho	ne No. 05-1077		hone No. 201-0880			Licens 0122		ı.						
	Schedule 6/28/16		npletion	Date (11)	11.00	of OSHA M										
Occupancy Status During Abatement (Check	Only Or	ne)			Address Kinnelon F		e 10	12								
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of / al Facility	Abatem / Hours	nent		City, S	State, Zip Co lelon, NJ (de			1						
Scope of Work (Check All That Apply)					1300	101011, 140 0	77 400			-						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit	The state of the s			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure										
	Is	Locati	on						9	Abate		t				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma	Normal ed Sole intenar todial S (12)	ly by nce/	Asbestos Co (i.e. therm sur	al system facing, VA	Material (ACI is insulation, AT, or	M)	(S	mount Specify or LF)		Remova	Ty Repair	Encapsulate	Enclosure		
(13)	Yes	No	N/A	otnei	miscella	neous)					val	air 	ulate	ure		
exterior windows			Х	wi	ndow ca	aulk		4	80 If) If						
1st floor kitchenette&basement rm#			X		VAT			9:	27 sf		х					
							_		11							
Name of Registered Waste Hauler		100000	JDEP W		c Yards	Nai	me of R	egiste	red Lar	ndfill						
Yannuzzi Group		273.13	auler ID 7467	40	aste	Gr										
City, State Kinnelon NJ				Disp 6/28	ate City, State Morrisville, Pa											
Completed by John Mucha	Title Sr pr	oject	mang.		e //		Date 6/6/16									

State of New Jersey



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

0.				(Pur	rsuant	t to NJA	C 8:60 and 5:16	5)	B P B I	7.//	E	-	1			
Date of Notification (1)					Name	of Building	Owner/Operator (2	2)	15 6 15 1	V	5					
06 /	07 /	16		Borough of Elmwood Park												
Agencies Notified	Type Notificat	tion		\dashv	Street	Address			JUN 9	2016		U)				
⊠ EPA					182	Market S	Street		0011							
□ DOLWD	☐ Amended			t	City, S	tate, Zip C	Code			I TOTAL C	1		1			
☑ DOH	Amendme		-				ark, NJ 07407	ASSESTOS CONTROL &								
DCA (NJAC 5:23-8)	☐ Emergenc justificatio	y (includ n)	ing	-		of Contac		Telephone Number								
(140/10/03.25-0)	☐ Cancellation				Nor	dan Mur	phy	16 19								
		Er.		-	FAC	ILITY IN	FORMATION	-				- 0				
Name of Facility Where	Abatement is Ta	aking Pla	ce (3)	- 1	125		Type of Facility (4)							
Commercial Build	ling							School (K-12)								
Street Address		2:		73	#1		1	 ☐ Subchapter 8 (Other than K-12) ☑ Other (i.e., private and commercial buildings, 								
150 Van Riper Ave	enue							homes, etc.)								
City (5)					die e	: A	es to	Square Feet	# of Floors	Blo	dg. Ag	ge				
Elmwood Park, N.	J 07407			-		9. 2	70 (1,-		3				
County (6)					Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish							
Bergen	8 8	0. 7. 7.			<u></u>		1.0		370 14 10/2	1 N N N N N N N N N N N N N N N N N N N						
Name of Monitoring Fire		ing Own	er (8) 1	ASCM	No.	The state of the s	ent Contractor (9)								
Bio Terra Solution	1S			- 1	100			NAGEMENT LI	_6	1	14	-	16.			
Street Address							Street Address 27 Outwater Lane									
P.O. Box 1224				- 65								374	-			
City, State, Zip Code			-				City, State, Zip C Garfield, NJ									
Union, NJ Project Manager for Mo	nitorina Firm		- 1	Tolo	phone l	No	Telephone No.	07020	License No.			10,1	- 7			
Rick Eustaquio	niitoning Film	5 E.	-		3-494		973-928-4888		1188							
Start Date (10)	İs	cheduled	1.00				Name of OSHA N		1100							
06 / 21	/ 16	07	1		/			NAGEMENT L	_c							
Occupancy Status Duri			ly or	- "			Street Address	1			-					
☐ Facility Closed/Vaca	5555 NA 0		0.0		ment		27 Outwater	Lane					•			
☐ Abatement Perform						cribe	City, State, Zip C						,			
Time of Abatement:	AM	PM/		PM-		AM	Garfield, NJ									
Scope of Work (Check	all that apply)								2 4 7.		8		140			
			-			#1 #1 84		tainment with Neg	ative Pressure			(0)				
☐ ≥3 sf or ≥3 lf ☐ >160 sf or >260 lf			Ren	ovati	on on		☐ Mini-End	g Procedure								
						W			n-Friable Procedur	e .						
				_ocat						Ab	atem	ent T	ype			
Location Asbestos-Containin		, ,		orma I Sole	ely by	Ashe	Description of estos Containing Ma		Amount	Re	Re	m	En			
TO BE A				ntena			e., thermal systems	insulation,	(Specify	Removal	Repair	caps	Enclosure			
IN Fac (13			usic	(12)	Staff?		surfacing, VAT other miscellane		SF or LF)	8		Encapsulate	ure			
(13)	Y	es	No	N/A		outer misocilarie	,000				e				
Office						VAT	1		100 SF							
Roof			1	П		Unsafe	to be removed	mechanically	4,700 SF							
								-			П	П	T			
			-							17						
			1	Ц.	ПС22:	0/	LOuble Variant	None of Davis	stored Landell							
Name of Registered W	aste Hauler			100	IJDEP \ lauler II		Cubic Yards of Waste	Name of Regis								
Newark Carting					04509		As Needed	The server street and the server were a								
City, State							Disposal Date	City, State	DA.							
Newark, NJ							TBD	Bethlehem	8		-	/				
Completed By (Print or	Type)	Title	200				Signature		Da	ite /	2/	11				
Allen Monchik Project					ager					1 0	11	16	7			

Date of Notification (1) 6/3/2016		*******			Building Owlington, LL		rator	(2)		JUN	9 2	016		卅			
	ype Notification		1 2	Street Ad	Idress orth Arlingt	ton		-		3014				1			
EPA DEP DOL	Initial Amended Amendment			City, Stat	te, Zip Code range, NJ			Salah Maria yana	ASB	EST(OS CON CENSIN	TROL G	<u>&</u>				
M DOH DCA	Emergency (i justification) Cancellation		١	Name of	Contact			Telephone Number									
	_ Cancellation				ITY INFORI	MATION	1										
Name of Facility Where Aba Residential Street Address	atement is Taking	Place (3)		1 AOIL	- ITT INI OK			Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)									
								Other (i.e. private & commercial buildings etc.)							s,		
City (5) East Orange								Square Feet 200LF			Floors	BI	dg. A	ge			
County (6) Essex				County C	Code (7) ISE ONLY)			Current Use (Prior if being demolished)									
Name of Monitoring Firm H	ired by Building C	wner (8)		ASCM	l No.	(Optin	ame of Abatement Contractor (9) Optimum Environmental Solutions, LLC									
Street Address						200		Addres Linw	ss ood Road								
City, State, Zip Code							City, State, Zip Code Union, NJ 07083										
Project Manager for Monito		Γelephor	ne No.	59		none N 418-2			License 1								
Start Date (10)	,	Schedule 2	d Com	pletion [1	N	Name	of OSI	HA Monitor								
Occupancy Status During A	Abatement (Check	Only One	_		. *	S	Street	Addres	SS								
Facility Closed/Vacate Abatement Performed Other – Describe:									, State, Zip Code								
Scope of Work (Check All 7	That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti	lition I					Full Containment with Negative Pres Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable								
		10000	ocati	5010								Abatement Type					
Location o			ormall Solel		Asbestos		ription		I (ACM)	٨	mount		ĺ				
Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	ED		ntenar odial S (12) No	147770000000000000000000000000000000000	(i.e. th	ermal sy surfacin other mis	stems	s insula T, or		(8	Specify F or LF)	Removal	Repair	Encapsulate	Enclosure		
Boiler Roo	.m	1 11 11	10072	X		Pipe Ir	neula	ation		2	00LF	x					
Bollel Noc	лп			^		i ipe ii	ISUIC	111011			0021						
Name of Registered Waste TRISTATE	Hauler		Н	JDEP W auler ID 9551		Cubic Ya of Waste			Minerva		ered Landf dfill	Ш					
City, State 1199 Randall Avenue,	Disposal Date City, State Waynesburg																
Completed by Emmanuel Chiobi		Title Opera	ations	s Mana	iger	1 /7	náture mul	e Mi	Q c	li		oate 6/3/201	16				