(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) JUN 29 2017 Division of Property Management and Construction 06 02 Agencies Notified Type Notification Street Address **⊠** EPA ✓ Initial ASBESTOS CONTROL 20 W. State Street, 3rd Floor ☑ DOLWD ☐ Amended City, State, Zip Code **⊠** DOH Amendment #_ Trenton, NJ 08608 ☐ DCA ☐ Emergency (including Name of Contact Telei hone Number (NJAC 5:23-8) justification) ☐ Cancellation Rick Ferrera **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Commercial Subchapter 8 (Other than K-12) Street Address ☑ Other (i.e., private and commercial buildings, 152 Fostertown Road homes, etc.) City (5) Square Feet # o Floors Bldg. Age Lumberton, NJ County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Burlington Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Bio Terra Solutions** ALL PRO MANAGEMENT LLC Street Address Street Address P.O. Box 1224 27 Outwater Lane City, State, Zip Code City, State, Zip Code Union, NJ Garfield, NJ 07026 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. Rick Estaquio 973-494-3762 973-928-4888 1188 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06 / 12 / 17 07 / 12 / 17 ALL PRO MANAGEMENT LLC Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__AM Garfield, NJ 07026 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Renovation ☐ Demolition $\square \ge 3$ sf or ≥ 3 If ≥160 sf or ≥260 lf ☐ Glovebag Procedure Non-Exempted (*) and Non-Fria le Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Remova Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) mount Maintenance/ (i.e., thermal systems insulation, Specify TO BE ABATED **Custodial Staff?** surfacing, VAT, or SF or LF) IN Facility (12)(13)other miscellaneous) Yes No N/A Throughout X Transite Siding, Shingles 6 CY X X Farm House-Bldg, 13-Basement Transite Panel 4 SF X Building 9 M Tar paper and debris 2.000 SF M П П X Window Caulking 200 LF Buildings 9,11,12,13 Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste IESI Bethlehem Landfill All Pro Management, LLC As Needed 0034860 City, State City, State Disposal Date TBD Bethlehem, PA Garfield, NJ Date /2/17 Completed By (Print or Type) Title Signature Zvonko Veskov President

STATE OF NEW JETSEY
NOTIFICATION OF ASBESTOS ABATEMENT

ASB-41 JAN 13

State of New Jersey

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152 Fostertown Roa	d- Buildi	ng 13						homes, etc.)		a			0,	
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Bio Terra Solutions							ALL PRO MA	NAGEMENT LL	C					
Street Address							Street Address							
P.O. Box 1224							27 Outwater	Lane						
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Union, NJ							Garfield, NJ	07026						
Project Manager for Monit	oring Firm			Tele	phone	No.	Telephone No.		L	ense No.		Sec. 10		-
Rick Estaquio				97	3-494	-3762	973-928-4888			1188				
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ASB-41 **JAN 13**

City, State

Garfield, NJ

Allen Monchik

All Pro Management, LLC

Completed By (Print or Type)

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

Waste

TBD

As Needed Disposal Date

Signature

IESI Bethleherr Landfill

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City, State

Bethlehem, PA

Hauler ID No.

0034860

Title

Project Manager

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Name of Facility Where Ab	atomont is Tol	ina Dia	(2)	F	ACILITY	NFORMATION					
Former Pharmaceuti			ice (3)				Type of Facility (
Street Address	cai building						School (K-12) Subchapter 8		2)		
700 Union Blvd.							Other (i.e., pri	va e and comme	ercial bu	ildings,	
City (5)							homes, etc.)			87386	
Totowa, NJ 07512							Square Feet	i of Floors	Blo	lg. Age	
County (6)											
Passaic				Co	unty Code (7)(STATE USE ONLY)	Current Use (Prio		shed)		
			121			-	Private Build	in 3			
Name of Monitoring Firm H Detail Associates, Inc		g Owne	r (8)	ASC	И No.	Name of Abateme					
Street Address	.					AbateTech, In	ıc.				
300 Grand Avenue						Street Address					
City, State, Zip Code						30 Maple Ave					
Englewood, NJ 07631						City, State, Zip Co					
						Lumberton, N	J 08048				
Project Manager for Monitor Stephen Jaraczewski	CONTRACTOR DE NOTE			ephone		Telephone No.		L cense No.			
Start Date (10)					9-6708	609-265-2107		00529			
6 /19 /					ate (11) 17	Name of OSHA M	TO CONTROL I				
Occupancy Status During Al						EMSL Analyti	cai		_		
Facility Closed/Vacated [Street Address					
Abatement Performed Ou	utside of Norma	ellou ol al Facili	ty Hou	ment rs - Do	scriba	200 Route 130					
Time of Abatement:	AMF	PM/	PM-		_AM	City, State, Zip Co					
Scope of Work (Check all that	at apply)					Cinnaminson,	NJ 00077	_			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			enovati emolitio						°e		
		Is	Locat	ion					_	ement	Type
Location of			Norma ed Sole			Description of					1
Asbestos-Containing Mat TO BE ABATE	enal (ACM)		intena		Asbes	stos Containing Mate , thermal systems in	erial (ACM)	Amount	(em	Encaps	incl
IN Facility	_	Cus	todial	Staff?	(1.6.	surfacing, VAT, o		(Specify 3F or LF)	Removal	ajr	Enclosure
(13)		Ver	(12)	T	-	other miscellaneou			-	Encapsulate Repair	Ğ.
lallway		Yes	No	N/A	Pipe Ins	ulation		20015			
st Floor Mechanical Roo	om				Tank Ins			900 LF			
Office attached to Atriun					Plaster (250 SF			
					i laster (Sening		300 SF		井분	뷤
ame of Registered Waste H	anler		N	JDEP V	Nacto	Cubic Yards of	Name of Besister	-4 4611			
Service Transport			1000000	aulerTE		Waste	Name of Register				
ity, State)		\angle	20990		40	G.R.O.W.S. L	ar umii			
New Castle, DE			1			Disposal Date	City, State				
						7/31/17	Tullytown, PA	1			
Ompleted By (Print or Type)	Title				- NAME OF THE OWNER	Signature	11/	Dat	e 1 3	21	\Box
Gwendolyn Trumbetti	0	perati	ons C	oordi	nator	Ur	VIVI	(2/23	2/17	1
3-41						- 11	B B/ S B				

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

MAY 11

Date of Notification (1)		-		-	Nam	o of Buildin	20.0	wner/Operator	(2)	1	1				111
	22 /	17						Johnson Hos	pital / Job	#17 1	6-5172 Ch	2 9 eck #	9281	7	
Agencies Notified	Type Notific	cation	-		Stree	et Address			1		LOD INCOME	200	2 7-7-7-	0.	1
⊠ EPA	☑ Initial				10	ne Robert	W	ood Johnson	Place		ASBESTO:	S UC ENSI		UL.	č
☑ DOLWD	Amende				City,	State, Zip	Cod	e			1,77,71	33.031	17.	W-07 1/4000	-
☐ DCA	Amenda			-	Ne	w Bruns	wic	k, NJ 08901							
(NJAC 5:23-8)			ciuuii	g	Nam	e of Contac	ct			Те	ephone Numb	per			
	☐ Cancella	1000			Ma	ırk Lamb	din			- 			_		
					FA	CILITY IN	NFO	RMATION		-					
Name of Facility Where A	batement is	Taking	Plac	e (3)					Type of Facility (4)					
Robert Wood Johns	son Hospit	al-Pe	ntho	use					School (K-12						
Street Address						79,000,0100			Subchapter 8 Other (i.e., pr				ildina	9	
One Robert Wood J	lohnson Pl	ace							homes, etc.)	ivatt	and common	olai be	mun igi	,	
City (5)									Square Feet	#	of Floors	BI	dg. Ag	je	
New Brunswick															
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Prid	or if	eing demolis	hed)			
Middlesex									Hospital						
Name of Monitoring Firm	Hired by Buil	ding O	wner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9)						
Omega Environmen	ital							AbateTech, Ir	nc.						
Street Address							Sti	reet Address							
280 Huylar Street							:	30 Maple Ave	. PO Box 25						
City, State, Zip Code				711-			Cit	ty, State, Zip Co	ode						
South Hackensack,	NJ 07606						11500000	Lumberton, N							
Project Manager for Monit	oring Firm			Tele	ephone	No.	Te	lephone No.		Li	ense No.				
Geiser Fajardo				2	01-489	-8700	6	609-265-2107)0529				
Start Date (10)	5	Schedu	uled C	omple	tion Da	te (11)	Na	me of OSHA M	onitor						
6 /24 /	17	6	/	24	1_/	17	E	EMSL Analyti	cal						
Occupancy Status During	Abatement (Check	only o	ne)			Str	eet Address						11.551	
☐ Facility Closed/Vacated					ment		2	200 Route 130	0 North						
Abatement Performed	Outside of No	ormal I	Facility			cribe	77.5	y, State, Zip Co		_	-				-
Time of Abatement:				_PM-		AM		Cinnaminson							
Scope of Work (Check all		ON	المسالي	Mi	7) 7)				,	_	-			-	-
	-11 77				Lear				ainment with Nega	ative	Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			⊠ Re ☐ De					☐ Mini-Encl							
		,		monuc) I I				npted (*) and Non	-Fria	ble Procedure	9			
			Is	Locat	ion	I						Ab	ateme	nt Ty	ре
Location o				lorma d Sole				Description of				_			
Asbestos-Containing M TO BE ABAT)		intena				Containing Mat ermal systems in			Amount Specify	Remova	Repair	nca	nclo
IN Facility			Cust		Staff?	(1.6.		surfacing, VAT,			F or LF)	oval	=	Encapsulate	Enclosure
(13)		-		(12)	1			her miscellaned						late	е
			Yes	No	N/A										
10th Floor Mechanical	Space		\boxtimes			Vibratio	n C	ollars			60 SF				
Name of Registered Waste	Hauler			N	JDEP V	Vaste	Cut	oic Yards of	Name of Registe	ered	Landfill				
AbateTech, Inc.				Н	auler IC 18750	A. C.	Wa	ste 2	G.R.O.W.S.	Lar	dfill				
City, State					10/50			posal Date	City, State						\neg
Lumberton, NJ								/24/17	Tullytown, F	PA					
Completed By (Print or Typ	e)	Title			1.4.11.6			Signature			Dat	е	772 (200 (20) 7724		
Gwendolyn Trumbett	99.		erati	ons (Coordi	nator		IN	nA				12/	17	
		7.5						I VAI	. V 1			10	. 0 1	1 /	

ASB-41 MAY 11

Data af N. 85 - 8 - 60										111			5.25			
Date of Notification (1) 6 /	22	, .	17		- 11	me of Buildi			127 (127)			JUN			2017	
						heck#		PG	c/o Hampshi	re C	cmpan	ies /	Jol	b #1	704	-514
Agencies Notified EPA	Type Not Initial	ificatio	n			eet Address 2 Maple A				Ĵ	ASB	ESTO		CON ISIN		OL 8
☑ DOLWD						, State, Zip				0.74		to 1 h	Marie II			e
☑ DHSS	Amen					orristown		0								
☐ DCA (NJAC 5:23-8)	☐ Emergi justific	gency (includ	ing	-	ne of Conta				To	le phone	Niconalaa				
(11110 0.20 0)	☐ Cance					oon Lee				-		Numbe	· C			
						ACILITY II	VEORMAT	TION		_	-		-	-		
Name of Facility Where A	batement i	is Takir	ng Pla	ce (3)	•	/ CILIT I	ti Oldina	ION	Type of Facility	(4)						_
Former Pharmaceut	ical Build	ding		:8 50					School (K-12	6.4000						
Street Address									☐ Subchapter	8 (Oth	or than	K-12)	4207	1000		
700 Union Blvd.									Other (i.e., p		ind cor	nmercia	al bu	uildin	gs,	
City (5)			,						Square Feet	10000	Floors	3	BI	dg. A	ae	
Totowa, NJ 07512														-5	3-	
County (6)					Co	unty Code (7)(STATE USE	E ONLY)	Current Use (Pr	ior if b	ing de	molishe	d)			
Passaic									Private Buil	ding						
Name of Monitoring Firm H		uilding	Owne	r (8)	ASCI	И No.	Name of	Abateme	ent Contractor (9)							
Detail Associates, In	ic.				16-	0085	Abate [*]	Tech, I	nc.							
Street Address							Street Ad	dress			-					
300 Grand Avenue							30 Map	ole Ave	e. PO Box 25							
City, State, Zip Code							City, State	e, Zip Co	ode							
Englewood, NJ 0763							Lumbe	erton, N	IJ 08048							
Project Manager for Monito					ephone		Telephone	e No.		Lic	nse No	ο.				
Stephen Jaraczewsk				- 20		9-6708	609-26	5-2107		1)529					
Start Date (10)	7777					ate (11)	Name of C		22.00							
6/19/					1_/	17	EMSL.	Analyti	cal							
Occupancy Status During A							Street Add	iress								
□ Facility Closed/Vacated □ Abatement Performed O	During En	tire Pe	riod of	Abate	ment		200 Ro	-0. 50 mm. 24								
Time of Abatement:	AM	PI	A/	PM	- De	AM	City, State									
Scope of Work (Check all th							Cinnan	ninson	, NJ 08077							
	iat apply)						ПЕ	ull Conta	ainment with Nega	ative	F essure	ē.				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			= -	enovat			\boxtimes M	ini-Encl	osure		- Joodin					
△ _ 100 01 01 <u>- 2</u> 00 11				emolitio	П		⊠G ⊠N	iovebag on-Exer	Procedure npted (*) and Non	-Frial	e Proce	edure				
			ls	Locat	ion								Aha	ateme	ent T	vne
Location of				Norma				iption of								1
Asbestos-Containing Ma TO BE ABATE		v1)	Ma	aintena	nce/		tos Contain thermal sy		erial (ACM)		A nount Specify	2	Ramoval	Repair	nca	nclo
IN Facility			Cus	todial	Staff?	(surfacing	g, VAT,	or		F or LF)	2	2	=	Encapsulate	Enclosure
(13)			Yes	(12) No	N/A	1	other mise	cellaneo	us)						late	е
Throughout			2000	1000000	100-000	l eu					-			_		
Atrium Area						Elbows				1,0	0 tota	-				
st Floor						Plaster				5,	(00 SF					
)							ayer Floo			7,	10 SF					
nd Floor						L	ayer Floo	or tile 8			875 SF					
ame of Registered Waste H AbateTech, Inc.	Hauler			135,865	JDEP \ auler [Cubic Yard Waste	s of	Name of Registe							
				3	18750		40		G.R.O.W.S.	Land	f ill					
ity, State							Disposal Da	ate	City, State							
Lumberton, NJ							7/31/17		Tullytown, F	PA						
ompleted By (Print or Type))	Title				P 10007	Signat	ure	4			Date	i	33 0		7
Gwendolyn Trumbetti		Op	erati	ons C	oordi	nator	(MV	NI			10	1	从	11	

ASB-41 MAY 11

5 / // // //										. 1111	2	9 20	117
Date of Notification (1) 6 /22	_ /	17		F	ne of Buildi IPF VII G 2 of 2	ng Owner/Operator 700 Union	(2) LLC/ Job) #	1704-5	141	Chec	k i	#9282
In the second se	Notification	on			et Address				AC	REST		SING	
⊠ EPA □ Ir				22	2 Maple A	ve.				- Inli	23 m i 11 1		
	mended mendmen	· #2		City	, State, Zip	Code							
	mergency	_	na	M	orristown	ı, NJ 07960							
	stification		ig	Nam	ne of Conta	ct		Tel	phone	Number			
	ancellation	1		Н	oon Lee					50 00 00 00 00 00 00 00 00 00 00 00 00 0			
				F	ACILITY II	NFORMATION		-					
Name of Facility Where Abatem	nent is Tak	ing Plac	e (3)				Type of Facility	(4)	A.C				
Former Pharmaceutical	Building						School (K-12						
Street Address							☐ Subchapter 8	(Oth					
700 Union Blvd.							Other (i.e., p homes, etc.)		and con	nmercial	buildi	ngs,	
City (5)					21 — 2-17/19/11		Square Feet		f Floors		Bldg.	Ane	
Totowa, NJ 07512							oquaio i ooc	"	1110010		Diag.	, igo	
County (6)				Cou	inty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if b	eing der	molished)	_	-
Passaic						***	Private Buil						
Name of Monitoring Firm Hired I	by Building	Owner	(8)	ASCN	1 No.	Name of Abateme	ent Contractor (9)						7 100
Detail Associates, Inc.						AbateTech, In	nc.						
Street Address						Street Address							
300 Grand Avenue						30 Maple Ave	. PO Box 25						
City, State, Zip Code						City, State, Zip Co							
Englewood, NJ 07631		2				Lumberton, N	IJ 08048						
Project Manager for Monitoring F	irm		Tel	ephone	No.	Telephone No.		Lic	ense No).			
Stephen Jaraczewski			2	01-569	9-6708	609-265-2107		154000	0529				
Start Date (10)	Sche	eduled (Comple	etion Da	ate (11)	Name of OSHA M	onitor						
6 / _19_ / _17					17	EMSL Analyti	cal						
Occupancy Status During Abater	ment (Che	ck only	one)			Street Address						3811 <u>-</u>	
☐ Facility Closed/Vacated Durin		11000		ment		200 Route 130	North						
☐ Abatement Performed Outside	e of Norma	al Facilit	y Hou	rs - Des	scribe	City, State, Zip Co			-				
Time of Abatement:Al	MF	PM/	PM		_AM	Cinnaminson							
Scope of Work (Check all that ap	olv)					- Chimanini Con	, 110 00077						
☐ >3 sf or >3 lf	F-37	⊠ Re	novat	ion		☐ Full Conta	ainment with Nega	ative	ressure	9			
≥160 sf or ≥260 lf		-	moliti				Procedure						
						Non-Exen	npted (*) and Non	-Fria	le Proce	edure			
l applies of		240	Loca							A	bater	nent T	уре
Location of Asbestos-Containing Material	(ACM)	1.0	d Sol	-	Ashes	Description of stos Containing Mat			mount	Re	Re	m	m
TO BE ABATED	V/		intena	nce/ Staff?		, thermal systems in	nsulation,	(Specify	Remova	Repair	cap	Enclosure
IN Facility (13)		Cus	(12)	Starr?		surfacing, VAT, other miscellaneo		S	or LF)	à		Encapsulate	sure
(10)		Yes	No	N/A		outer miscellaneo	us)					te	
Hallway					Pipe Ins	ulation			00 LF			П	
1st Floor Mechanical Room		П			Tank Ins	Sulation		-	50 SF				
Office attached to Atrium)		П		Plaster				00 SF		1		
			П	1	-								
Name of Registered Waste Haule	r	1-		JDEP V	Naste	Cubic Yards of	Name of Registe	ared I	andfill			1	
AbateTech, Inc.				auler ID		Waste	G.R.O.W.S.						
City, State				18750		Disposal Data							
Lumberton, NJ						Disposal Date 7/31/17	City, State Tullytown, F	ΡΑ					
Completed By (Print or Type)	Title	9					1 -			Doto			
Gwendolyn Trumbetti		e)perati	ons (Coordi	nator	Signature	MAT			Date	22	11/	7

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

ASB-41 MAY 11

Date of Notification (1)			_	Mar	no of Buildi	na Oumar/Onareta-	(2)		11131	9 13	201	
6/	22 /	17				ng Owner/Operator mmunications	(2) / Job #1704-	NO. NO.		2 9 30	201	1
Agencies Notified EPA	Type Notifica	tion			et Address 00 Greenv	vood Avenue		ASB	ESTO: LICE			ROL
☑ DOLWD ☑ DHSS	Amended Amendme	n+ #		City	, State, Zip	Code			1140-1140-1140-1140-1140-1140-1140-1140			
□ DCA	⊠ Emergenc		— DG	Je	enkintown	n, PA 19046						
(NJAC 5:23-8)	justification		ng	Nan	ne of Contac	ct	IT	lephone N	umber			
	Cancellation	*		A	lex Baylor	r	1	nepriorio 11				
		2002	-100			NFORMATION	<u> </u>			-		
Name of Facility Where Al	hatement is Ta	king Pla	na (3)	17	ACILITI II	VEORIVIATION	Tune of Facility (4)					
Verizon Spotswood		iking i iai	JC (J)				Type of Facility (4)					
Street Address							School (K-12) Subchapter 8 (O	her than K-	-12)			
461 Main Street							Other (i.e., prival homes, etc.)			ouildir	gs,	
City (5) Spotswood, NJ						2	Square Feet #	of Floors	E	Bldg. /	\ge	
County (6)			-	Cor	inty Code /7	7)(STATE USE ONLY)	Current Use (Prior if	being days	aliah ad\			
Middlesex					inty code (/)(STATE USE CIVET)	Offices	being dem	olisnea)			
Name of Monitoring Firm F	lired by Buildin	ng Owner	(8)	ASCN	1 No.	Name of Abateme	ent Contractor (9)					
TTI Environmental						AbateTech, In	ıc.					
Street Address		-				Street Address		_	-			
1253 North Church S	Street					30 Maple Ave	. PO Box 25					
City, State, Zip Code						City, State, Zip Co		-				
Moorestown, NJ 080	57					Lumberton, N						
Project Manager for Monito	ring Firm		Tele	phone	No.	Telephone No.		cense No.		-		
Harold Baldwin			1000		2-6742	609-265-2107	1	00529				
Start Date (10)	Sch	neduled (2000			Name of OSHA M						
6 /23 /					17	EMSL Analyti	5 45					
Occupancy Status During A	batement (Ch	eck only	one)			Street Address						
☐ Facility Closed/Vacated	During Entire I	Period of	Abate	ment		200 Route 130	North					
Abatement Performed O	utside of Norm	nal Facilit	y Hour	s - Des	scribe	City, State, Zip Co	de					
Time of Abatement:		PM/ <u>5</u> PM	- <u>1:30</u> /	MA		Cinnaminson,						
Scope of Work (Check all th	nat apply)		7-0-17-5			☐ Full Conts	ainment with Negative	Proceuro				
≥3 sf or ≥3 If ≥160 sf or ≥260 If			enovati emolitio				osure		dure			
		Is	Locati	on					At	atem	ent T	vpe
Location of			Normal ed Sole			Description of				_	_	1
Asbestos-Containing Ma TO BE ABATE			intena			tos Containing Mate , thermal systems in		Amount	Removal	Repair	nca	Enclosure
IN Facility	<u></u>	Cus	todial S	Staff?	(i.e.,	surfacing, VAT,	or	(Specify 3F or LF)	ova	=	nsd	nusc
(13)		Yes	(12) No	N/A	1	other miscellaneo					Encapsulate	9
st Floor Mechanical Ro	om	X			Pipe Elb	ow/Fittings		16 total		П	П	П
st Floor Mechanical Ro	om					n Dampler Insula	ation	18 SF				
										П	П	
lame of Registered Waste H	Hauler		N.	IDEP V	Vaste	Cubic Yards of	Name of Registered	Landfill			_	
AbateTech, Inc.				uler ID 18750		Waste 12	G.R.O.W.S. Lar					
ity, State				00		Disposal Date	City, State	-				
Lumberton, NJ						6/24/17	Tullytown, PA					
ompleted By (Print or Type)) Tit	tle				Signature	4		Date			
Gwendolyn Trumbetti		Operati	ons C	oordi	nator	(An	, +		6/2	211	1	
B-41		•			eronamerosonii.	MIY	11		010	11		

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

MAY 11

D . (N) (S			-		-									To the same of
Date of Notification (1) 6 /	27 /	_1	7		\$100000 NO.55		ng Owner/Operator wp. Public Schoo		-517	Check#	N 2	9 2 14	017	Parket
Agencies Notified ⊠ EPA	Type Notifi	ication	1		1	et Address 34 Millbur				ASBEST L	OS C			L &
⊠ DOLWD	☐ Amend		20		City	State, Zip	Code			THE OWNER OF THE OWNER	AND THE PERSON NAMED IN	SET CHEST OF	-	/ full - recommended
☑ DHSS	Amenda			_		illburn, N								
☐ DCA (NJAC 5:23-8)	☐ Emerge justifica		ncludir	ng		e of Conta	20-479 -340, 93000-0		Tol	phone Nur	nher			
(10/10 0.20 0)	☐ Cancell				33333333	rry Russ			101	priorie real	ilbei			
						7	NFORMATION							
Name of Facility Where A	batement is	Takin	g Plac	e (3)				Type of Facility	(4)					
Wyoming School								School (K-12						
Street Address			-				30	Subchapter						
55 Myrtle Ave.								Other (i.e., p		and comme	ercial b	uildin	gs,	
City (5)								Square Feet		f Floors	IB	ldg. A	ae	
Millburn, NJ 07041												3	3-	
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if b	ing demol	ished)			
Essex								School						
Name of Monitoring Firm I	Hired by Bui	Iding (Owner	(8)	ASCN	1 No.	Name of Abateme	ent Contractor (9))					
Whitman Companies	S						AbateTech, I	nc.						
Street Address							Street Address							
7 Pleasant Hill Road							30 Maple Ave	e. PO Box 25						
City, State, Zip Code							City, State, Zip Co			Married all and a				
Cranbury, NJ 08512							Lumberton, N							
Project Manager for Monito	oring Firm			Tel	ephone	No.	Telephone No.		Lic	ense No.				
Kevin Lovely				1		0-5858	609-265-2107		- 1	0529				
Start Date (10)		Sched	uled C	comple	etion Da	ate (11)	Name of OSHA M	lonitor						
7///	taraceura 100					17	EMSL Analyti	ical						
Occupancy Status During /	Abatement (Check	only	one)			Street Address							
☐ Facility Closed/Vacated	Principle of the Control of the Control of C				ment		200 Route 13	0 North						
☐ Abatement Performed C	Outside of N	ormal	Facilit	y Hou	rs - Des		City, State, Zip Co							
Time of Abatement:	AM	PN	Λ/	PM		_AM	Cinnaminson							
Scope of Work (Check all to	hat apply)				-			,		-			-	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	1. 32		⊠ Re	novat molitic			☐ Full Conta		ative	ressure				
805 IBS			Alternative of					mpted (*) and Nor	n-Fria	le Procedu	ıre			
				Local							Ab	atem	ent T	уре
Location of Asbestos-Containing Ma		4)		Norma		Acho	Description of stos Containing Mat			mount	Re	Re	Ш	Ē
TO BE ABATI		",	Ma	intena	nce/		, thermal systems i			Specify	Remova	Repair	cap	Enclosure
IN Facility			Cus	todial (12)	Staff?		surfacing, VAT,	or	S	or LF)	val	,	Encapsulate	sure
(13)		1	Yes	No.	N/A	1	other miscellaned	ous)					ate	
Nurse's Office				×		Floor til	e & Mastic			10 SF			П	П
						1 1001 til	e a mastic			70 01				
			-		-									
											1			
Name of Desisters 1111	I I I							[N .=					Ш	Ш
Name of Registered Waste AbateTech, Inc.	Hauler			10020	JDEP I	O No.	Cubic Yards of Waste	Name of Regist G.R.O.W.S.						
City, State					18750)	8 Disposal Date	City, State		0				
Lumberton, NJ							7/10/17	Tullytown,	PA					
Completed By (Print or Type	e)	Title					Signature	-		Da	ate		1	
Gwendolyn Trumbetti		111000000	erati	ons (Coord	inator	1 /MA	IT		ĝ	016	27	115	7

ASB-41 MAY 11

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) DO AS BESTOS CONTROL & Street Address 10 1 Type Notification Agencies Notified LICENSING Initial Zip Code State. Amended DEP Amendment # Tel :phone Number × DOL Emergency (including Name of Contact justification) DOH Eric Plackis Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Oth er than K-12) Other (i.e. private & commercial buildings, homes, Street Address etc.) Bldg. Age #cfFloors Square Feet City (5) 1774 Use (Prior if being demolished) Current County Code (7) County (6) (STATE USE ONLY) Name of Abatement Contractc (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Brick Industries Inc. Street Address Street Address P.O. Box 915 City, State, Zip Code City, State, Zip Code Brick, New Jersey 08723 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01196 (732)899-7499 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) Full Containment vith Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure Demolition Glovebag Procedure ≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Туре Is Location Normally Description of Amount Asbestos Containing Material (ACM) Location of Used Solely by Enclosure Asbestos-Containing Material (ACM) Removal (Specify (i.e. thermal systems insulation, Maintenance/ SF or LF) TO BE ABATED Custodial Staff? surfacing, VAT, or In Facility other miscellaneous) (12)(13)N/A No Yes Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste GROWS Inc. Hauler ID No. Brick Industries Inc. 21602 City, State Disposal Date City, State 20 PA Brick, New Jersey Signature Title Completed by President Eric Plackis

(K 229	9 4	NO	TIFICA (Purs	TION O	of New Je F ASBEST NJAC 8:60	OS AE	3ATEN 2:120)	IENT	The state of the s		E (i)	E		<i>¶</i> [
Date of Notification (1) 6-25-2017	[]				uilding Ow	ner/Ope	erator	(2)	i de		JUN	2 5	3 2	J17		1
Agencies Notified	Type Notification	-	St	reet Add		enue			97.7	- †	SBESTC				L&	
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DCA	Cancellation				TY INFOR		N									
Name of Facility Where		g Place (3)						Тур	e of Facility (4							
Commercial Facility	/							H	School (K-12 Subchapter 8	(Cthe	er than K-1	12)				
Street Address 80 Jacobus Avenue	9							×	Other (i.e. pretc.)	iva e 8	& commerc	cial bi	uildin	gs, h	mes,	
City (5) Kearny, NJ 07032									uare Feet .000+	1 01	f Floors		Bldg	. Age	•	
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Hudson	2013	413	(5		SE ONLY) .						(0)					_
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.				batement Cont nvironment			LC				
Street Address							Street		ress jinia Avenue							
0) 01 to 7'- Code									, Zip Code							
City, State, Zip Code							Jers	ey C	City, NJ 073	04						
Project Manager for Mo	nitoring Firm		T	elephon	e No.			333	8-8855		License 01174	No.				
Start Date (10) 7-6-2017		Scheduled 8-11-20		pletion D	ate (11)				SHA Monitor s above							
Occupancy Status Durin	ng Abatement (Che						Stree	t Add	iress							
× Facility Closed/Val	cated During Entire med Outside of Nor Facility Empty for D	Period of Al	oatem	ent		_	City,	State	e, Zip Code	_		<u></u>				
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat					-	Full Containmon Mini-Enclosure Glovebag Pro- Non-Exempte	e cec ire	9					
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Locati Asbestos-Containir <u>TO BE A</u> In Fa (13	ng Material (ACM) BATED cility	Used Mai	ormall d Sole ntenar odial S (12)	ly by nce/		os Con hermal	syster cing, V	Mate ns in 'AT, o	erial (ACM) sulation, or		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
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Main B			X		100	Roof					2500 SF 2000SF	-	x			
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Name of Registered W Green Environmen		_C	H	IJDEP V lauler ID 034889	No.	of Wa			G.R.O	.W.S	North L		fill			
City, State Jersey City, NJ							sal Da -2017		City, Sta Morris		P.A					
Completed by Liliana Serrano		Title Offic	е Ма	nager			Signat	ure	en Sen	ina	معه	Dat 6-2	e 25-2	017		

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

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ate of Notification (1)	0		Name	e of Build	ing Owner/Op ed Holdings	erator (2)							
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gencies Notified	Type Notification			Box 1										
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DOH DCA	Cancellation				INFORMATIO	NC								_
lame of Facility Where A Residential	batement is Taking I	Place (3)		AOILIT			Typ	Scho	cility (4) of (K 12) hapter 8	(Otho	er than K-12)	on aliana	s hor	nas
Street Address							×	Other	(i.e pri	vate &	commercial bu			160
City (5)							22	uare Fe		4	Floors	+08	Age	
Hoboken, NJ 07030 County (6)			Col	unty Cod	e (7) ONLY)		Cu	irrent U	se (F rior	if beir	ng demolished)			
Hudson Name of Monitoring Firm	Hired by Building O	wner (8)	1	ASCM N		Name	e of A	Abatem	ent (ont	ractor	(9) rvices, LLC			
	Tilled by Daniel					Stree	et Ad	dress						
Street Address						City.	State	e, Zip C	Ave lue					
City, State, Zip Code						Jer	sey	City, I	NJ (73	04	License No.			_
Project Manager for Mor	nitoring Firm	L-Marillo.	Te	elephone	No.	201	1-33	ne No. 3-885			01174			
(40)		Scheduled	Comp	letion Da	ate (11)				Mon tor					
Start Date (10) 6-19-2017		6-21-201	17			0.000		as abo						
Occupancy Status Durin	ng Abatement (Chec	k Only One)											
Facility Closed/Va Abatement Perform Other – Describe:	cated During Entire med Outside of Norr	Period of Ab mal Facility F	ateme Hours	ent		City	, Sta	te, Zip	Code					
Scope of Work (Check ≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	All That Apply)	Name of	enovat			,	×	Mini-	Encl isu	re	vith Negative Pr re and Non-Friabl	e Prod		me
		Is	Location	on									Ту	ре
TO BE A	ion of ng Material (ACM) ABATED acility 3)	Use Mai	ormall d Sole ntenar odial S (12)	ly ly by nce/ Staff?	Asbestos C	Descrip Containing mal sys urfacing ner misc	ng M tems VA	aterial (insulat T, or	ACN) ion,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate
		Yes	No	N/A	140.11	e Joint	Car	mnour		+	300 SF	Х		T
Basement -	Over furnace		X	-		rown L				+	100 SF	XX		
	pt 1 - Entry		X	-		rown L					96 SF	Х		
1st floor, Ap	ot 1 - Kitchen		X			oofing				-	1625 S F	X		
	oof		X	NJDEP		ubic Ya					gistered Landfi			
Name of Registered Green Environme				Hauler II 003488	9 6	ř Waste					.S. North La	ndfill		
City, State		100			6	oisposal -21-20	Date 17	е.	Ci y, S N orr	isville	e, PA			
Jersey City, NJ		Title				Sig	naţu	re	7		- 1	Date	017	

Print Forr State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) ASBESTOS CONTROL & Date of Notification (1) SBS PROPERTIES 06/23/17 Street Address Type Notification Agencies Notified P.O.BOX 8246 Initial FPA City, State, Zip Code Amended DEP HALEDON NJ 07538 Amendment # DOL 1 Emergency (including Name of Contact justification) DOH PAUL LENHART Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) BLOCK 478 LOT 6 School (K-1.) Subchapter 3 (Other than K-12) Other (i.e. p ivate & commercial buildings, homes, Street Address 1456 RINGWOOD AVE etc.) # of Floors Bldg. Age Square Feet City (5) 1950 2300/900 WAQNAQUE Current Use (Pric r if being demolished) County Code (7) County (6) (STATE USE ONLY) VACANT PASSAIC Name of Abatement Cor tractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) ARIAI Street Address Street Address 144 Mill St City, State, Zip Code City, State, Zip Code Paterson NJ 07501 Telephone No. License No. Telephone No. Project Manager for Monitoring Firm 1257 973-653-9652 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Goran Igev 07/11/17 07/04/17 Street Address Occupancy Status During Abatement (Check Only One) 144 Mill St Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Paterson NJ 0750 Other - Describe: Scope of Work (Check All That Apply) Full Containn ent with Negative Pressure Renovation >3 sf or ≥3 lf Mini-Enclosur a Demolition ≥160 sf or ≥260 lf Glovebag Prc cedure Non-Exempte d (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Amount Asbestos Containing Material (ACM) Encapsulate Asbestos-Containing Material (ACM) Enclosure (Specify Maintenance/ (i.e. thermal systems insulation, Removal TO BE ABATED surfacing, VAT, or Custodial Staff? SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A 1400SF Cement Board Siding TAM ٧ Exterior 760 VAT First Floor ٧ Name (Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste Hauler ID No. FARF IS HILLS INDIAN ARROW INDUSTRIES TBD 36031 Disposal Date City, St ite City, State

TBD

Title

CEO

Signature

Date

06/23/17

MOO RISVILLE PA

PATERSON NJ

GORAN IGEV

Completed by

6/0175	NO	TIFICA (Pursi	TION OF	of New Jers ASBESTOS	SABATEN	TENT		1 5	U.E.	9 20	L	Print	Ęo
Date of Notification (1)				ilding Owner	/Operator	(2)	1 15						7
6/26/17 Agencies Notified Type I	Notification	Str	eet Addr	2573			T- Land	ASL	ESTOS (LICEN	CONT SHIC	ROL	&.	
DEP DEP	nitial Amended Amendment #	Cit	y, State,	Zip Code on NJ 080	16								
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			FACILIT	TY INFORMA	TION	_	6E106-7	41					
Name of Facility Where Abatem Doane Academy	ent is Taking Place (3)					Тур	e of Facility (School (K 1 Subchapter	2)	or than K-12)				
Street Address						H	Other (i.e. p	rivate 8	commercia	l buildir	ngs, h	omes	
350 Riverbank rd.						1	etc.) ıare Feet	# of	Floors		g. Age		
Burlington NJ 08016							000+	1+					_
County (6) Burlington	U.	Co (S	ounty Co TATE US	de (7) E ONLY)			rent Use (F 1			ea)			
Name of Monitoring Firm Hired Health & Safety Service	by Building Owner (8)		ASCM 1	No.			batement Co	ntractor	(9)				
Street Address	5		UF-98-9-		Stree								
PO Box 365					1000		329						_
City, State, Zip Code							, Zip Code	001					
Berlin NJ 08009							erlin NJ 03	091	License N	0		-	
Project Manager for Monitoring James J Proctor		8		2-1311		3-753	3-9800		00727	··			220
Start Date (10) 7/10/17	Schedule 7/18/17		oletion D	ate (11)	Name		SHA Monit)						
Occupancy Status During Aba	tement (Check Only On	e)			Stree	et Ado	Iress	4	¥				
X Facility Closed/Vacated D Abatement Performed Out Other – Describe:	ouring Entire Period of A	bateme	ent		City,	State	e, Zip Code						
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	Is	Locatio	on								Abate Tv	ement pe	
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							_						
Name of Registered Waste H	lauler		JDEP V	1000	Cubic Yard	S	Nam :	of Regis	stered Landf	fill			
United Roll Off			lauler ID 2459		of Waste			O.W.S	8.				
City, State					Disposal D	ate	City, S		PA 19067	7			
Elm NJ Completed by	Title Signature				1	Date 6/26/17							
Anthony T Perna	Pre	sideni	t			{		Dipele		5/20/			_

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

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Date of Notification (1	June 26, 2017		Name o Melody	f Building (Jilson	Owner / O	perator (2)		JUN 2	9 201	7	The second secon	IJ			
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	ere Abatement is Taking	Place (3)			Тур	e of Facil School										
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Gloucester		ISE ONLY		T		C A1	tament Cantrast	r (0)								
Name of Monitoring	Firm Hired by Building Ov	wner (8)		ASCM N			atement Contract	(1 (9)								
N/A	AND PARTY					natech, Ir eet Addre										
Street Address					1000000	eet Addre Radio R										
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City, State & Zip Coo	de						arbor, NJ 0808	7								
		1-	elephone N	Jumber		ephone N			License Nur	mber						
Project Manager for	Monitoring Firm		elebilone i	TUITIDE!		9-296-691				00817						
Scheduled Start Dat	e (10) Schedule	ed Comple	tion Date (11)			HA Monitor	- N-1								
July 6, 2		Aug	ust 7, 2017 Synatech, Inc.													
Occupancy Status F	During Abatement (Check	only one)			Str	eet Addre	ess									
Facility Clo	sed/Vacated During Entir	e Period o	f Abateme	nt	82	Radio F	Road									
	Performed Outside of No				Cit	y, State 8	Zip Code									
Other – De		menter file	0.00000			5000	larbor, NJ 0808	1								
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Scope of Work (Che	eck all that apply)					_	7		March	001127						
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>3 sf or ≥ 3 lf			Renovati	on		\triangleright	Mini-Enclosure									
>160 sf or >2			Demolitio	on			Glovebag Pro									
	-55 !!			100 mg 1 m		<u> </u>			Non-Friable	Procedur	re					
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	taining Material (ACM) BE ABATED	Cus	todial Staf	f? (12)		Materia	I (ACM)		SF or LF)				_			
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	A010 F0				or	other mis	cellaneous)			Remova	Repair	ps	300			
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		Yes	No	N/A						_		fe	1,0			
I amount and		-	X	-	F	loor Tile	and Mastic	-	420 SF	X		Г	T			
Lower Level			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				complication beautiful (2004) to						1			
Name of Registere	d Waste Hauler	1000	P Waste	ards of W	/aste	Name of Reg	g stered Landfill									
		ID No.	12			Fairless Hill	ills									
Synatech, Inc.		21423				City, State										
City, State			Dispos	ai Date		Jily, State										
	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				, PA											
Little Egg Harbor,		August 8, 2017 Morrisville, I				Date										
Completed By	Title															
Diane Aloia	Execu	utive Adm	inistrator	rator Willie allor					June 26, 2017							

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State of New Jersey

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Name of Facility Where Abatement is Taking Pla	ice (3)					237,000	ool (K-12)							
Doane Academy						=		(Other	than K-12)		- 600	200		
Street Address						Oth	er (i.e. pri	rate &	commercial	building	s, noi	nes,		
350 Riverbank rd.					775.0	Square F		# of I	Floors	Bldg.	. Age	-		
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County (6)		Co (S	unty Cod	ONLY)		Garron								
Burlington				D2 172.27	Name	e of Abater	ment Cont	actor	(9)					
Name of Monitoring Firm Hired by Building Own	ner (8)		ASCM No	0.		naco Inc								
Health & Safety Services			117		711	t Address								
Street Address						Box 329	9							
PO Box 365						State, Zip								
City, State, Zip Code					We	st Berlin	NJ 080	91						
Berlin NJ 08009		T	elephone	No	Tele	Telephone No.								
Project Manager for Monitoring Firm			356-452			856-753-9800 00727								
James J Proctor	cheduled	1	Section Assessed		Nam	ne of OSHA	A Monitor							
Start Date (10)	7/18/17	Comp	ACTION DO	(/	Sa	me							_	
7/10/1/		\			Stre	et Address	3		Lo :					
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Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	Facility h	Hours	511t		City	, State, Zip	Code							
Other – Describe:														
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TO BE ABATED In Facility	Cust	odial (12)			surfacing other misc	ellaneous)				oval	읔	ulat	1 5	
(13)	1	NIa	N/A									(D	1	
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			NJDEP V	Vacto	Cubic Ya	rds	Name	of Reg	istered Land	Ifill				
Name of Registered Waste Hauler			NJDEP V Hauler ID	No.	of Waste			O.W.						
United Roll Off			22459		Dianagal	Date	City, §	tate						
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Anthony T Perna	Pre	sider	nt		1 (-	torus.						

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Date of Notification (1)	06/21/2017		F	Redefin	ed Hor	Owner/Oper nes Deve	rator (2) opment L	LC	1	JUN	292	2017	1	
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(X) DOL (X) DOH () DCA	() Emergency justification)	(includir		Name of Marc Fl					Te	el. Num	ber			
() BON	() Cancellation					A TION								
		T-tiles [YINFOR	RMATION	Type of Fa	acility (4)						
Name of Facility Whe N/A	re Abatement is	raking r	riace (o	,			() School	(K-12)	her tha	n K-12)	li		
Street Address 118 Forest Road							(X) Other home	(i.e. priva s, etc.	te & cor	mmerc	Bldg.			
City (5) Glen Rock NJ							Square Fe		t of Floo		(50)	Age		
County (6) Bergen County				County C USE ON	Code (7) LY)	(STATE	Current U	se (Prior	i being	demoli	shed)			
Name of Monitoring F	Firm Hirad by Bld	la Own	er	ASCM N	0.	Name of	Contractor (9)						
(8)	-IIIII Filled by blo	ig. Own.				The second second second second	STRUCTIO	N SERVI	ES, LL	.C				
Street Address				Street Address 365 River Drive										
City, State, Zip Code							e, Zip Code							
City, State, Zip Code	5)					Garfield.	NJ 07026							
Project Manager for	Monitoring Firm	Tele	phone N	Number			e Number			License 01191	Numb "A"	er		
Scheduled Start Dat	e (10)	Sch	eduled (Completi	on Date		OSHA Mon	itor						
07/05/2	2017	(11)	08.	/05/2017	02	Testor Te								
Occupancy Status D	ouring Abatemen	t (Check	c only or	ne)		Street A	ddress ickson Aven	ue.						
(X) Facility Closed/\	/acated During E	ntire Pe	eriod of A	Abateme	nt	A Company of the Comp	te, Zip Code							
() Abatement Perfo	ormed Outside of e:	Norma	l Facility	Hours		Long Isla	sland City, NY 11101							
Source of Work (Ch	eck all that apply	')				() F	ull Containr	nent with	Vegativ	re Pres	sure			
()≥3 sf or≥3 lf		(X)	Renova Demoliti	tion		110	Mini-Enclosu Blove bag P	rocedure			957 15			
(X) ≥ 160 sf or ≥ 26	O If	() !	Demond	1011		1 (X)	Non-Exempt	ed (*) and	Non-F	riable	Proced	ure		
			· C No	rm ally						F	Abatem	entry	pe	
Asbestos-Contair (ACM TO BE AB	Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility Is Location Used S Mainte					scription of a ning Materia mal systems facing, VAT miscellane	al (ACM) (i.e insulation, , or other	(S	ount necify or LF)	Zallova	Repair	Encapsulate	Enclosure	
(13)	No	N/A				40	50 SF		X	1.5				
Basem	ent			X		VAT & Ma	aetic		0 SF		X			
Basem	ent			X		VAI & IVIS	33110							
Name of Reg. Was	EP Was	te Haule	17 10-100	Cubic Yards of Waste			Reg. La							
City, State						Disposal Dat	е	City, Sta Melville,	1\(\begin{array}{c} 1\(\begin{array}{c} 3 \\ \end{array}					
Garfield, NJ Completed by Roque G Schipilliti		Sign	ature Do	Soloh	pellet	2	Date	06/21	/2017					

Cr 4751			TION O	of New Jo F ASBEST NJAC 8:6	ros Al				2 8		<u>L</u>		<u>W</u>	111	
Date of Notification (1)		T Nar	ne of B	uilding Ow	ner/Op	erator (2)		11-	tii JUN	2	9 2	017	-	
26/22 /2010				EN C				YTELL	150	EGIONA		3	0.6	5.	
Agencies Notified Type Notification		Stre	eet Add	Iress					T	ASBEST		CON	TRO	1 8	
EPA Initial Amended	ę	City	AO 8 y, State	EL C) KK	- P	. <1.		<u>L</u> .	ASBES!	CEN	SIM	<u>g</u>		
DOL Amendment #_ Emergency (incl	uding	VE	10R	MEGS	2 1 1	CC	08	043		- L Niconala				_	
DOH justification)	duling	Nai	me of C	Contact					166	ephone Numbe	er er			1	
DCA Cancellation		12	CAN.	A SA	NATIO	1021								1	
Name of Facility Where Abatement is Taking P	lace (3)	-	PACILI	III INI OK	WATIC		Type of	Facility (4)							
EASTERN CAMPEN CO Street Address		g '	EGI	DRIAC	H	,S.	T Sul	nool (K-12) ochapter 8 ner (i.e. priv	(Ot 16	er than K-12) & commercial I	ouildin	igs, h	omes		
1401 LAUREL DAK	62						etc	.)		f Floors		q. Ag			
City (5)							Square	reet	#)	1 110015	Diu	g. ng	Š		
VUOLHEES		TCo	unty Cr	ode (7)			Current	Use (Prior	if b :i	ng demolished	d)				
County (6)		(S1	TATE US	SE ONLY)			Schoo				8				
Name of Monitoring Firm Hired by Building Ow	ner (8)	1	ASCM	No.		Name	of Abater	ment Contr	act r	(9)					
**************************************	(NC		00	57		VMC	Comp	any Inc							
Street Address	1,00					17.17.1.19.19.19	t Address Piaget Avenue								
PO BOX 385	* *					100000000000000000000000000000000000000							-		
City, State, Zip Code							State, Zip on NJ 0								
Project Manager for Monitoring Firm	8231	TTO	lankan	a No			none No.			-	-				
							253-88	28	License No. 00704	0704					
Start Date (10), S	cheduled				002	Name	of OSHA	Monitor							
06/27,12017			120			VMC	Comp	any Inc							
Occupancy Status During Abatement (Check		- 15		V 1		Street	Address								
Facility Closed/Vacated During Entire Pe	riod of Aba	ateme	nt												
Abatement Performed Outside of Normal Other – Describe:	Facility H	ours			_	City, S	State, Zip	Code							
Scope of Work (Check All That Apply)	1						_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Rer Der	novatio nolitio	on on				_ Mini-	Enclosure		h Negative Pr	essur	9			
							Non	ebag Proc Exempted	(*)	nd Non-Friable	e Proc	edure	9		
~ _	ls Le	ocatio	n									Abate Ty	ment		
Location of	No	rmally				scriptio		000000000000000000000000000000000000000				1 9	, , , , , , , , , , , , , , , , , , ,	_	
Asbestos-Containing Material (ACM) TO BE ABATED		enand	ce/				Material insulat			Amount (Specify	R	ת	Encapsulate	En	
In Facility	Custo	dial St (12)	aff?	(1.0.	surfa	cing, V	AT, or		5	SF or LF)	Remova	Repair	apsu	Enclosure	
(13)		(12)			other	miscella	aneous)				val	=	ılate	Jre	
	Yes	No	N/A												
CLASSROOM 503	1	×		3/10K	10	NODE	RCAT	ING		16 SF	X	٠.			
CLASSROOM 505		X		412	_ U	DDE	POCH	3/1)T	\	6 SF	X.				
Name of Registered Waste Hauler			JDEP V			c Yards		Name of	Re(is	stered Landfill					
Newark Carting Inc			auler ID) No.	of Wa	aste		GROW	S						
City, State Newark NJ				Dispo	osal Da	te	City, Stat Morrisv		PA						
Completed by	Title				T	Signato	ire >	0	1	Da	ite /		1	7	
Voytek Roszkowski	Presid	lent				J.	300	200	5/9	n . 0	6/6	23	1		

ompleted by driana Olejarova	Title presiden	t			T ST	nature	Morrisv	rille,		te 22/2	017		1
ame of Registered Waste Hauler Lich Corporation Ity, State Oodland Park, New Jersey		NJ Hau 187	DEP W ular IO 1 24	iste No.	Cubic Y of VVest	•	City, State	S La					
						-			a a second of the second				
				1.50 11		/+A		- DI		×		_	,
rint shop	X	+		pine in	isulatio	m		8 LF		-		ъ	
TO BE ABATED In Facility (13)	Custo	enendial St 12)	19/ 1917? N/A	().e.	thermal :	systems in ing, VAT, iscellaneo	isulation,		Amount Specify For LF)	Removal	Repair	Encapsulate	
Lecation of Asbastos-Containing Material (ACM)	Norm	ely by	sed	Ashe	Des Cont	cription of					Abat	ement /pe	
(E) ≥3 sf or ≥3 lf (E) ≥160 sf or ≥260 lf	(S)	J R	ėnovat molitio	Jon In		6 246	Mini-Enclo	Bure Proce	with Negati ure and Non-F				** 1.
Fability Closed/Vacated During Ent Abatement Performed Outside of N Other - Describe: Start 3:30 pm Scope of Work (Check All That Apply)	ire Parlod of a	Abate Hour	ment				Coute 22 W na, Zip Codo NJ 07083	est	•			## · • • ·	***
Occupancy Status During Abatement (Che	ick Only One	,				Streat A	ddress	_	poratorie	s, LI	C		
Start Oate (10) 06-23-2017	Scheduled 06-23-2	- 1			200		25-8400 TOSHA Manite Vironments	r_	01104				
Anthony Valentine		7	Teleph	one No. 69-670	8		one No. 25-8400	141 0	License	No.			
City, State, Zip Code Englewood, NJ 07631			-				ete. Zio Code land Park,	_	5.40 d				
300 Grand Ave						Street /				101 1			
Name of Monitoring Firm Hired by Bulldin Detail Associates, Inc	g Owner (8)		ASC	EM No.		Name	Abatement C Corporation	ontre	(Or (9)	41 ta		* 1	-
County (6) Essex		T	Count	y Code (7)	. Y)		Current Use (F	Prior I	being demo	lished)			0.000
City (5) Montelair		~					stc.) Square Feet	7	For Flaorii	outer Ci		Age	10
Street Address 54 Orange Road							School Suboha	enter 8	Otherthen	K-12)	ابدوال		
Name of Facility Where Abelement is Ta Hillside School	king Place (3	}	.,,		TORINA.	NON	Type of Facili	D 5050					
© DCA © Cancell	ation		Lenr	ly Sapo	nara	TIO!			Yal	Licent			-
DEI DOL DOH Justificati	ney		Andread - I am a market	State, Zip stelair, I		42	; <u>}</u> ;	A 1. 1 y 13	51) Al-) [-
GEJ DEP GD Initial Amenda	d ant#			Address						1	i		-
Agencies Notified Type Notifical	lon			e of Suite itclair P		chools	(2)	7	ch#L	78	CON USIN	ITAC G	E
Date of Notification (1) 06/22/2017			ruraų.	ION OF A	AC 8:80 a	nd 12:12	0}						-
01/- 11700		NEXT	=104#	State of	Now Jore	ey			ال	JN 2	9	2017	L
								2.5	** 1 -	-	1000	3/00	

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	of Notification (1)				lame of B William		vner/Oper	ator	(2)		<u> </u>			10.00-7				T
PARK STREET	-2017 sies Notified	Type Notification			Street Add			=====	-			ISDE	STOS (DL 8		+
	EPA DEP DOL	Initial Amended Amendment	#			, Zip Code City, NJ (1			LICALIV	Oli V	<u> </u>			
×	OOH OCA	Emergency justification) Cancellation	(including	N	Name of C	ontact						Tele	ephone N	umbe	er			
			DI (2)		FACILI	TY INFOR	RMATION		Tyr	pe of Fa	acility ((1)						
	of Facility Where dential	Abatement is Takin	ig Place (3)						Tyl		ol (K-1							
	Address								Ħ	Subo	hapter	8 (Othe	er than K- & commer	12)	mildir	nas h	ome	2
	0.00.00.00.000.00	***							×	etc.)				Ciai				.,
City (5	5) ey City, NJ 073	305							200000	uare Fe 99	eet	2	Floors		Bld 77			
Count	ty (6)				County Co				Cu	rrent U	se (Pri	or if bei	ng demol	ished	1)			
Hud:		- I fined by Duilding	Ourpor (8)		TASCMI		IN	ame	of A	batem	ent Co	tractor	(9)					
Name	e of Monitoring Firm	n Hired by Building	Owner (6)		AGGIVI	140.	0	Gree	en E	Enviro	nmer	al Se	rvices,	LLC				
Street	t Address									dress ginia A	Avenu	е						
City	State, Zip Code									, Zip C								_
Oity, c	otate, zip oode									City, N	1J 07	304						
Proje	ct Manager for Mo	nitoring Firm			Telephon	e No.				e No. 3-885	5		License 01174					
130,000,000	Date (10) 4-2017		Scheduled 6-24-20		npletion D	ate (11)	1000			OSHA N is abo								
Occu	pancy Status Durin	ng Abatement (Che	ck Only One	e)			S	treet	t Add	dress				2,000,000				
	Facility Closed/Vac Abatement Perforr Other – Describe:	cated During Entire med Outside of Nor	Period of Almal Facility	batem Hours	nent		- 0	ity. S	State	e, Zip C	ode							
Scop	e of Work (Check	All That Apply)																
1	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Remond	enova emolit				Full Contains ent with Negative Pressure Mini-Enclosu e Glovebag Pr. cedure Non-Exempt d (*) and Non-Friable Procedur						.				
			ls	Locat	ion			L		NOTEL	xempt	0 () 0	10 11011			Abate Ty	ment	
Α	Location Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED cility	Used Mai	ntena	ly by	Asbesti (i.e. t	os Contair thermal sy surfacir	Description of ontaining Material ontaining Material on all systems insulated facing, VAT, or rimiscellaneous)			CM) n,		Amount (Specify (F or LF)		Remova	Repair	Encapsulate	Enclosure
			Yes	No	N/A						-						te	10
	Baser	ment	X			Pipe ir	nsul	latic	n			30 If		Х				
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			_										100000000000000000000000000000000000000					
Nam	ne of Registered W	aste Hauler		1	Cubic Y	ards		1	Name (f Regis	tered Lar	ndfill						
1	173	tal Services, Ll	_C	11000	Hauler ID 1034889	of Waste	of Waste 1 G.R.C.W.S. North Landf					llift						
	State sey City, NJ			Disposa 6-24-20				City, St Morris		PA								
Com	npleted by ina Serrano	e Ma	nager	Sig	natu	ire	u	Date 6-23-2017										