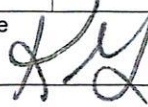


State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

4367068
RECEIVED

Date of Notification (1) 07 / 15 / 26		Name of Building Owner/Operator (2) Paco Housing Corporation # 2510-3445-1 check # 4230							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 192 Third Street							
		City, State, Zip Code Jersey City, NJ 07302							
		Name of Contact Elizabeth Nunez	Telephone Number 201-492-8247						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Villa Borinquen		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 178 4th Street Unit #40									
City (5) Jersey City	Square Feet 1602	# of Floors 2	Bldg. Age 1974						
County (6) Hudson	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residential							
Name of Monitoring Firm Hired by Building Owner (8) Empire Environmental LTD		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.						
Street Address 150 River Road F-4		Street Address 70 Stacy Haines Road Suite 4							
City, State, Zip Code Montville NJ 07045		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Michael Boggi	Telephone No. 973-334-5641	Telephone No. 609-702-0400	License No. 00862						
Start Date (10) 07 / 27 / 26	Scheduled Completion Date (11) 07 / 28 / 26	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 200 U.S. Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☐	☐	☒			☐	☒	☒	☐
	☐	☐	☒			☐	☐	☐	☐
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	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills					
City, State Lumberton, NJ		Disposal Date 07/28/2026		City, State Morrisville, PA					
Completed By (Print or Type) Kaysi Gruner		Title Office Admin		Signature 			Date 7/15/26		

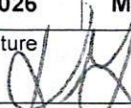
SCOPE OF WORK- RESIDENTIAL 178 4th STREET, JERSEY CITY NJ

- AMS proposes to stabilize/repair the following areas by wet scraping and encapsulating with CP-10 and/or penetrating encapsulant.
 - Child's Bedroom- 3 LF crack in drywall ceiling(add drywall screws to secure)
 - 2nd Floor Hallway- 6 LF crack along closet.
 - Left Bedroom- 1 SF along wall to right of door
 - Bottom of Stairwell- crack to right
 - Stairwell Handrail- Repair at top
 - 1st Floor Hallway- 6 LF at corner
 - Living Room-4-5 Nail pops

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

1876497

RECEIVED

Date of Notification (1) 07 / 15 / 26		Name of Building Owner/Operator (2) Paco Housing Corporation I # 2510-3445-1 check # 4232							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 192 Third Street							
		City, State, Zip Code Jersey City, NJ 07302							
		Name of Contact Elizabeth Nunez	Telephone Number 201-492-8247						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Villa Borinquen		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 396 Manilla Avenue- Muiltple Units									
City (5) Jersey City	Square Feet 1602	# of Floors 2	Bldg. Age 1974						
County (6) Hudson	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residential							
Name of Monitoring Firm Hired by Building Owner (8) Finog Environmental		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.						
Street Address 617 Stokes Road #4-318		Street Address 70 Stacy Haines Road Suite 4							
City, State, Zip Code Medford NJ 08055		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994	Telephone No. 609-702-0400						
		License No. 00862							
Start Date (10) 07 / 29 / 26	Scheduled Completion Date (11) 08 / 12 / 26		Name of OSHA Monitor EMSL Analytical, Inc.						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 200 U.S. Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☐	☐	☒			☒	☐	☐	☐
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	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills					
City, State Lumberton, NJ		Disposal Date 08/12/2026		City, State Morrisville, PA					
Completed By (Print or Type) Kaysi Gruner		Title Office Admin		Signature 		Date 7/15/26			

SCOPE OF WORK(MULTIPLE UNITS)- 396 Manila Avenue, Jersey City NJ

O&M Repair Work

1. Unit 2A- Ceiling - 5 SF bubble
2. Unit 2B -Ceilings - 1 SF Repair in LR and 5 SF Bubble in BR
3. Unit 2C- Floor - 3 SF LR Ceiling - 1 SF bubble
4. Unit 2D Floor- 3 SF tiles Ceiling - LR 1 SF and Foyer 1 SF (1 left corner hole in foyer)
5. Unit 3A Floor - 2 SF tiles in Kitchen and LR Ceiling - total 8 SF bubbles
6. Unit 3D Floor - 3 Sf bedroom Ceiling - 14 SF living room and 5 SF BR
7. Unit 3E Floor - 2 SF bedroom Ceiling - 6 ft- Living room near window, 5ft-near door
bedroom
8. Unit 3G- Ceiling - 5 SF living room and 4 sf in closet
9. Unit 3K - Ceiling - 6 SF living room
10. Unit 4A- Ceiling - 5 SF closet and hallway, 6 SF living room bubble

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

Date of Notification (1) 6 / 23 / 26		Name of Building Owner/Operator (2) Hamilton Township School District Job #2606-6590 Check #18038							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 90 Park Ave.							
		City, State, Zip Code Hamilton, NJ 08690							
		Name of Contact Business Admin	Telephone Number 609-631-4100						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Steinert HS		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 2900 Klockner Rd.		Square Feet							
City (5) Hamilton Square		# of Floors							
County (6) Mercer		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Karl Environmental Group		ASCN No.							
Street Address 20 Lauck Road		Name of Abatement Contractor (9) AbateTech, Inc.							
City, State, Zip Code Mohnton, PA 19540		Street Address 30 Maple Ave. PO Box 25							
Project Manager for Monitoring Firm Mike Krisher		City, State, Zip Code Lumberton, NJ 08048							
Telephone No. 610-223-1832		Telephone No. 609-265-2107	License No. 00529						
Start Date (10) 7 / 30 / 26	Scheduled Completion Date (11) 8 / 5 / 26	Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 9000 Commerce Parkway Suite B							
Scope of Work (Check all that apply) ☐ >3 sf or >3 lf ☒ >160 sf or >260 lf ☒ Renovation ☐ Demolition		City, State, Zip Code Mt Laurel, NJ 08054							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☐	☐	☒	SEE ATTACHED	SEE ATTACHED	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750		Cubic Yards of Waste 40	Name of Registered Landfill FAIRLESS Landfill				
City, State Lumberton, NJ		Disposal Date 8/5/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwendolyn Dumas		Title Operations Manager		Signature 		Date 6-23-26			

SCOPE OF WORK

LOCATION/WORK AREA	ABATEMENT MATERIAL	ESTIMATED QTY.
Athletic Trainers Room (A044)	9"x9" ACM Material and mastic located below carpet tile.	±290 Square Feet
Athletic Trainers Room (A044)	Mastic for Rubber Base	±75 Linear Feet
Athletic Trainers Room Corridor Door (A044)	±24"x32" Transite Panel above door from Vestibule (A043).	±5 Square Feet
Girls Team Locker Room (A045)	Chalkboard and glue dots.	±35 Square Feet
Girls Locker Room Office/Storage (A048)	9"x9" ACM Material and mastic.	±85 Square Feet
Girls Locker Room Office/Storage (A048)	Mastic for Rubber Base	±40 Linear Feet

Contractor shall review specifications. Any problems or errors should be reported to the architect and/or environmental consultant immediately.

The school facility may be **OCCUPIED** during the **NON -FRIABLE ABATEMENT**. Decon areas and removal of waste shall be from the exterior door in the Girls Team Locker Room. See attached sketch.

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

1184794
RECEIVED

Date of Notification (1) 6 / 23 / 26		Name of Building Owner/Operator (2) Atlantic City Public Schools Job #2605-6585 Check #18039							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 1300 Atlantic Avenue- Citi Center							
		City, State, Zip Code Atlantic City, NJ 08401							
		Name of Contact Business Administration	Telephone Number 609-343-7200						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Brighton Avenue School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 30 N Brighton Avenue									
City (5) Atlantic City	Square Feet	# of Floors	Bldg. Age						
County (6) Atlantic City	County Code (7)(STATE USE ONLY)		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm		Telephone No. 609-265-2107	License No. 00529						
Start Date (10) 7 / 7 / 26	Scheduled Completion Date (11) 7 / 10 / 26	Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____AM-_____PM/_____PM-_____AM		Street Address 9000 Commerce Parkway							
		City, State, Zip Code Mount Laurel, NJ 08054							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☒ Renovation ☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure <i>Wrap sent</i> ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Boiler Room	☒	☐	☐	Pipe Insulation	9 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill					
City, State Lumberton, NJ		Disposal Date 7/10/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.		Signature <i>Gwen Trumbetti</i>			Date 7-23-26		

"WRAP AND CUT" REMOVAL PROCEDURES FOR PIPE INSULATION

DESCRIPTION OF THE WORK

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

PRODUCTS

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

DESCRIPTION OF THE WORK

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

AbateTech, Inc. shall set up a remote 3-stage decontamination chamber at an agreed upon location. The work areas will be segregated utilizing barrier tape and drop polyethylene sheeting. Abatement workers will don appropriate PPE prior to removal procedures.

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

Upon the wetting, wrapping, and sealing of thermal system insulation AbateTech, Inc. shall cut out the pipe fittings utilizing a Sawzall approximately 3-6" away from the TSI through non-asbestos pipe insulation as to not disturb the TSI. All ACM waste will be immediately double bagged and removed from the building to an appropriate secured dumpster or company vehicle.

AbateTech, Inc. shall remove all asbestos containing materials from the work site in double 6-mil polyethylene waste bags or impermeable packages. All asbestos materials shall be adequately wet. AbateTech, Inc. shall assure that all asbestos waste materials are sufficiently saturated prevent fiber emission and/or visible emissions.

All asbestos waste bags, pipe sections and other waste packages shall be labeled with the prescribed Federal OSHA warning signs and shall include site specific waste generator information.

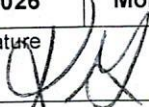
AbateTech, Inc. shall provide a fully enclosed, watertight waste container or company vehicle complete with a locking device for storage of all contaminated waste removed from the site. The waste container or company vehicle shall have asbestos warning signs affixed to all sides and doors

All elevated asbestos abatement of pipe insulation will be performed utilizing ladders or rolling tower scaffolding approved fall protection, as applicable.

Upon completion of abatement, the Owner's consultant shall perform visual inspection and final air clearance sampling at the work areas, as applicable. After satisfactory results are achieved, all equipment/materials will be removed from the site.

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

RECEIVED

Date of Notification (1) 07 / 08 / 26		Name of Building Owner/Operator (2) Trenton Public Schools #2603-3513-1 check# 4226					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 1490 Prospect Street					
		City, State, Zip Code Ewing Township NJ 08638					
		Name of Contact Ravi Perillai	Telephone Number 347-208-5895				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Franklin Elementary School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 200 William Street		Square Feet 4000	# of Floors 4				
City (5) Trenton		Bldg. Age 1931					
County (6) Mercer	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) School					
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.				
Street Address 120 North Warren Street		Street Address 70 Stacy Haines Road Suite 4					
City, State, Zip Code Trenton NJ 08610		City, State, Zip Code Lumberton NJ 08048					
Project Manager for Monitoring Firm Roland Jones		Telephone No. 609-392-4200	Telephone No. 609-702-0400				
License No. 00862		Name of OSHA Monitor EMSL Analytical, Inc.					
Start Date (10) 07 / 20 / 26	Scheduled Completion Date (11) 08 / 20 / 26	Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM					
Street Address 200 U.S. Route 130 North		City, State, Zip Code Cinnaminson, NJ 08077					
Scope of Work (Check all that apply)							
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☐ ☐ ☐			☐	☐	☐	☐
	☐ ☐ ☐			☐	☐	☐	☐
	☐ ☐ ☐			☐	☐	☐	☐
	☐ ☐ ☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Hills			
City, State Lumberton, NJ		Disposal Date 08/20/2026		City, State Morrisville, PA			
Completed By (Print or Type) Kaysi Gruner	Title Office Admin	Signature 		Date 7/8/26			

SCOPE OF WORK FRANKLIN ELEMENTARY SCHOOL, TRENTON NJ

- AMS proposes to hole cut up to 12-5 "holes into classroom from hallway using a shroud with Hepa-vacuum attachment.
- Note: AMS may cut 5" square holes which would total approximately 1.5 SF for 8 holes.
- AMS proposes to drill/install up to 450 1/4" concrete holes/fasteners for HVAC using shrouded drill with Hepa-vacuum attachment. • NOTE: Room total -36 (to be confirmed) Holes total- approximately 2,340

19870

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

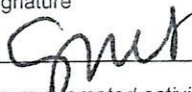
2225182
RECEIVED

Date of Notification (1) 7 / 15 / 26		Name of Building Owner/Operator (2) Montclair Township BOE Job #2507-6474 Check #18070					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 22 Valley Rd.					
		City, State, Zip Code Montclair, NJ 07042					
		Name of Contact Business Admin	Telephone Number 973-509-4000				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Nishuane ES		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 32 Cedar Avenue							
City (5) Montclair		Square Feet	# of Floors Bldg. Age				
County (6) Essex		County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) Detail Associates		ASCM No.	Name of Abatement Contractor (9) AbateTech, Inc.				
Street Address 560 Sylvan Avenue Suite 3065		Street Address 30 Maple Ave. PO Box 25					
City, State, Zip Code Englewood Cliffs, NJ 07632		City, State, Zip Code Lumberton, NJ 08048					
Project Manager for Monitoring Firm Stephen Jaraczewski		Telephone No. (201) 569-6708	Telephone No. 609-265-2107 License No. 00529				
Start Date (10) 7 / 25 / 26		Scheduled Completion Date (11) 7 / 31 / 26					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM- _____ PM- _____ AM <i>Saturdays</i>		Name of OSHA Monitor IATL					
Scope of Work (Check all that apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure <i>wrap + cut</i> ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Frable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Room 016	☐ ☐ ☒	Pipe Insulation	15 LF	☒	☐	☐	☐
Room 022	☐ ☐ ☒	Pipe Insulation	10 LF	☒	☐	☐	☐
Room B-1	☐ ☐ ☒	Pipe Insulation	8 LF	☒	☐	☐	☐
Room B-2	☐ ☐ ☒	Pipe Insulation	25 LF	☒	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill			
City, State Lumberton, NJ		Disposal Date 7/31/26		City, State Morrisville, PA			
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.	Signature <i>Gwen Trumbetti</i>		Date 7-15-26		

Scope of Work Cont.

<u>Location of ACM</u>		<u>Used for Maint. Description of ACM</u>	<u>Amount</u>	<u>AbatementType</u>
Cafeteria	NA	Pipe Insulation	40 LF	Removal
Room 105	NA	Pipe Insulation	44 LF	Removal

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

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2) PSE&G / Job #2605-6577 Check # 18073, 18074							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 9 ☐ Emergency (including justification) ☐ Cancellation	Street Address 4000 Hadley Road							
		City, State, Zip Code South Plainfield, NJ							
		Name of Contact Kelsey DuBois	Telephone Number 908-328-4248						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) PSEG Irvington HQ		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 934 Clinton Ave.		Square Feet	# of Floors						
City (5) Irvington		Bldg. Age							
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Headquarters							
Name of Monitoring Firm Hired by Building Owner (8) Matrix New World		ASCM No. 00121	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address 26 Columbia Turnpike		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Florham Park, NJ 07932		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Matt Sheldon		Telephone No. 973-240-1800	License No. 00529						
Start Date (10) 7 / 25 / 26	Scheduled Completion Date (11) 8 / 7 / 26	Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: Sat 7/25, Sun 7/26		Street Address 9000 Commerce Pkwy. Suite B							
Scope of Work (Check all that apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☐	☐	☒	SEE ATTACHED	SEE ATTACHED	☒	☐	☐	☐
4th Floor	☐	☐	☒	Duct work glue dots	600 SF	☒	☐	☐	☐
3rd Floor	☐	☐	☒	Duct work glue dots	100 SF	☒	☐	☐	☐
2nd Floor	☐	☐	☒	Floor tile & Mastic	435 SF	☒	☐	☐	☐
Name of Registered Waste Hauler Veolia ES		NJDEP Waste Hauler ID No. 000151	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill					
City, State Flanders, NJ		Disposal Date 8/7/26	City, State Morrisville, PA						
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator	Signature 				Date 7-24-26		

Scope of Work Cont.

<u>Location of ACM</u>	<u>Used for Maint.</u>	<u>Description of ACM</u>	<u>Amount</u>	<u>Abatement Type</u>
2 nd Floor Mens Bathroom	NA	Pipe Insulation	30 LF	Removal (GB)
Meter Department	NA	Mastic	140 SF	Removal (NF)

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

RECEIVED
CHECK # 41085

Date of Notification (1) <u>7</u> / <u>22</u> / <u>26</u>		Name of Building Owner/Operator (2) Princeton University-Facilities Operations							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # <u>2</u> ☐ Emergency (including justification) ☐ Cancellation	Street Address MacMillan Building, Elm Drive							
		City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Eric Emery	Telephone Number 609-258-3432						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton University-Dean Mathey Court Cmplx		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address Harrison St & Hartley Ave		Square Feet	# of Floors						
City (5) Princeton		Bldg. Age 63							
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC							
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Keehn	Telephone No. 609-386-8800	Telephone No. 215-788-6040	License No. 02121						
Start Date (10) <u>7</u> / <u>13</u> / <u>26</u>	Scheduled Completion Date (11) <u>1</u> / <u>6</u> / <u>27</u>	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: <u>7:00AM-3:30PM</u> / <u> </u> PM - <u> </u> AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ Renovation ☒ Full Containment with Negative Pressure ☒ ≥160 sf or ≥260 lf ☒ Demolition ☒ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
West Bldg Suite 22-Kitchen and bathroom	☐	☒	☐	Joint Compound	780 SF	☒	☐	☐	☐
West Bldg Suite 22 Kitchen and bathroom	☐	☒	☐	Flooring	131 SF	☒	☐	☐	☐
West Bldg Suite 24 Kitchen	☐	☒	☐	Joint Compound	19 LF	☒	☐	☐	☐
South Bldg Suite 28 Kitchen	☐	☒	☐	Joint compound	15 LF	☒	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.		Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Freehold, NJ		Disposal Date		City, State MORRISVILLE, PA 19067					
Completed By (Print or Type) Brian Scafiro	Title Estimator		Signature <i>Brian Scafiro</i>			Date <u>7/22/20</u>			

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

Date of Notification (1) 7 / 22 / 26		Name of Building Owner/Operator (2) Princeton University-Facilities Operations							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 2 ☐ Emergency (including justification) ☐ Cancellation	Street Address MacMillan Building, Elm Drive							
		City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Eric Emery	Telephone Number 609-258-3432						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton University-Dean Mathey Court Cmplx		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address Harrison St & Hartley Ave		Square Feet	# of Floors 63						
City (5) Princeton		Bldg. Age							
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC						
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Keehn	Telephone No. 609-386-8800	Telephone No. 215-788-6040	License No. 02121						
Start Date (10) 7 / 13 / 26	Scheduled Completion Date (11) 1 / 6 / 27	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / PM - AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
South Bldg Suite 30 Kitchen and bathroom	☐	☒	☐	Joint Compound	780 SF	☒	☐	☐	☐
South Bldg Suite 38 Kitchen	☐	☒	☐	Joint Compound	6 LF	☒	☐	☐	☐
South Bldg Suite 40 Kitchen	☐	☒	☐	Joint Compound	15 LF	☒	☐	☐	☐
East Bldg Suite 289 Kitchen	☐	☒	☐	Joint Compound	15 LF	☒	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Freehold, NJ		Disposal Date		City, State MORRISVILLE, PA 19067					
Completed By (Print or Type) Brian Scafiro		Title Estimator	Signature <i>Brian Scafiro</i>			Date 7/22/26			

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

Date of Notification (1) 7 / 22 / 26		Name of Building Owner/Operator (2) Princeton University-Facilities Operations							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 2 ☐ Emergency (including justification) ☐ Cancellation	Street Address MacMillan Building, Elm Drive							
		City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Eric Emery	Telephone Number 609-258-3432						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton University-Dean Mathey Court Complex		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address Harrison St & Hartley Ave		Square Feet	# of Floors 63						
City (5) Princeton		Bldg. Age							
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC							
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Keehn	Telephone No. 609-386-8800	Telephone No. 215-788-6040	License No. 02121						
Start Date (10) 7 / 13 / 26	Scheduled Completion Date (11) 1 / 6 / 27	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / ____ PM- ____ AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
East Bldg Suite 293 Kitchen and bathroom	☐	☒	☐	Joint Compound	1320 SF	☒	☐	☐	☐
East Bldg Suite 293 Kitchen and bathroom	☐	☒	☐	Flooring	249 SF	☒	☐	☐	☐
East Bldg Suite 295 Kitchen and bathroom	☐	☒	☐	Joint Compound	1321 SF	☒	☐	☐	☐
East Bldg Suite 295 Kitchen and bathroom	☐	☒	☐	Flooring	240 SF	☒	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.		Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Freehold, NJ		Disposal Date		City, State MORRISVILLE, PA 19067					
Completed By (Print or Type) Brian Scafiro		Title Estimator		Signature <i>Brian Scafiro</i>		Date 7/22/26			

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

Date of Notification (1) 7 / 22 / 26		Name of Building Owner/Operator (2) Princeton University-Facilities Operations							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 2 ☐ Emergency (including justification) ☐ Cancellation	Street Address MacMillan Building, Elm Drive							
		City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Eric Emery	Telephone Number 609-258-3432						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton University-Dean Mathey Court Complex		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address Harrison St & Hartley Ave		Square Feet	# of Floors 63						
City (5) Princeton		Bldg. Age							
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC						
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Keehn		Telephone No. 609-386-8800	License No. 02121						
Start Date (10) 7 / 13 / 26	Scheduled Completion Date (11) 1 / 6 / 27	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / ____PM-____AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ Renovation ☒ ≥160 sf or ≥260 lf ☒ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
East Bldg Suite 299 Kitchen	☐	☒	☐	Joint compound	15 LF	☒	☐	☐	☐
North Bldg Suite 87 Kitchen and bathroom	☐	☒	☐	Joint Compound	780 SF	☒	☐	☐	☐
North Bldg Suite 87 Kitchen and bathroom	☐	☒	☐	Flooring	131 SF	☒	☐	☐	☐
North Bldg Suite 89 Kitchen and bathroom	☐	☒	☐	Joint Compound	974 SF	☒	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Freehold, NJ		Disposal Date		City, State MORRISVILLE, PA 19067					
Completed By (Print or Type) Brian Scafiro		Title Estimator		Signature <i>Brian Scafiro</i>			Date 7/22/26		

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

RECEIVED
CHECK # 4685
JUL 27 2026

Date of Notification (1) 7 / 22 / 26		Name of Building Owner/Operator (2) Princeton University-Facilities Operations	
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 2 ☐ Emergency (including justification) ☐ Cancellation	Street Address MacMillan Building, Elm Drive	
		City, State, Zip Code Princeton, NJ 08544	
		Name of Contact Eric Emery	Telephone Number 609-258-3432
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Princeton University-Dean Mathey Court Complex		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)	
Street Address Harrison St & Hartley Ave			
City (5) Princeton		Square Feet	# of Floors 63
County (6) MERCER		Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET	
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007	
Project Manager for Monitoring Firm Michael Keehn		Telephone No. 609-386-8800	License No. 02121
Start Date (10) 7 / 13 / 26	Scheduled Completion Date (11) 1 / 6 / 27		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / ____ PM - ____ AM		Street Address 1123 BEAVER STREET	
		City, State, Zip Code BRISTOL, PA 19007	
Scope of Work (Check all that apply)			
☐ ≥ 3 sf or ≥ 3 lf ☐ Renovation ☒ ≥ 160 sf or ≥ 260 lf ☒ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure			
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
North Bldg Suite 89 Kitchen and bathroom	☐	☒	Flooring
North Bldg Suite 97 Kitchen	☐	☒	Joint Compound
Common Corridors A level-All Buildings (13 total)	☐	☒	Floor tile and mastic
Exterior Courtyard	☐	☒	Waterproofing
			Amount (Specify SF or LF)
			177 SF
			16 LF
			1722 SF
			1940 SF
Abatement Type			
Removal	Repair	Encapsulate	Enclosure
☒	☐	☐	☐
☒	☐	☐	☐
☒	☐	☐	☐
☐	☒	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.	Cubic Yards of Waste
City, State Freehold, NJ		Disposal Date	
		Name of Registered Landfill Fairless Landfill	
		City, State MORRISVILLE, PA 19067	
Completed By (Print or Type) Brian Scafiro	Title Estimator	Signature <i>Brian Scafiro</i>	Date 7/22/26

ASB-41
MAY 11 **BSD0045**

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

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

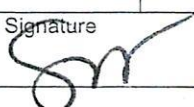
CHECK #4085
RECEIVED

Date of Notification (1) <u>7</u> / <u>22</u> / <u>26</u>		Name of Building Owner/Operator (2) Princeton University-Facilities Operations							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # <u>2</u> ☐ Emergency (including justification) ☐ Cancellation	Street Address MacMillan Building, Elm Drive							
		City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Eric Emery	Telephone Number 609-258-3432						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton University-Dean Mathey Court Complex		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address Harrison St & Hartley Ave									
City (5) Princeton		Square Feet	# of Floors 63						
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC						
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Keehn		Telephone No. 609-386-8800	Telephone No. 215-788-6040						
License No. 02121									
Start Date (10) <u>7</u> / <u>13</u> / <u>26</u>	Scheduled Completion Date (11) <u>1</u> / <u>6</u> / <u>27</u>	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: <u>7:00AM-3:30PM</u> / <u> </u> PM - <u> </u> AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Exterior All Buildings	☐	☒	☐	Storm Window Caulk	4140 LF	☒	☐	☐	☐
Exterior All Buildings	☐	☒	☐	Dryer/kitchen vent caulk	51 LF	☒	☐	☐	☐
Throughout Complex	☐	☒	☐	Caulk on sliding glass doors	342 LF	☒	☐	☐	☐
Units 20, 22, 34, 87, 289 and 299	☐	☒	☐	Joint compound	522 SF	☒	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Freehold, NJ		Disposal Date		City, State MORRISVILLE, PA 19067					
Completed By (Print or Type) Brian Scafiro	Title Estimator	Signature <i>Brian Scafiro</i>				Date <u>7/22/26</u>			

B524045

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 26:27 and 26:28)

RECEIVED

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2) Hamilton Township School District Job #2606-6590 Check #18075							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 90 Park Ave.							
		City, State, Zip Code Hamilton, NJ 08690							
		Name of Contact Business Admin	Telephone Number 609-631-4100						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Steinert HS		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 2900 Klockner Rd.									
City (5) Hamilton Square	Square Feet	# of Floors	Bldg. Age						
County (6) Mercer	County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8) Karl Environmental Group		ASCM No.	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address 20 Lauck Road		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Mohnton, PA 19540		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Mike Krisher		Telephone No. 610-223-1832	License No. 00529						
Start Date (10) 7 / 27 / 26	Scheduled Completion Date (11) 8 / 5 / 26		Name of OSHA Monitor IATL						
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____ AM - ____ PM / ____ PM - ____ AM		Street Address 9000 Commerce Parkway Suite B							
		City, State, Zip Code Mt Laurel, NJ 08054							
Scope of Work (Check all that apply)									
☐ >3 sf or >3 lf ☒ Renovation ☒ >160 sf or >260 lf ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SEE ATTACHED	☐	☐	☒	SEE ATTACHED	SEE ATTACHED	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 40	Name of Registered Landfill FAIRLESS Landfill					
City, State Lumberton, NJ		Disposal Date 8/5/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwendolyn Dumas		Title Operations Manager		Signature 			Date 7-24-26		

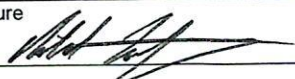
SCOPE OF WORK

LOCATION/WORK AREA	ABATEMENT MATERIAL	ESTIMATED QTY.
Athletic Trainers Room (A044)	9"x9" ACM Material and mastic located below carpet tile.	±290 Square Feet
Athletic Trainers Room (A044)	Mastic for Rubber Base	±75 Linear Feet
Athletic Trainers Room Corridor Door (A044)	±24"x32" Transite Panel above door from Vestibule (A043).	±5 Square Feet
Girls Team Locker Room (A045)	Chalkboard and glue dots.	±35 Square Feet
Girls Locker Room Office/Storage (A048)	9"x9" ACM Material and mastic.	±85 Square Feet
Girls Locker Room Office/Storage (A048)	Mastic for Rubber Base	±40 Linear Feet

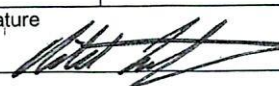
Contractor shall review specifications. Any problems or errors should be reported to the architect and/or environmental consultant immediately.

The school facility may be OCCUPIED during the NON -FRIABLE ABATEMENT. Decon areas and removal of waste shall be from the exterior door in the Girls Team Locker Room. See attached sketch.

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

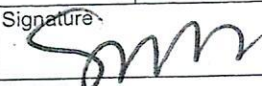
Date of Notification (1) 7/24/26		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address 5 E. Ridgewood Ave.							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Paramus, NJ 07652							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Home		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 5 E. Ridgewood Ave.		Square Feet 2200	# of Floors 2						
City (5) Paramus		Bldg. Age 60 +/-							
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residential Home							
Name of Monitoring Firm Hired by Building Owner (8) Project Manager		ASCM No.	Name of Abatement Contractor (9) All Stages Abatement						
Street Address		Street Address 55 Cannonball Rd.							
City, State, Zip Code		City, State, Zip Code Pompton Lakes, NJ 07442							
Project Manager for Monitoring Firm		Telephone No. 201-600-3184	License No. 01305						
Start Date (10) 7/28/26	Scheduled Completion Date (11) 7/31/26	Name of OSHA Monitor Same As Above							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 4 P.M to 10:00 P.M		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 272 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lower Level		X		VAT					
Name of Registered Waste Hauler All Stages Abatement		NJDEP Waste Hauler ID No. 0036592	Cubic Yards of Waste 4 YD	Name of Registered Landfill Chrin Brothers Sanitary Landfill					
City, State Pompton Lakes, NJ		Disposal Date TBD		City, State Easton, PA					
Completed by Richard Cristofol		Title President		Signature 				Date 7/24/26	

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

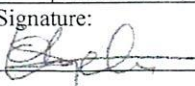
Date of Notification (1) 7/24/26		Name of Building Owner/Operator (2)							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 492 Dorchester Rd.							
		City, State, Zip Code Ridgewood, NJ 07450							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Home		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 492 Dorchester Rd.		Square Feet 2500	# of Floors 2						
City (5) Ridgewood		Bldg. Age 60 +/-							
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residential Home							
Name of Monitoring Firm Hired by Building Owner (8) Project Manager		ASCM No.	Name of Abatement Contractor (9) All Stages Abatement						
Street Address		Street Address 55 Cannonball Rd.							
City, State, Zip Code		City, State, Zip Code Pompton Lakes, NJ 07442							
Project Manager for Monitoring Firm		Telephone No. 201-600-3184	License No. 01305						
Start Date (10) 7/27/26	Scheduled Completion Date (11) 7/30/26	Name of OSHA Monitor Same As Above							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 8 A.M to 4 P.M		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		VAT	380 SF	X			
Name of Registered Waste Hauler All Stages Abatement		NJDEP Waste Hauler ID No. 0036592	Cubic Yards of Waste 4 YD	Name of Registered Landfill Chrin Brothers Sanitary Landfill					
City, State Pompton Lakes, NJ		Disposal Date TBD		City, State Easton, PA					
Completed by Richard Cristofol		Title President		Signature 			Date 7/24/26		

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

RECEIVED

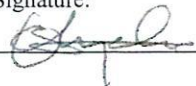
Date of Notification (1) 6 / 18 / 26		Name of Building Owner/Operator (2) Millburn Board of Education / Job #2605-6580 Check #17962 2026							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment #1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 434 Millburn Avenue							
		City, State, Zip Code Millburn, NJ 07041							
		Name of Contact Business Administration	Telephone Number 973-376-3600						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Millburn MS		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 25 Old Short Hill Rd.		Square Feet	# of Floors						
City (5) Millburn, NJ 07041		Bldg. Age							
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) Westchester Environmental		ASCM No. 0127	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address 1248 Wrights Lane		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code West Chester, PA 19380		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Kevin Lovely		Telephone No. 732-390-5858	License No. 00529						
Start Date (10) 6 / 19 / 26	Scheduled Completion Date (11) 6 / 30 / 26		Name of OSHA Monitor IATL						
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Classroom 303	☐	☒	☐	Floor tile & Mastic	576 SF	☒	☐	☐	☐
Classroom 304	☐	☒	☐	Floor tile & mastic	661 SF	☒	☐	☐	☐
Classroom 307	☐	☒	☐	Floor tile & Mastic	692 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill					
City, State Lumberton, NJ		Disposal Date 6/30/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 			Date 6-18-26		

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of Notification (1): 07/22/2026		Name of Building Owner/Operator (2) Newark Board of Education							
Agencies Notified ☐ EPA ☐ DEP ☐ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment#: ☐ Emergency (including justification) ☐ Cancellation	Street Address: 190 Muhammad Ali Avenue Room 209							
		City, State, Zip Code: Newark, NJ 07108							
		Name of Contact: Mr. Benjamin Olagadeyo		Telephone Number: 973-332-4012					
FACILITY INFORMATION									
Name of Facility: Malcolm X. Shabazz High School			Type of Facility (4):						
80 Johnson Avenue			☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private & commercial buildings, homes, etc.)						
City/ (5) Newark	County (6): Essex	County Code (7): 07108	Square Feet: _____ # of Floors: _____ Bldg. Age _____ Current Use: School						
Name of Monitoring Firm Hired by Building Owner: TTI ENVIRONMENTAL, INC.		ASCM No.: 0003	Name of Abatement Contractor (9): Apex Development, Inc.						
Street Address: 1253 North Church Street			Street Address: 358 Broadway						
City, State, Zip Code: Moorestown, NJ 08057			City, State, Zip Code: Newark, NJ 07104						
Project Manager for Monitoring Firm: James A. Guilardi		Telephone No.: 609-314-1683	Telephone No.: (973) 350-0101	License No.: 01215					
Start Date (10): 08/01/2026	Scheduled Completion Date (11): 08/03/2026		Name of OSHA Monitor: Metro Analytical Laboratories						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Describe: ☐ Other Describe:			Street Address: 255 West 36th Street, Suite 203 City, State, Zip Code: New York, New York, 10018						
Scope of Work (Check all that apply): ☐ ≥ 3 sf or ≥ 3 lf ☐ Renovation ☒ ≥ 160 sf or ≥ 260 lf ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulat	Enclosure
AUDITORIUM BALCONY PROJECTION ROOM		X		TRANSITE PANELS	380 SF	*			
		X				*			
		X				*			
Name of Registered Waste Hauler: Century Waste Service/Apex Development, Inc.		NJDEP Waste Hauler ID No.: 04509/0035729		Cubic Yards of Waste: 30	Name of Registered landfill: Fairless Landfill				
City, State: Elizabeth, NJ 07201		Disposal Date:			City, State: Morrisville, PA 19067				
Completed By: Chinyelu Oraegbunam		Title: President		Signature: 		Date: 07/22/2026			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

RECEIVED

Date of Notification (1): 07/22/2026		Name of Building Owner/Operator (2) Newark Board of Education							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment#: _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address: 190 Muhammad Ali Avenue Room 209							
		City, State, Zip Code: Newark, NJ 07108							
		Name of Contact: Mr. Benjamin Olagadeyo		Telephone Number: 973-332-4012					
FACILITY INFORMATION									
Name of Facility: East Ward Elementary School			Type of Facility (4): ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private & commercial buildings, homes, etc.)						
104-128 Oliver Street									
City/ (5) Newark	County (6): Essex	County Code (7): 07105	Square Feet: _____ # of Floors: _____						
Name of Monitoring Firm Hired by Building Owner: TTI ENVIRONMENTAL, INC.			ASCM No.: 0003	Name of Abatement Contractor (9): Apex Development, Inc.					
Street Address: 1253 North Church Street			Street Address: 358 Broadway						
City, State, Zip Code: Moorestown, NJ 08057			City, State, Zip Code: Newark, NJ 07104						
Project Manager for Monitoring Firm: James A. Guilardi		Telephone No.: 609-314-1683	Telephone No.: (973) 350-0101	License No.: 01215					
Start Date (10): 08/05/2026		Scheduled Completion Date (11): 08/21/2026		Name of OSHA Monitor: Metro Analytical Laboratories					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Describe: _____ ☒ Other Describe: _____			Street Address: 255 West 36th Street, Suite 203						
			City, State, Zip Code: New York, New York, 10018						
Scope of Work (Check all that apply): ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulat	Enclosure
CAFETERIA/KITCHEN		X		PIPE INSULATION	75 LF	*			
KITCHEN CRAWLSPACE		X		PIPE INSULATION	220 LF	*			
		X				*			
Name of Registered Waste Hauler: Century Waste Service/Apex Development, Inc.		NJDEP Waste Hauler ID No.: 04509/0035729		Cubic Yards of Waste: 30	Name of Registered landfill: Fairless Landfill				
City, State: Elizabeth, NJ 07201		Disposal Date:			City, State: Morrisville, PA 19067				
Completed By: Chinyelu Oraegbunam		Title: President		Signature: 		Date: 07/22/2026			

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

RECEIVED

Date of Notification (1) 07/14/2026		Name of Building Owner/Operator (2)					
Agencies Notified	Type Notification	Street Address					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	9 Oxford Drive, City, State, Zip Code Livingston, NJ 07039					
		Name of Contact	Telephone Number				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) residential		Type of Facility (4)					
Street Address 9 Oxford Drive,		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Livingston		Square Feet 2,160	# of Floors 3				
County (6) Essex		Bldg. Age 76					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9)					
Street Address		Street Address					
City, State, Zip Code		City, State, Zip Code					
Project Manager for Monitoring Firm		Telephone No.	License No.				
Start Date (10) 07/15/2026		Scheduled Completion Date (11) 07/16/2026					
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address					
		City, State, Zip Code					
Scope of Work (Check All That Apply)		Name of OSHA Monitor					
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition					
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Lower Level	Yes	No	N/A	Tile and Mastic	200 SF	✓	
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill			
Acme Professional Services Corp		0038176	2	Fairless Landfill			
City, State Kinnelon, NJ		Disposal Date	City, State				
		07/16/2026	Morrisville, PA				
Completed by		Title	Signature		Date		
Samantha Zamora		Project Coordinator	<i>Samantha Zamora</i>		07/14/2026		

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

Date of Notification (1) 07/23/2026		Name of Building Owner/Operator (2)							
Agencies Notified		Street Address							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		348 Hennessy Street, City, State, Zip Code Haworth, NJ 07641							
Type Notification		Name of Contact							
☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation		Telephone Number AUG - 3 2026							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
residential		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address		Square Feet	# of Floors						
348 Hennessy Street,		2546	3						
City (5)		Bldg. Age							
Haworth		81							
County (6)	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Bergen									
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9)							
Street Address		Street Address							
City, State, Zip Code		City, State, Zip Code							
170 Kinnelon Rd, Suite 32		Kinnelon, NJ 07405							
Project Manager for Monitoring Firm		Telephone No.	License No.						
		973-938-5266	02003						
Start Date (10)	Scheduled Completion Date (11)	Name of OSHA Monitor							
07/24/2026	07/25/2026	Arsenije Adamov							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		170 Kinnelon Rd, Suite 32							
		City, State, Zip Code							
		Kinnelon, NJ 07405							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		☒		ACM Tile and mastic	250 SF	☒			
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill					
Acme Professional Services Corp		0038176	2	Fairless Landfill					
City, State		Disposal Date		City, State					
Kinnelon, NJ		07/27/2026		Morrisville, PA					
Completed by		Title	Signature			Date			
Samantha Zamora		Project Coordinator	<i>Samantha Zamora</i>			07/23/2026			

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

CH/C# 1950
RECEIVED

Date of Notification (1) 7/29/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 38 Wendy Rd.							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Colonia, NJ 07067							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4)							
Street Address 38 Wendy Rd.		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Colonia, NJ 07067		Square Feet 1,551	# of Floors 2						
County (6) Middlesex		Bldg. Age 1949							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) DANVIC CONTRACTING LLC						
Street Address		Street Address 240 South 5th St.							
City, State, Zip Code		City, State, Zip Code Elizabeth, NJ 07206							
Project Manager for Monitoring Firm		Telephone No.	License No.						
		908-906-4123	01355						
Start Date (10) 7/29/2026	Scheduled Completion Date (11) 8/5/2026	Name of OSHA Monitor Iris Environmental Laboratories, Inc.							
Occupancy Status During Abatement (Check Only One)		Street Address 2333 Route 22 West							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code Union, NJ 07083							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
2nd floor attic knee wall closet			X	Ductwork Insulation	12 LF			X	
2nd floor attic knee wall closet			X	Transite Vent Pipe	6 LF			X	
2nd floor bedrooms & hallway			X	VAT	600 SF	X			
Name of Registered Waste Hauler Danvic Contracting LLC		NJDEP Waste Hauler ID No. 37574		Cubic Yards of Waste TBD	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth, NJ		Disposal Date TBD		City, State Morrisville, PA					
Completed by Jeymy Donneys		Title Owner		Signature Jeymy Donneys		Date 7/29/2026			

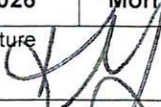
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 07 / 29 / 26		Name of Building Owner/Operator (2) Seton Hall University		CHECK#4897 RECEIVED					
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 400 South Orange Avenue		City, State, Zip Code South Orange, NJ 07079					
		Name of Contact		Telephone Number					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)						
Street Address 411 Wilden Place			City (5) South Orange						
City (5) South Orange			Square Feet 2,000	# of Floors 2	Bldg. Age 50+				
County (6) ESSEX		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Residence					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) EA Services Corporation						
Street Address		Street Address 530 Church Street- Suite 6							
City, State, Zip Code		City, State, Zip Code Ridgefield, NJ 07657							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 201-295-1700	License No. 01074					
Start Date (10) 07 / 30 / 26		Scheduled Completion Date (11) 08 / 01 / 26		Name of OSHA Monitor Same as above					
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-4:00PM/ PM- AM			Street Address						
			City, State, Zip Code						
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 120 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Second Floor-Bedroom	☐	☒	☐	Ceiling Plaster		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler EA Services Corporation		NJDEP Waste Hauler ID No. 103879		Cubic Yards of Waste tbd	Name of Registered Landfill Minerva Enterprises				
City, State Ridgefield, NJ				Disposal Date tbd	City, State Waynesburg, OH				
Completed By (Print or Type) Marisabel Toribio		Title Clerical		Signature		Date			

PAID

File Number 27-2026

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

Date of Notification (1) 07 / 23 / 26		Name of Building Owner/Operator (2) # 2607-3577 check # 4236		RECEIVED							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 708 Waterford Drive City, State, Zip Code Cinnaminson NJ 08077 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION											
Name of Facility Where Abatement is Taking Place (3) Residential Property				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 708 Waterford Drive				Square Feet 1788 # of Floors 2 Bldg. Age 1967							
City (5) Cinnaminson		County (6) Burlington		County Code (7) (STATE USE ONLY) _____ Current Use (Prior if being demolished) Residential							
Name of Monitoring Firm Hired by Building Owner (8) Finog Environmental		ASCM No. _____		Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.							
Street Address 617 Stokes Road #4-318		City, State, Zip Code Medford NJ 08055		Street Address 70 Stacy Haines Road Suite 4							
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994		City, State, Zip Code Lumberton NJ 08048							
Start Date (10) 08 / 03 / 26		Scheduled Completion Date (11) 08 / 04 / 26		Telephone No. 609-702-0400 License No. 00862							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM				Name of OSHA Monitor EMSL Analytical, Inc.							
Scope of Work (Check all that apply) ☒ ≥3 sf or ≥3 lf ☒ Renovation ☐ ≥160 sf or ≥260 lf ☐ Demolition				☒ WRAP + CU ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF) 17 LF		Abatement Type			
								Removal	Repair	Encapsulate	Enclosure
Basement		☐ Yes ☐ No ☒ N/A		Duct & Duct Paper		17 LF		☒	☐	☐	☐
		☐ Yes ☐ No ☒ N/A						☐	☐	☐	☐
		☐ Yes ☐ No ☐ N/A						☐	☐	☐	☐
		☐ Yes ☐ No ☐ N/A						☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680		Cubic Yards of Waste 80		Name of Registered Landfill Fairless Hills					
City, State Lumberton, NJ		Disposal Date 08/04/2026		City, State Morrisville, PA							
Completed By (Print or Type) Kaysi Gruner		Title Office Admin		Signature 				Date 7/23/26			

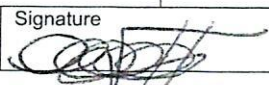
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

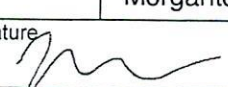
Print Form

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Date of Notification (1) 07/27/2026		Name of Building Owner/Operator (2) Fabrik LLC							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 202 Armstrong Ave		City, State, Zip Code Jersey City NJ							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 202 Armstrong Ave		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Jersey City		Square Feet	# of Floors						
County (6) Hudson		County Code (7) (STATE USE ONLY)	Bldg. Age						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) E & V Services LLC						
Street Address		Street Address 711 Sip Street							
City, State, Zip Code		City, State, Zip Code Union City NJ 07087							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 201-875-7290						
Start Date (10) 08/07/2026		Scheduled Completion Date (11) 08/15/2026	License No. 02053						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: _____		Name of OSHA Monitor							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
EXTERIOR		X		ROOF	2168 SF	X			
Name of Registered Waste Hauler TRISTATE TRANSFER INC		NJDEP Waste Hauler ID No. 24-1129	Cubic Yards of Waste 2	Name of Registered Landfill MINERVA ENTERPRISES LLC					
City, State BRONX NY 10474		Disposal Date		City, State WAYNESBURG OH 44688					
Completed by Angel Penaherrera		Title Owner		Signature 			Date 07/27/2026		

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

RECEIVED

Date of Notification (1) 7/27/2026		Name of Building Owner/Operator (2) JUL 30 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 691 River Road City, State, Zip Code Teaneck NJ 07666 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Single Family		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 691 River Road		Square Feet unknown							
City (5) Teaneck		# of Floors 3							
County (6) Bergen		Bldg. Age unknown							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TBD		ASCM No. _____							
Street Address		Name of Abatement Contractor (9) Gold Coast Management LLC							
City, State, Zip Code		Street Address 30 Sherman Ave							
Project Manager for Monitoring Firm TBD		City, State, Zip Code Jersey City, NJ 07307							
Telephone No. _____		Telephone No. 908-270-8556							
License No. 02109		Name of OSHA Monitor David Cuevas							
Start Date (10) 7/30/2026		Scheduled Completion Date (11) 7/31/2026							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 254 Ridgewood Ave							
City, State, Zip Code Glen Ridge NJ 07028									
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	VAT	300 SF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. NJ860		Cubic Yards of Waste 5	Name of Registered Landfill Conestoga Landfill				
City, State Elizabeth, NJ		Disposal Date		City, State Morgantown PA					
Completed by John Kim		Title President		Signature 		Date 7/27/2025			

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

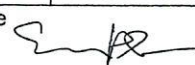
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JUL 31 2026
ASBESTOS CONTROL

Date of Notification (1) 7/24/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	113 Jacobstown New Egypt Road							
		City, State, Zip Code Wrightstown NJ 08562							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
Street Address 113 Jacobstown New Egypt Road		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Wrightstown	Square Feet 2,317	# of Floors 1	Bldg. Age 67						
County (6) Burlington	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Finog Environmental Inc		ASCM No.	Name of Abatement Contractor (9) Alliance Service Professionals LLC						
Street Address 617 Stokes Road, Suite 4-318		Street Address 700 Monmouth Road							
City, State, Zip Code Medford, NJ 08055		City, State, Zip Code Chesterfield, NJ 08515							
Project Manager for Monitoring Firm Mark Rubnitz		Telephone No. 888-715-2211	Telephone No. 609-921-4001						
License No. 02157									
Start Date (10) 7/27/2026	Scheduled Completion Date (11) 8/4/2026	Name of OSHA Monitor Mark Rubnitz							
Occupancy Status During Abatement (Check Only One)		Street Address 617 Stokes Road, Suite 4-318							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		City, State, Zip Code Medford, NJ 08055							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		x		9"x9" VAT & Mastic	1,400 SF	x			
Basement		x		ACM Joint Compound	3,241 SF	x			
Name of Registered Waste Hauler Freehold Cartage, Inc.		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 40	Name of Registered Landfill Republic's Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 8/5/2026		City, State Morgantown, PA					
Completed by Jacob Hupfl		Title President		Signature Jacob Hupfl			Date 7/24/2026		

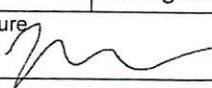
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

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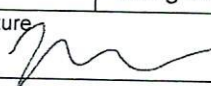
JUL 31 2026

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 18 Brinkerhoff Ave City, State, Zip Code Freehold, NJ 07728 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 18 Brinkerhoff Ave		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
City (5) Freehold	Square Feet 2500	# of Floors 3	Bldg. Age 155						
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired by Building Owner (8) AZ Solution Consulting		ASCM No.	Name of Abatement Contractor (9) Brick Industries, Inc.						
Street Address 27 Susquehanna Ave		Street Address PO Box 915							
City, State, Zip Code Rochelle Park, NJ 07662		City, State, Zip Code Brick, NJ 08723							
Project Manager for Monitoring Firm Aleksander Zivanov		Telephone No. 347-612-1572	Telephone No. 7328997499 License No. 01196						
Start Date (10) 7 / 27 / 26	Scheduled Completion Date (11) 7 / 28 / 26	Name of OSHA Monitor AZ Solution Consulting							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____ AM - ____ PM / ____ PM - ____ AM		Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Basement	☐	☐	☒	Pipe insulation	260LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 7/29/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 			Date 7/24/26		

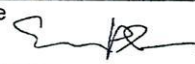
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 7/21/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address 13 Briarwood							
☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Somerset, NJ 08873							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Single Family		Type of Facility (4)							
Street Address 13 Briarwood		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Somerset	Square Feet unknown	# of Floors 1	Bldg. Age unknown						
County (6) Somerset	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TBD		ASCM No.	Name of Abatement Contractor (9) Gold Coast Management LLC						
Street Address		Street Address 30 Sherman Ave							
City, State, Zip Code		City, State, Zip Code Jersey City, NJ 07307							
Project Manager for Monitoring Firm TBD		Telephone No. 908-270-8556	License No. 02109						
Start Date (10) 7/23/2026	Scheduled Completion Date (11) 7/24/2026	Name of OSHA Monitor John Kim							
Occupancy Status During Abatement (Check Only One)		Street Address 254 Ridgewood Ave							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: <u>Basement</u>		City, State, Zip Code Glen Ridge NJ 07028							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☐ Renovation ☐ ≥160 sf or ≥260 lf ☐ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	VAT	240 SF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. NJ860	Cubic Yards of Waste 5	Name of Registered Landfill Conestoga Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Morgantown PA					
Completed by John Kim		Title President	Signature 			Date 7/21/2025			

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

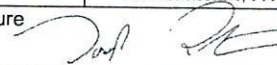
Date of Notification (1) 7/22/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 1139 Stasia City, State, Zip Code Teaneck, NJ 07666 Name of Contact Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Single Family		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 13 Briarwood		Square Feet unknown	# of Floors 1						
City (5) Somerset		Bldg. Age unknown							
County (6) Somerset	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) TBD		ASCM No.	Name of Abatement Contractor (9) Gold Coast Management LLC						
Street Address		Street Address 30 Sherman Ave							
City, State, Zip Code		City, State, Zip Code Jersey City, NJ 07307							
Project Manager for Monitoring Firm TBD		Telephone No. 908-270-8556	License No. 02109						
Start Date (10) 7/28/2026	Scheduled Completion Date (11) 7/29/2026	Name of OSHA Monitor John Kim							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: Basement		Street Address 254 Ridgewood Ave City, State, Zip Code Glen Ridge NJ 07028							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Kitchen			X	VAT	240 SF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. NJ860	Cubic Yards of Waste 5	Name of Registered Landfill Conestoga Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Morgantown PA					
Completed by John Kim		Title President	Signature 			Date 7/22/2025			

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

Date of Notification (1) <u>7</u> / <u>23</u> / <u>26</u>		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)		Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation							
Street Address 509 E Park Dr		City, State, Zip Code Hainsport, NJ 08036							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 8 Stirrup Lane		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
City (5) Willingboro		Square Feet 2156	# of Floors 2						
County (6) Burlington		County Code (7) (STATE USE ONLY)	Bldg. Age 68						
Name of Monitoring Firm Hired by Building Owner (8) Indoor Air Services		ASCM No.	Name of Abatement Contractor (9) Brick Industries, Inc.						
Street Address 2015 Old York Road		Street Address PO Box 915							
City, State, Zip Code Burlington, NJ 08016		City, State, Zip Code Brick, NJ 08723							
Project Manager for Monitoring Firm Tom Worrell		Telephone No. 609-351-1362	License No. 01196						
Start Date (10) <u>7</u> / <u>24</u> / <u>26</u>	Scheduled Completion Date (11) <u>7</u> / <u>25</u> / <u>26</u>	Name of OSHA Monitor Indoor Air Services							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 2015 Old York Road							
		City, State, Zip Code Burlington, NJ 08016							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Sunporch	☐	☐	☐	Interior siding	150SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 7/27/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 			Date 7/23/26		

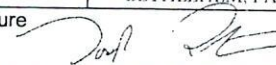
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2)					
Agencies Notified	Type Notification	Street Address 36 SHIP DR					
☒ EPA ☐ DEP ☐ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code LITTLE EGG HARBOR NJ 08087					
		Name of Contact	Telephone Number				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 36 SHIP DR		Square Feet	# of Floors				
City (5) LITTLE EGG HARBOR		Bldg. Age					
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals				
Street Address		Street Address 6 White Dove Court					
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701					
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 732-719-5649				
Start Date (10) 08/06/2026		Scheduled Completion Date (11) 08/06/2026	License No. 1200				
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Name of OSHA Monitor AAA Lead Professionals					
		Street Address 6 White Dove Court					
		City, State, Zip Code Lakewood, NJ, 08701					
Scope of Work (Check All That Apply)							
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition					
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Exterior	Yes	No	N/A	Siding	200 SF	☒	
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 3	Name of Registered Landfill IESI			
City, State Lakewood, NJ		Disposal Date 08/06/2026		City, State BETHLEHEM, PA			
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 		Date 07/22/2026		

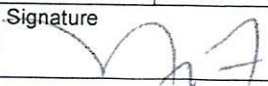
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

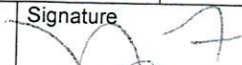
Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) Gefen Construction					
Agencies Notified ☒ EPA ☐ DEP ☐ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation					
Street Address 212 Second St		City, State, Zip Code Lakewood NJ 08701					
Name of Contact		Telephone Number					
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 1503 Monmouth Ave		Square Feet					
City (5) Lakewood		# of Floors					
County (6) Ocean		Bldg. Age					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.					
Street Address		Name of Abatement Contractor (9) AAA Lead Professionals					
City, State, Zip Code		Street Address 6 White Dove Court					
Project Manager for Monitoring Firm		City, State, Zip Code Lakewood, NJ, 08701					
Telephone No.		Telephone No. 732-719-5649					
Start Date (10) 08/05/2026		License No. 1200					
Scheduled Completion Date (11) 08/05/2026		Name of OSHA Monitor AAA Lead Professionals					
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: _____		Street Address 6 White Dove Court					
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf ☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code Lakewood, NJ, 08701					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Interior		Floor Tile	150 SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI			
City, State Lakewood, NJ		Disposal Date 08/05/2026		City, State BETHLEHEM, PA			
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 		Date 07/22/2026		

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

RECEIVED

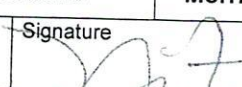
Date of Notification (1) 07 / 22 / 26		Name of Building Owner/Operator (2) K & B Remodeling							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 1088 Mayfair Drive							
		City, State, Zip Code Rahway, NJ 07065							
		Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 214 Homestead Avenue									
City (5) Point Pleasant	Square Feet 1800	# of Floors 1	Bldg. Age 80						
County (6) Ocean	County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Residence						
Name of Monitoring Firm Hired by Building Owner (8) Guardian Contracting, Inc.		ASCM No.	Name of Abatement Contractor (9) Guardian Contracting, Inc.						
Street Address 1889 Route 9, Unit 61		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code Toms River, New Jersey 08755		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 08 / 27 / 26	Scheduled Completion Date (11) 08 / 31 / 26		Name of OSHA Monitor E.M.S.L. Analytical						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM-_____ PM/_____ PM-_____ AM		Street Address 1056 Stelton							
		City, State, Zip Code Piscataway, New Jersey 08854							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ Renovation ☒ ≥ 160 sf or ≥ 260 lf ☒ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
living room & hallway	☐	☒	☐	asbestos containing textured paing	720 sf	☒	☐	☐	☐
exterior	☐	☒	☐	roof tar from 2 chimneys	20 sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223		Cubic Yards of Waste 60	Name of Registered Landfill Fairless Landfill				
City, State Toms River, New Jersey		Disposal Date 08/31/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 		Date 7/22/26			

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

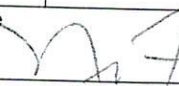
Date of Notification (1) 07 / 22 / 26		Name of Building Owner/Operator (2) Potts Excavating, Inc.					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 316 Main Street					
		City, State, Zip Code West Creek, NJ 08092					
		Name of Contact	Telephone Number				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 20 Oak Street		Square Feet 1100	# of Floors 1				
City (5) Manahawkin		Bldg. Age 80					
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence					
Name of Monitoring Firm Hired by Building Owner (8) N/A		Name of Abatement Contractor (9) Guardian Contracting, Inc.					
Street Address		Street Address 1889 Route 9, Unit 61					
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755					
Project Manager for Monitoring Firm		Telephone No. 732-349-9932	License No. 00624				
Start Date (10) 08 / 19 / 26	Scheduled Completion Date (11) 08 / 21 / 26	Name of OSHA Monitor E.M.S.L. Analytical					
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM		Street Address 1056 Stelton					
Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code Piscataway, New Jersey 08854					
Location of Asbestos-Containing Material (ACM) IN Facility (13) TO BE ABATED	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 1400 sf	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
exterior-house & garage	☐ Yes ☒ No ☐ N/A	asbestos siding		☒	☐	☐	☐
	☐ Yes ☐ No ☐ N/A			☐	☐	☐	☐
	☐ Yes ☐ No ☐ N/A			☐	☐	☐	☐
	☐ Yes ☐ No ☐ N/A			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill			
City, State Toms River, New Jersey		Disposal Date 08/21/26	City, State Morrisville, Pennsylvania				
Completed By (Print or Type) Nicholas Fernicola	Title Project Manager	Signature 	Date 7/22/26				

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

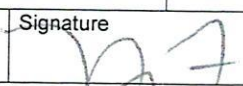
RECEIVED

Date of Notification (1) 07 / 23 / 26		Name of Building Owner/Operator (2) Tradewinds Builders, LLC							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 2908 Baltic Avenue							
		City, State, Zip Code Beach Haven Gardens, NJ 08008-2646							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 27 E. 27th Street		Square Feet 1100							
City (5) Beach Haven		# of Floors 1	Bldg. Age 80						
County (6) Ocean		County Code (7) (STATE USE ONLY)							
Name of Monitoring Firm Hired by Building Owner (8) N/A		Name of Abatement Contractor (9) Guardian Contracting, Inc.							
Street Address		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm		Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 08 / 04 / 26	Scheduled Completion Date (11) 08 / 05 / 26	Name of OSHA Monitor E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 1056 Stelton							
Scope of Work (Check all that apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code Piscataway, New Jersey 08854							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior	☐	☒	☐	flue pipe	12 lf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 1	Name of Registered Landfill Fairless Landfill					
City, State Toms River, New Jersey		Disposal Date 08/05/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/23/26		

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

Date of Notification (1) 07 / 23 / 26		Name of Building Owner/Operator (2) Potts Excavating, Inc.							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 316 Main Street							
		City, State, Zip Code West Creek, NJ 08092							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 21 E Tennessee Avenue		Square Feet 1750	# of Floors 1						
City (5) Long Beach Twp.		Bldg. Age 80							
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) Guardian Contracting, Inc.						
Street Address		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 732-349-9932						
Start Date (10) 08 / 04 / 26		Scheduled Completion Date (11) 08 / 07 / 26	License No. 00624						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM		Name of OSHA Monitor E.M.S.L. Analytical							
Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 1750 sf	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior	☐	☒	☐	asbestos siding		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill					
City, State Toms River, New Jersey		Disposal Date 08/07/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/23/26		

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

Date of Notification (1) 07 / 23 / 26		Name of Building Owner/Operator (2) Jacobs Environmental Services							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☒ Cancellation	Street Address 516 Manasquan Court							
		City, State, Zip Code Brick, NJ 08724							
		Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 1809 Atlantic Avenue		Square Feet 2400	# of Floors 1						
City (5) Manasquan		Bldg. Age 80							
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Guardian Contracting, Inc.		Name of Abatement Contractor (9) Guardian Contracting, Inc.							
Street Address 1889 Route 9, Unit 61		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code Toms River, New Jersey 08755		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 07 / 23 / 26	Scheduled Completion Date (11) 07 / 31 / 26								
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM		Name of OSHA Monitor E.M.S.L. Analytical							
Street Address 1056 Stelton		City, State, Zip Code Piscataway, New Jersey 08854							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ Renovation ☒ Full Containment with Negative Pressure ☒ ≥160 sf or ≥260 lf ☒ Demolition ☐ Mini-Enclosure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
interior	☐	☒	☐	asbestos containing sheetrock	4800 sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 60	Name of Registered Landfill Fairless Landfill					
City, State Toms River, New Jersey		Disposal Date 07/31/26	City, State Morrisville, Pennsylvania						
Completed By (Print or Type) Nicholas Fernicola	Title Project Manager	Signature 				Date 7/23/26			

1862

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

RECEIVED

Date of Notification (1) 07/24/2026		Name of Building Owner/Operator Fort Lee Board of Education	
Agencies Notified ☒ EPA ☐ DCA ☒ DOL ☐ DEP ☒ DOH		Notification Type ☐ Initial Notification ☒ Amended #1 ☒ Emergency notification (including justification) ☐ Cancelled	
Street Address 3000 Lemoine Avenue		City, State, Zip Code Fort Lee	
City (5) Fort Lee		County (6) Bergen	
County Code (7) (State Use Only)		Name of Contact David Cabrera	
Telephone Number 201-290-2190		ASBESTOS CONTAINMENT LICENSING	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Fort Lee High School		Type of Facility (4)x ☐ School (K-12) Subchapter 8 ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Sq. Feet: 40,000 # of Floors: 2 Bldg. Age: 100 Years old		Current Use (prior if being demolished):	
Name of Monitoring Firm Hired by Bldg. Owner Karl Associates		ASCM No.	
Name of Contractor (9) BL Contracting Inc.		Street Address 5 Marguerite Lane	
City State, Zip Code Towaco NJ 07082		Telephone Number 973-901-0153	
License Number 01265		Name of OSHA Monitoring BL Contracting Inc	
Scheduled Start Date (10) 07/25/2026		Scheduled Completion Date (11) 07/28/2026	
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe ☒ Other - Describe: Monday- Saturday 7 am- 4pm		Street Address 5 Marguerite Lane	
City, State, Zip Code Towaco NJ 07082		Source of Work (Check all that apply) ☒ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Wrap & Cut Procedure ☐ Full Containment ☒ Tent & Glove-bag Procedure ☐ Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) in Facility (13)		Is Location Normally Used Solely by Main/Custodial Staff (12) YES NO NA	
Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other misc.)		Amount (Specify SF or LF)	
Abatement Type Remove Repair Encap Enclos			
Girls Bathroom 1 st floor		☒	
Asbestos Fittings Insulation		3 LF	
Girls Bathroom 2 nd floor		☒	
Asbestos Fittings Insulation		5 LF	
Name of Reg. Waste Hauler BL Contracting Inc		NJDEP Waste Hauler ID # 0036784	
Cubic Yards of Waste 5		Name of Registered Landfill T.R.R..F	
Disposal Date 08/07/2026		City, State Tully town, PA	
Completed by (Print or Type) Nedo Vasilic		Title Project Manager	
Signature Nedo Vasilic		Date 07/24/2026	

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

RECEIVED

Date of Notification (1) 07/20/2026		Name of Building Owner/Operator Hanover Park Regional Highschool District	
Agencies Notified	Notification Type	Street Address 75 Mount Pleasant Avenue	
☒ EPA ☐ DCA ☒ DOL ☐ DEP ☒ DOH	☐ Initial Notification ☐ Amended #1 ☒ Emergency notification (including justification) ☐ Cancelled	City, State, Zip Code East Hanover, NJ, 07936	
		Name of Contact Maria C. Carrell	Telephone Number (973) 887-0320
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Hanover Park High School		Type of Facility (4)x ☐ School (K-12) Subchapter 8 ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings., homes, etc.)	
Street Address 63 Mt Pleasant Avenue		Sq. Feet: 166,264 # of Floors: 1 Bldg. Age: 70 years old Current Use (prior if being demolished):	
City (5) East Hanover NJ	County (6) Morris	County Code (7) (State Use Only)	
City (5) 07936			
Name of Monitoring Firm Hired by Bldg. Owner Westchester Environmental LLC		ASCM No.	
1248 Wrights Lane		Name of Contractor (9) BL Contracting Inc.	
West Chester PA 19308		Street Address 5 Marguerite Lane	
Project Manager for Monitoring Firm Phillip Conteh		City, State, Zip Code Towaco NJ 07082	
(610) 431-7545		Telephone Number 973-901-0153	License Number 01265
Scheduled Start Date (10) 07/21/2026	Scheduled Completion Date (11) 07/23/2026	Name of OSHA Monitoring BL Contracting Inc	
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Describe: Monday - Saturday 7 am - 4pm		Street Address 5 Marguerite Lane	
		City, State, Zip Code Towaco NJ 07082	
Source of Work (Check all that apply)			
≥ 3 sf or ≥ 3 lf X ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Wrap & Cut Procedure ☐ Full Containment ☐ Tent Glove-bag Procedure ☒ Non-Friable Procedure			
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Normally Used Solely by Main/Custodial Staff (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other misc.)	Amount (Specify SF or LF)
South Side Cafe	☒	Floor Tiles & Mastic Glue	40 SF
North Side Cafe	☒	Floor Tiles & Mastic Glue	40 SF
Name of Reg. Waste Hauler BL Contracting Inc	NJDEP Waste Hauler ID # 0036784	Cubic Yards of Waste 2	Name of Registered Landfill T.R.R..F
		Disposal Date 07/30/2026	City, State Tully town, PA
Completed by (Print or Type) Nedo Vasilic	Title Project Manager	Signature <i>Nedo Vasilic</i>	Date 07/30/2026

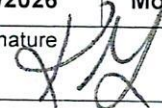
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Check # **13809**

B & G Project # 2026-116

Date of Notification (1) July 29, 2026		Name of Building Owner/Operator (2) Montclair Township Board of Education							
Agencies Notified	Type Notification	Street Address 22 Valley Road							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Montclair, NJ 07042							
		Name of Contact Business Administration	Telephone Number 973-509-4000						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Glenfield School - Sub 8		Type of Facility (4)							
Street Address 25 Maple Street		☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Montclair		Square Feet	# of Floors						
County (6) Essex		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Educational							
Name of Monitoring Firm Hired by Building Owner (8) Detail Associates, Inc.		ASCM No. 12	Name of Abatement Contractor (9) B & G Restoration, Inc.						
Street Address 560 Sylvan Avenue, Suite 3065		Street Address 1234 Route 23							
City, State, Zip Code Englewood Cliffs, NJ 07632		City, State, Zip Code Butler, NJ 07405							
Project Manager for Monitoring Firm Steven Jaraczewski		Telephone No. 201-569-6708	Telephone No. 973-696-6869						
Start Date (10) 07/31/2026 @ 3:00 pm		Scheduled Completion Date (11) 08/11/2026	License No. 00378						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor B & G Restoration, Inc.							
☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours Other - Describe: Weekends Only - Unoccupied		Street Address 1234 Route 23							
		City, State, Zip Code Butler, NJ 07405							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Rooms 212, 213, 230, 232A, 232B, 242		X		Floor tile under carpeting	3,500 SF	X			
Name of Registered Waste Hauler B & G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 35	Name of Registered Landfill Grand Central Landfill					
City, State Butler, NJ		Disposal Date 08/12/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna	Title Secretary / Treasurer		Signature Gordana Luna			Date 07/29/2026			

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

Date of Notification (1) 07 / 23 / 26		Name of Building Owner/Operator (2) City of Wildwood Job #2607-3579 check#4240							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 4400 New Jersey Avenue							
		City, State, Zip Code Wildwood NJ 08260							
		Name of Contact Richard Harron	Telephone Number 609-435-2078						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) City Hall		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 4400 New Jersey Avenue									
City (5) Wildwood	Square Feet 34500	# of Floors 2	Bldg. Age 1962						
County (6) Cape May	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Offices							
Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting LLC		Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.							
Street Address 304 Harper Drive Suite 207		Street Address 70 Stacy Haines Road Suite 4							
City, State, Zip Code Moorestown NJ 08057		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Rafael Torres	Telephone No. 856-581-9055	Telephone No. 609-702-0400	License No. 00862						
Start Date (10) 08 / 04 / 26	Scheduled Completion Date (11) 08 / 04 / 26	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____AM-_____PM/_____PM-_____AM		Street Address 200 U.S. Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☒ Renovation ☐ Full Containment with Negative Pressure ☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Mini-Enclosure ☐ ☐ ☒ Glovebag Procedure ☐ ☐ ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Boiler Room	☐	☐	☒	Pipe Insulation/Elbow Insulation	8 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680		Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills				
City, State Lumberton, NJ		Disposal Date 08/04/2026		City, State Morrisville, PA					
Completed By (Print or Type) Kaysi Gruner		Title Admin		Signature 		Date 7/23/26			

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

4687

Check # 4687

Date of Notification (1) 7/24/2026		Name of Building Owner / Operator (2) Warren Township BOE	
Agencies Notified	Type Notification	Street Address 213 Mount Horeb Road	
☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Emergency ☐ Cancellation	City, State & Zip Code Warren NJ, 07059	
		Name of Contact Michael Pate	Telephone Number 908-753-5300

RECEIVED
JUL 28 2026

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Mount Horeb School			Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 80 Mount Horeb Road			Square Feet 20000	# of Floors 1	Bldg. Age 76
City (5) Warren	County (6) Somerset	County Code (7)	Current Use (Prior if being demolished) School		
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL LLC		
Street Address 1253 North Church Street			Street Address 1123 BEAVER STREET		
City, State & Zip Code Moorestown, NJ 08057			City, State & Zip Code BRISTOL, PA 19007		
Project Manager for Monitoring Firm		Telephone Number 609-304-3969	Telephone Number 215-788-6040	License Number 02121	
Scheduled Start Date (10) August 11, 2026		Scheduled Completion Date (11) August 12, 2026		Name of OSHA Monitor BRISTOL ENVIRONMENTAL LLC	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: 10pm -6am ☐ Facility Occupied During Abatement			Street Address 1123 BEAVER STREET		
			City, State & Zip Code BRISTOL, PA 19007		

Scope of Work (Check all that apply)

- | | | |
|--|--|--|
| ☒ ≥ 3 sf or ≥ 3 lf | ☒ Renovation | ☐ Full Containment with Negative Pressure |
| ☐ ≥ 160 sf ≥ 260 lf | ☐ Demolition | ☒ Mini-Enclosure |
| | | ☐ Glove Bag Procedures |
| | | ☒ Non-Exempted and Non-Friable Procedure |

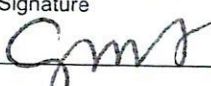
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclose
Room 13C	☒	☐	☐	Chalkboard mastic	50 SF	☒	☐	☐	☐
	☐	☐	☐			☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐

Name of Registered Waste Hauler Freehold Cartage Inc		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill	
City, State Freehold, NJ		Disposal Date TBD		City, State Morgantown, PA	
Completed By (Print or Type) PATRICK T. DeCARO		Title Estimator	Signature <i>Patrick DeCaro</i>		Date 7/24/2026

PD26019

Date of Notification (1): 07/23/2026		Name of Building Owner/Operator (2) Newark Board of Education					
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment#: _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address: 190 Muhammad Ali Avenue Room 209					
		City, State, Zip Code: Newark, NJ 07108					
		Name of Contact: Mr. Benjamin Olagadeyo	Telephone Number: 973-332-4012				
FACILITY INFORMATION							
Name of Facility: Dr. William H. Horton Elementary School		Type of Facility (4): ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private & commercial buildings, homes, etc.)					
291 N 7 th Street		Square Feet: _____ # of Floors: _____					
City/ (5) Newark	County (6): Essex	County Code (7): 07107	Bldg. Age Current Use: School				
Name of Monitoring Firm Hired by Building Owner: TTI ENVIRONMENTAL, INC.		ASCM No.: 0003	Name of Abatement Contractor (9): Apex Development, Inc.				
Street Address: 1253 North Church Street		Street Address: 358 Broadway					
City, State, Zip Code: Moorestown, NJ 08057		City, State, Zip Code: Newark, NJ 07104					
Project Manager for Monitoring Firm: James A. Guilardi		Telephone No.: 609-314-1683	Telephone No.: (973) 350-0101				
Start Date (10): 07/25/2026		Scheduled Completion Date (11): 07/27/2026	License No.: 01215				
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Describe: _____ ☐ Other Describe: _____		Name of OSHA Monitor: Metro Analytical Laboratories					
Scope of Work (Check all that apply): ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		Street Address: 255 West 36th Street, Suite 203 City, State, Zip Code: New York, New York, 10018					
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12)	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulat	Enclosure
SMALL HALLWAY BY STAIRCASE 11	Yes No N/A X	WALL PLASTER	20 SF	*			
	X			*			
	X			*			
Name of Registered Waste Hauler: Century Waste Service/Apex Development, Inc.		NJDEP Waste Hauler ID No.: 04509/0035729	Cubic Yards of Waste: 30	Name of Registered landfill: Fairless Landfill			
City, State: Elizabeth, NJ 07201		Disposal Date:	City, State: Morrisville, PA 19067				
Completed By: Chinyelu Oraegbunam		Title: President	Signature: 	Date: 07/23/2026			

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

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2) Trenton Public Schools Job #2607-6605 Check #18091							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 108 North Clinton Ave							
		City, State, Zip Code Trenton, NJ 08609							
		Name of Contact Business Administration	Telephone Number 609-656-4900						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Hedgepath Williams MS		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 301 Gladstone Ave									
City (5) Trenton		Square Feet	# of Floors						
County (6) Mercer		County Code (7) (STATE USE ONLY)							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection		Name of Abatement Contractor (9) AbateTech, Inc.							
Street Address 120 North Warren St		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Trenton, NJ 08608		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Jordan Reed		Telephone No. 609-392-1216	License No. 00529						
Start Date (10) 8 / 3 / 26	Scheduled Completion Date (11) 8 / 4 / 26	Name of OSHA Monitor IATL Analytical							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 9000 Commerce Pkwy. SUite B							
		City, State, Zip Code Mount Laure, NJ 08055							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☒ Renovation ☐ Full Containment with Negative Pressure ☐ ≥160 sf or ≥260 lf ☐ Demolition ☒ Mini-Enclosure ☐ ☐ ☒ Glovebag Procedure ☐ ☐ ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st Floor Hallway	☐	☒	☐	Pipe Insulation	9 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 20	Name of Registered Landfill FAIRLESS Landfill					
City, State Lumberton, NJ		Disposal Date 8/4/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwendolyn Dumas		Title Operations Coordinator		Signature 		Date 7-24-26			

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

RECEIVED

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2) Transcontinental Gas Pipe Line Job # 2607-6597 Check # 85							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment #2 ☐ Emergency (including justification) ☐ Cancellation	Street Address 315 Cold Soil Rd.							
		City, State, Zip Code Princeton, NJ 08540							
		Name of Contact Kevin Schmidt	Telephone Number 610-755-8956						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Williams/Transco Dig #3480		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 170 Route 130		Square Feet # of Floors Bldg. Age							
City (5) Swedesboro		County (6) GLE							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Gas Pipe Line							
Name of Monitoring Firm Hired by Building Owner (8) NA		Name of Abatement Contractor (9) AbateTech, Inc.							
Street Address		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm		Telephone No. 609-265-2107	License No. 00529						
Start Date (10) 7 / 20 / 26	Scheduled Completion Date (11) 7 / 27 / 26	Name of OSHA Monitor IATL Analytical							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 9000 Commerce Parkway Suite B							
		City, State, Zip Code Mt Laurel, NJ 08054							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ Renovation ☐ Full Containment with Negative Pressure ☐ ≥160 sf or ≥260 lf ☒ Demolition ☐ Mini-Enclosure ☐ ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Dig #35220	☐	☐	☒	Coal Tar Wrap- 12" Line	12 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 12	Name of Registered Landfill Fairless Landfill					
City, State Lumberton, NJ		Disposal Date 7/27/26		City, State Morrisville, PA 19067					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 			Date 7-24-26		

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

RECEIVED

Date of Notification (1) 7 / 21 / 26		Name of Building Owner/Operator (2) Union County College							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 1033 Springfield Ave							
		City, State, Zip Code Cranford, NJ 07016							
		Name of Contact James Cipolla (General Contractor)	Telephone Number 1-908-351-1177						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Union County College		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 1033 Springfield Ave		Square Feet							
City (5) Cranford		# of Floors	Bldg. Age						
County (6) Union	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) College Facility							
Name of Monitoring Firm Hired by Building Owner (8) RK Occupational & Environmental Analysis		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC							
Street Address 401 St James Avenue		Street Address 1123 BEAVER STREET							
City, State, Zip Code Phillipsburg NJ 08865		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Jonathan Gilbert	Telephone No. 908-454-6316	Telephone No. 215-788-6040	License No. 02121						
Start Date (10) 7 / 20 / 26	Scheduled Completion Date (11) ON HOLD	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7AM-330PM / PM - AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☒ Renovation ☐ ≥160 sf or ≥260 lf ☐ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Entrance	☐	☐	☒	Exterior Window Caulk	52 LF	☒	☐	☐	☐
Outside Building Underground	☐	☐	☒	Transite Pipe	100 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste	Name of Registered Landfill Conestoga Landfill				
City, State Freehold NJ		Disposal Date TBD		City, State Morgantown, PA					
Completed By (Print or Type) Dillan DeCaro		Title Estimator		Signature <i>Dillan DeCaro</i>		Date 7/21/26			

ASB-41
JAN 13 **DD26070**

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

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Date of Notification (1) 07/21/2026		Name of Building Owner/Operator (2) Thomas F Corbatt							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		Street Address 2541 Richmond Terrace City, State, Zip Code Staten Island NJ, 10303 Name of Contact Thomas Corbet Telephone Number 718-556-0800					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Empty Lot				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address Route 9 and Husles Corner Road				Square Feet N/A					
City (5) Howell Township, Monmouth County, New Jersey				# of Floors N/A					
County (6) Monmouth				Bldg. Age N/A					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) house							
Name of Monitoring Firm Hired by Building Owner (8) Sky Environmental Services		ASCM No.		Name of Abatement Contractor (9) D&S Abatement Company LLC					
Street Address 413 W Main St.		Street Address 329 Parish Dr							
City, State, Zip Code Boonton, NJ 07005		City, State, Zip Code Wayne, NJ 07470							
Project Manager for Monitoring Firm Leon Shereshevski		Telephone No. (973) 769-6946		License No. 02097					
Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/24/2026		Name of OSHA Monitor D&S Abatement Company LLC					
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: non-occupied				Street Address 329 Parish Dr City, State, Zip Code Wayne, NJ 07470					
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 75000	Abatement Type			
						Removal	Repair	Encapsulate	Enclosure
Contaminated Ground		X		VAT and Mastic		X			
Name of Registered Waste Hauler D&S Abatement Company LLC		NJDEP Waste Hauler ID No. 0036309		Cubic Yards of Waste TBD		Name of Registered Landfill TRRF			
City, State Wayne NJ				Disposal Date TBD		City, State Tullytown, PA			
Completed by Dejan Antic Dopsaj		Title President		Signature		Date 07/21/2026			

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

Check # 4684

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JUL 27 2026

Date of Notification (1) 7 / 21 / 26		Name of Building Owner/Operator (2) SRI International							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 201 Washington Rd City, State, Zip Code Princeton, NJ 08540 Name of Contact Chris Lewis Telephone Number 215-307-7100							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) SRI International		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 201 Washington Rd		Square Feet	# of Floors 50+						
City (5) Princeton		Bldg. Age							
County (6) Mercer	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Office							
Name of Monitoring Firm Hired by Building Owner (8) RBS Environmental		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC						
Street Address 24 Veterans Square		Street Address 1123 BEAVER STREET							
City, State, Zip Code Media, PA 19063		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Stocku		Telephone No. 610-865-0031	License No. 02121						
Start Date (10) 8 / 3 / 26	Scheduled Completion Date (11) 8 / 14 / 26	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM/____PM-____AM		Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exhibition Area	☐	☒	☐	Floor tile and mastic	2250 SF	☒	☐	☐	☐
Men's & Women's room lobby	☐	☒	☐	Floor tile and mastic	100 SF	☒	☐	☐	☐
Kitchenette and Hallway	☐	☒	☐	Floor tile and mastic	460 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Bristol Environmental LLC		NJDEP Waste Hauler ID No. 18706	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Bristol, PA		Disposal Date		City, State Morrisville, PA					
Completed By (Print or Type) Brian Scafiro		Title Estimator	Signature Brian Scafiro			Date 7/21/26			

ASB-41
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

RECEIVED

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2) SRI International							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment #1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 201 Washington Rd							
		City, State, Zip Code Princeton, NJ 08540							
		Name of Contact Chris Lewis	Telephone Number 215-307-7100						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) SRI International		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 201 Washington Rd		Square Feet	# of Floors 50+						
City (5) Princeton		Bldg. Age							
County (6) Mercer	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Office							
Name of Monitoring Firm Hired by Building Owner (8) RBS Environmental		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC							
Street Address 24 Veterans Square		Street Address 1123 BEAVER STREET							
City, State, Zip Code Media, PA 19063		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Stocku	Telephone No. 610-865-0031	Telephone No. 215-788-6040	License No. 02121						
Start Date (10) 8 / 3 / 26	Scheduled Completion Date (11) 8 / 14 / 26	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / ____PM-____AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exhibition Area	☐	☒	☐	Floor tile and mastic	2250 SF	☒	☐	☐	☐
Men's & Women's room lobby	☐	☒	☐	Floor tile and mastic	100 SF	☒	☐	☐	☐
Kitchenette and Hallway	☐	☒	☐	Floor tile and mastic	460 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage, Inc		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Freehold, NJ		Disposal Date		City, State Morrisville, PA					
Completed By (Print or Type) Brian Scafiro		Title Estimator		Signature <i>Brian Scafiro</i>			Date 7/24/26		

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

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2) SRI International		RECEIVED				
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)		Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation		Street Address 201 Washington Rd City, State, Zip Code Princeton, NJ 08540 Name of Contact Michael Davis				
				Telephone Number 609-734-2538				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) SRI International				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)				
Street Address 201 Washington Rd				Square Feet				
City (5) Princeton				# of Floors				
County (6) Mercer				Bldg. Age 50+				
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Exterior						
Name of Monitoring Firm Hired by Building Owner (8) RBS Environmental		ASCM No.		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC				
Street Address 24 Veterans Square		Street Address 1123 BEAVER STREET						
City, State, Zip Code Media, PA 19063		City, State, Zip Code BRISTOL, PA 19007						
Project Manager for Monitoring Firm Michael Stocku		Telephone No. 610-865-0031		License No. 02121				
Start Date (10) 7 / 27 / 26		Scheduled Completion Date (11) 7 / 31 / 26		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC.				
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / ____ PM - ____ AM				Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007				
Scope of Work (Check all that apply)								
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 200 LF	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Exterior Steam Tunnel	☐	☒	☐	Steam Condensate Pipe Insulation	☒	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage Inc		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste		Name of Registered Landfill Fairless Landfill		
City, State Freehold, NJ		Disposal Date		City, State Morrisville, PA				
Completed By (Print or Type) Brian Scafiro		Title Estimator		Signature <i>Brian Scafiro</i>		Date 7/24/26		

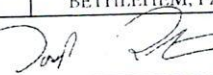
ASB-41
MAY 11 **BS26057**

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

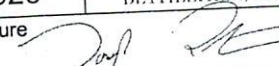
RECEIVED

JUL 22 2026

Date of Notification (1) 07/20/2026		Name of Building Owner/Operator (2) ASBESTOS CONTROL & LICENSING							
Agencies Notified	Type Notification	Street Address 4 WALNUT ST							
☒ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code HOPE NJ 07825							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) RESIDENCE		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 4 WALNUT ST		Square Feet	# of Floors						
City (5) HOPE		Bldg. Age							
County (6) WARREN	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/30/2026	Scheduled Completion Date (11) 07/30/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
INTERIOR				PIPING	25 LF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/30/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 			Date 07/20/2026			

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

RECEIVED

Date of Notification (1) 07/20/2026		Name of Building Owner/Operator (2)						
Agencies Notified	Type Notification	Street Address 238 ELMWYND DR						
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code ORANGE NJ 07050						
		Name of Contact _____ Telephone Number _____						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) RESIDENCE		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 238 ELMWYND DR		Square Feet	# of Floors					
City (5) ORANGE		Bldg. Age						
County (6) ESSEX	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals					
Street Address		Street Address 6 White Dove Court						
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701						
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200					
Start Date (10) 08/03/2026	Scheduled Completion Date (11) 08/03/2026	Name of OSHA Monitor AAA Lead Professionals						
Occupancy Status During Abatement (Check Only One)		Street Address 6 White Dove Court						
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		City, State, Zip Code Lakewood, NJ, 08701						
Scope of Work (Check All That Apply)								
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition						
		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 250 LF	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Interior			Pipe Insulation		☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI				
City, State Lakewood, NJ		Disposal Date 08/03/2026		City, State BETHLEHEM, PA				
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 		Date 07/20/2026			

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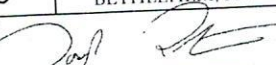
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

RECEIVED

Date of Notification (1) 7 / 21 / 26		Name of Building Owner/Operator (2) JUL 22 2026							
Agencies Notified ☒ EPA ☒ DOLWLD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 250 Howard Avenue							
		City, State, Zip Code Rochelle Park, NJ 07663							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Home		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 250 Howard Avenue		Square Feet 1294	# of Floors 1						
City (5) Rochelle Park		Bldg. Age 76							
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) ECC Inc.	ASCM No.	Name of Abatement Contractor (9) Dynamics Development Services inc.							
Street Address 417 Fifth Avenue 8th Floor		Street Address 169 557 Grand Concourse suite 3-51							
City, State, Zip Code New York, NY 10016		City, State, Zip Code Bronx, NY 10451							
Project Manager for Monitoring Firm Clayton Long	Telephone No. 6464764736	Telephone No. 7189061055	License No. 01241						
Start Date (10) 7 / 31 / 26	Scheduled Completion Date (11) 01 / 31 / 27	Name of OSHA Monitor							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address							
		City, State, Zip Code							
Scope of Work (Check all that apply)									
☐ >3 sf or >3 lf ☒ >160 sf or >260 lf		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
First Floor Dining room	☐	☐	☒	9x9 flor tile and mastic	90sf	☒	☐	☐	☐
First Floor Living room	☐	☐	☒	9x9 Floor tile and mastic	144sf	☒	☐	☐	☐
First Floor Foyer	☐	☐	☒	9x9 Floor tile and mastic	16sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 10	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 8/7/26		City, State Pen Argyl, PA 10872					
Completed By (Print or Type) Angela martinez		Title Owner	Signature <i>Angela Martinez</i>			Date 7/21/26			

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

RECEIVED

Date of Notification (1) 07/16/2026		Name of Building Owner/Operator (2) JUL 22 2026							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 108 GALLOWES HILL RD							
		City, State, Zip Code CRANFORD NJ 07016							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 108 GALLOWES HILL RD		Square Feet	# of Floors						
City (5) CRANFORD		Bldg. Age							
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 732-719-5649						
Start Date (10) 07/28/2026		Scheduled Completion Date (11) 07/28/2026	Name of OSHA Monitor AAA Lead Professionals						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 If ☐ ≥160 sf or ≥260 If		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				Ducts	20 LF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 3	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/28/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER		Signature 		Date 07/16/2026			

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

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

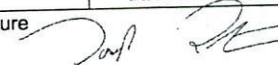
8882

PAID

RECEIVED

JUL 22 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/16/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation							
Street Address 22 RIDGEWOOD DR		City, State, Zip Code LIVINGSTON NJ 07039							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 22 RIDGEWOOD DR		Square Feet	# of Floors						
City (5) LIVINGSTON NJ		Bldg. Age							
County (6) Essex		County Code (7) (STATE USE ONLY)							
Current Use (Prior if being demolished)									
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.							
Street Address		Name of Abatement Contractor (9) AAA Lead Professionals							
City, State, Zip Code		Street Address 6 White Dove Court							
Project Manager for Monitoring Firm		City, State, Zip Code Lakewood, NJ, 08701							
Telephone No.		Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/29/2026	Scheduled Completion Date (11) 07/29/2026		Name of OSHA Monitor AAA Lead Professionals						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 600 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				Floor Tiles					
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/29/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 				Date 07/16/2026		

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

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

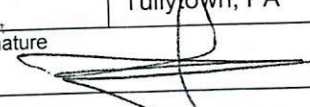
4373091

Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) PAID						
Agencies Notified	Type Notification	Street Address 5-10 Hartley Place, City, State, Zip Code Fair Lawn, NJ 07410						
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Name of Contact Telephone Number ASBESTOS CONTROL LICENSING						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 5-10 Hartley Place, City (5) Fair Lawn		Square Feet 1,466	# of Floors 2					
County (6) Bergen		Bldg. Age 101						
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) Acme Professional Services Corp						
Street Address		Street Address 170 Kinnelon Rd, Suite 32						
City, State, Zip Code		City, State, Zip Code Kinnelon, NJ 07405						
Project Manager for Monitoring Firm		Telephone No. 973-938-5266	License No. 02003					
Start Date (10) 07/30/2026	Scheduled Completion Date (11) 07/30/2026	Name of OSHA Monitor Arsenije Adamov						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address 170 Kinnelon Rd, Suite 32 City, State, Zip Code Kinnelon, NJ 07405						
Scope of Work (Check All That Apply)								
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition						
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure								
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Basement		☒	ACM pipe and fitting insulation	84 LF	☒			
Name of Registered Waste Hauler Acme Professional Services Corp		NJDEP Waste Hauler ID No. 0038176	Cubic Yards of Waste 2	Name of Registered Landfill Fairless Landfill				
City, State Kinnelon, NJ		Disposal Date 07/31/2026		City, State Morrisville, PA				
Completed by Samantha Zamora		Title Project Coordinator	Signature <i>Samantha Zamora</i>		Date 07/22/2026			

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

4373092

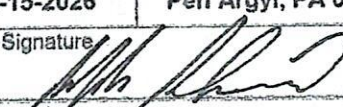
RECEIVED

Date of Notification (1) 07/20/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 163 Park Street							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Montclair, NJ 07042							
		Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 163 Park Street		Square Feet N/A	# of Floors N/A						
City (5) Montclair, NJ 07042		Bldg. Age N/A							
County (6) Essex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) house							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) D&S Abatement Company LLC						
Street Address		Street Address 329 Parish Dr							
City, State, Zip Code		City, State, Zip Code Wayne, NJ 07470							
Project Manager for Monitoring Firm		Telephone No. 973-345-8685	License No. 02097						
Start Date (10) 07/29/2026	Scheduled Completion Date (11) 08/4/2026	Name of OSHA Monitor D&S Abatement Company LLC							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: <u>non-occupied</u>		Street Address 329 Parish Dr							
		City, State, Zip Code Wayne, NJ 07470							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		Plaster	370 SF	X			
Basement		X		TSI	60	X			
Name of Registered Waste Hauler D&S Abatement Company LLC		NJDEP Waste Hauler ID No. 0036309	Cubic Yards of Waste TBD	Name of Registered Landfill TRRF					
City, State Wayne NJ		Disposal Date TBD		City, State Tullytown, PA					
Completed by Dejan Antic Dopsaj		Title Project Manager		Signature 				Date 07/20/2026	

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

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

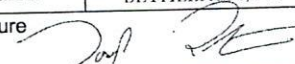
✓ #2112
432096

Date of Notification (1) 07 / 22 / 26		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 85 Pleasant Avenue		City, State, Zip Code Edison, NJ 08837							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 85 Pleasant Avenue		Square Feet 2500	# of Floors 1						
City (5) Edison, NJ 08837		Bldg. Age 50+							
County (6) Middlesex	County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) A. Mac Contracting Inc.							
Street Address		Street Address 176 Saddle River Avenue							
City, State, Zip Code		City, State, Zip Code South Hackensack, NJ 07606							
Project Manager for Monitoring Firm		Telephone No. 201-262-5841	License No. 00156						
Start Date (10) 08 / 05 / 26	Scheduled Completion Date (11) 08 / 06 / 26		Name of OSHA Monitor Asbestos Analytical Labs						
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:00 AM-4:30 PM		Street Address 51 Gage Road City, State, Zip Code East Brunswick, NJ 08816							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement	☐	☒	☐	Pipe Insulation	200 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 2 Yards	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 08-15-2026		City, State Pen Argyl, PA 08072					
Completed By (Print or Type) Ralph Barnhardt		Title Sr. Project Manager		Signature 			Date 07-22-2026		

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

Date of Notification (1) 7/22/26		Name of Building Owner/Operator (2)							
Agencies Notified		Type Notification							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 153 Kennedy Ct.		City, State, Zip Code Paramus, NJ 07652							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Home		Type of Facility (4)							
Street Address 153 Kennedy Ct.		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Paramus		Square Feet 2300	# of Floors 2						
County (6) Bergen		Bldg. Age 60 +/-							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Residential Home							
Name of Monitoring Firm Hired by Building Owner (8) Project Manager		ASCM No.							
Street Address		Name of Abatement Contractor (9) All Stages Abatement							
City, State, Zip Code		Street Address 55 Cannonball Rd.							
Project Manager for Monitoring Firm		City, State, Zip Code Pompton Lakes, NJ 07442							
Telephone No.		Telephone No. 201-600-3184	License No. 01305						
Start Date (10) 8/1/26	Scheduled Completion Date (11) 8/4/26	Name of OSHA Monitor Same As Above							
Occupancy Status During Abatement (Check Only One)		Street Address							
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 8 A.M to 4 P.M		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 640 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		VAT		X			
Name of Registered Waste Hauler All Stages Abatement		NJDEP Waste Hauler ID No. 0036592	Cubic Yards of Waste 6 YD	Name of Registered Landfill Chrin Brothers Sanitary Landfill					
City, State Pompton Lakes, NJ		Disposal Date TBD	City, State Easton, PA						
Completed by Richard Cristofol		Title President	Signature 				Date 7/22/26		

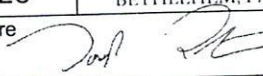
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 07/14/2026		Name of Building Owner/Operator (2) MCEF							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 496 East County Line Rd							
		City, State, Zip Code Lakewood, NJ 08701							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1471 Canterbury Rd		Square Feet	# of Floors						
City (5) Lakewood		Bldg. Age							
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/24/2026	Scheduled Completion Date (11) 07/27/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition	☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior				Siding	1500SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/27/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN	Title OWNER		Signature 			Date 07/14/2026			

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

RECEIVED

JUL 22 2026

Date of Notification (1) 07/14/2026		Name of Building Owner/Operator (2)	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	
Street Address 128 GREEN RD		City, State, Zip Code WOODBIDGE NJ 07095	
Name of Contact		Telephone Number	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) RESIDENCE		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 128 GREEN RD		Square Feet	# of Floors
City (5) WOODBIDGE		Bldg. Age	
County (6) MIDDLESEX		County Code (7) (STATE USE ONLY)	
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) AAA Lead Professionals	
Street Address		Street Address 6 White Dove Court	
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701	
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200
Start Date (10) 07/27/2026		Scheduled Completion Date (11) 07/27/2026	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:		Name of OSHA Monitor AAA Lead Professionals	
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
INTERIOR			PIPE INSULATION
			250 LF
			☒ Removal ☐ Repair ☐ Encapsulate ☐ Enclosure
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5
City, State Lakewood, NJ		Name of Registered Landfill IESI	
Disposal Date 07/27/2026		City, State BETHLEHEM, PA	
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 
		Date 07/14/2026	

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

4373135
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Date of Notification (1) 07/21/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation							
Street Address 1 E HARRIS AVE		City, State, Zip Code MOORESTOWN NJ 08057							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1 E HARRIS AVE		Square Feet	# of Floors						
City (5) Moorestown		Bldg. Age							
County (6) Burlington	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 08/04/2026	Scheduled Completion Date (11) 08/04/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				vermiculite Insulation	20 SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No 35103	Cubic Yards of Waste 3	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 08/04/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 			Date 07/21/2026			

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

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JUL 20 2026

Date of Notification (1) July 15, 2026		Name of Building Owner/Operator (2) James R. Ientile Construction, Inc.							
Agencies Notified	Type Notification	Street Address 28 Vanderburg Road ASBESTOS CONTROL & LICENSING							
☒ EPA ☐ DEP ☒ DOL	☒ Initial ☐ Amended Amendment # _____	City, State, Zip Code Marlboro, NJ 07746							
☒ DOH ☐ DCA	☐ Emergency (including justification) ☐ Cancellation	Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 562 Ryders Lane		Square Feet 1800	# of Floors 2						
City (5) East Brunswick		Bldg. Age 70							
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Technologies		ASCM No. _____	Name of Abatement Contractor (9) ecoservices, LLC						
Street Address 441 East High Street, #25		Street Address 303 B National Road							
City, State, Zip Code Philadelphia, PA 19144		City, State, Zip Code Exton, PA 19341							
Project Manager for Monitoring Firm Norm Harrison		Telephone No. 215-852-9654	Telephone No. 484-872-8884						
Start Date (10) 7/29/26		Scheduled Completion Date (11) 8/19/26	License No. 01161						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Other - Describe: _____		Name of OSHA Monitor EMSL							
Street Address 200 Route 130 North		City, State, Zip Code Cinnaminson, NJ							
Scope of Work (Check All That Apply)									
☒ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition	☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st Floor Bathroom			X	Linoleum	30 SF	X			
Exterior			X	Asbestos Paint on Siding	2700 SF	X			
Exterior			X	Caulk A/W Exterior Siding	15 SF	X			
Garage Siding			X	Asbestos Siding Shingles	320 SF	X			
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. _____	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill					
City, State Newark, NJ			Disposal Date TBD	City, State Morrisville, PA					
Completed by Jack Bally		Title Sr. Project Manager	Signature Jack Bally			Date 7/15/26			

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

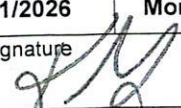
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chk# 1945
RECEIVED

Date of Notification (1) 7/21/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 678 S 12th St.							
		City, State, Zip Code Newark, NJ 07103							
		Name of Contact							
		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 678 S 12th St.		Square Feet 2,216	# of Floors 2						
City (5) Newark, NJ 07103		Bldg. Age 1920							
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) DANVIC CONTRACTING LLC							
Street Address		Street Address 240 South 5th St.							
City, State, Zip Code		City, State, Zip Code Elizabeth, NJ 07206							
Project Manager for Monitoring Firm		Telephone No. 908-906-4123	License No. 01355						
Start Date (10) 8/1/2026	Scheduled Completion Date (11) 8/4/2026	Name of OSHA Monitor Iris Environmental Laboratories, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 2333 Route 22 West							
		City, State, Zip Code Union, NJ 07083							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Pipe Insulation	160 LF	X			
Name of Registered Waste Hauler Danvic Contracting LLC		NJDEP Waste Hauler ID No. 37574	Cubic Yards of Waste TBD	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ			Disposal Date TBD	City, State Morrisville, PA					
Completed by Jeymy Donneys		Title Owner	Signature <i>Jeymy Donneys</i>			Date 7/21/2026			

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

4373126

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Date of Notification (1) 07 / 15 / 26		Name of Building Owner/Operator (2) Job #2607-3574 check#4229							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 37 Lord Stirling Drive City, State, Zip Code Morristown NJ 07960 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 37 Lord Stirling Drive		Square Feet 2824	Bldg. Age 56						
City (5) Morristown NJ		# of Floors 3							
County (6) Morris		County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Residential						
Name of Monitoring Firm Hired by Building Owner (8) Finog Environmental		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.						
Street Address 617 Stokes Road #4-318		Street Address 70 Stacy Haines Road Suite 4							
City, State, Zip Code Medford NJ 08055		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994	Telephone No. 609-702-0400						
License No. 00862									
Start Date (10) 07 / 29 / 26	Scheduled Completion Date (11) 07 / 31 / 26	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM-_____ PM/_____ PM-_____ AM		Street Address 200 U.S. Route 130 North City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check all that apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 140 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement	☐	☐	☒	Joint Compound		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills					
City, State Lumberton, NJ		Disposal Date 07/31/2026		City, State Morrisville, PA					
Completed By (Print or Type) Kaysi Gruner		Title Admin		Signature 		Date 7/15/26			

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

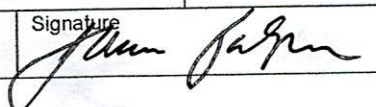
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Date of Notification (1) 7 / 20 / 26		Name of Building Owner/Operator (2) 							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 90 Lynn Ct City, State, Zip Code Belford, NJ 07718 Name of Contact Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Street Address 90 Lynn Ct City (5) Belford		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.) Square Feet 2400 # of Floors 2 Bldg. Age 73							
County (6) Monmouth	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired by Building Owner (8) AZ Solution Consulting		Name of Abatement Contractor (9) Brick Industries, Inc.							
Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662		Street Address PO Box 915 City, State, Zip Code Brick, NJ 08723							
Project Manager for Monitoring Firm Aleksander Zivanov		Telephone No. 347-612-1572	Telephone No. 7328997499 License No. 01196						
Start Date (10) 7 / 21 / 26	Scheduled Completion Date (11) 7 / 24 / 26	Name of OSHA Monitor AZ Solution Consulting							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lower level	☐	☐	☐	Floor tile	608SF	☒	☐	☐	☐
Lower level	☐	☐	☐	Mastic	608SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 7/25/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 				Date 7/20/26	

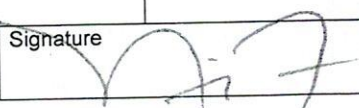
**State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)**

Date of Notification (1) 07/20/2026		Name of Building Owner/Operator (2) Township of Millburn		RECEIVED JUL 22 2026					
Agencies Notified	Type Notification	Street Address 22 Brookside Drive							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Millburn, NJ 07041		Telephone Number 717-873-9010					
		Name of Contact Alex McDonald		ASBESTOS CONTROL & LICENSING					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Paper Mill Playhouse			Type of Facility (4)						
Street Address 22 Brookside Drive			☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)						
City (5) Millburn			Square Feet 30,000	# of Floors 2	Bldg. Age 50+				
County (6) Essex		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) theater					
Name of Monitoring Firm Hired by Building Owner (8) Environmental Health Investigations, Inc.		ASCM No. 00104		Name of Abatement Contractor (9) Bako Construction & Restoration, Inc.					
Street Address 655 W. Shore Trail		Street Address 34 Deforest Ave. Suite 1							
City, State, Zip Code Sparta, NJ 07871		City, State, Zip Code East Hanover, NJ 07936							
Project Manager for Monitoring Firm JP Von Doehren		Telephone No. 973-729-5649		Telephone No. 973-256-7010	License No. 00666				
Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/22/2026		Name of OSHA Monitor Bako Construction & Restoration, Inc.					
Occupancy Status During Abatement (Check Only One)			Street Address 34 Deforest Ave. Suite 1						
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			City, State, Zip Code East Hanover, NJ 07936						
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SW Bathroom Walls		X		ACM Waterproofing	900 SF	X			
Front of House		X		Thermal Pipe Insulation	75 LF	X			
Front Of House		X		Spray on Fireproofing	1250 SF	X			
Name of Registered Waste Hauler Bako Constr. & Rest. Inc./Century Waste		NJDEP Waste Hauler ID No. 20889/32797		Cubic Yards of Waste 40	Name of Registered Landfill Fairless Hills/ Waste management				
City, State East Hanover, NJ/ Elizabeth, NJ				Disposal Date TBD	City, State Morrisville, PA				
Completed by Damir Valjevav		Title Project Manager			Signature 			Date 07/20/2026	

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

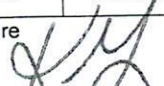
4357527

RECEIVED
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Date of Notification (1) 07 / 16 / 26		Name of Building Owner/Operator (2) Township of Toms River							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 33 Washington Street							
		City, State, Zip Code Toms River, NJ 08753							
		Name of Contact Ted Jarahian	Telephone Number 732-341-1000						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Clifton Avenue Park Project		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address Corner of 554 Clifton Avenue & 525 Batchelor Street		Square Feet N/A	# of Floors 100						
City (5) Toms River	County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Clifton Avenue Park Project						
Name of Monitoring Firm Hired by Building Owner (8) Pennonni		ASCM No.	Name of Abatement Contractor (9) Guardian Contracting, Inc.						
Street Address 130 West 29th Street, 11th Floor		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code New York, NY 10001		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Ralph Coppola		Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 07 / 16 / 26	Scheduled Completion Date (11) 08 / 14 / 26	Name of OSHA Monitor E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 1056 Stelton							
		City, State, Zip Code Piscataway, New Jersey 08854							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) unknown	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior	☐	☒	☐	asbestos debris cleanup		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill					
City, State		Disposal Date		City, State					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 		Date 7/16/26			

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

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RECEIVED

Date of Notification (1) 07 / 15 / 26		Name of Building Owner/Operator (2) Central United Methodist Church Job #2607-3573 check#4228							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 729 Arnold Avenue							
		City, State, Zip Code Point Pleasant NJ 08742							
		Name of Contact Michael Kim	Telephone Number 732-892-3233						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Oxford Hall		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 729 Arnold Avenue		Square Feet 1650	# of Floors 1						
City (5) Point Pleasant Beach		Bldg. Age 100							
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Vacant							
Name of Monitoring Firm Hired by Building Owner (8) Finog Environmental		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.						
Street Address 617 Stokes Road #4-318		Street Address 70 Stacy Haines Road Suite 4							
City, State, Zip Code Medford NJ 08055		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994	License No. 00862						
Start Date (10) 07 / 27 / 26	Scheduled Completion Date (11) 07 / 31 / 26	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM-_____ PM/_____ PM-_____ AM		Street Address 200 U.S. Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Full Containment with Negative Pressure Enclosure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 1,677 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Throughout	☐	☐	☒	Floor Tile and Mastic		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills					
City, State Lumberton, NJ		Disposal Date 07/31/2026		City, State Morrisville, PA					
Completed By (Print or Type) Kaysi Gruner		Title Admin		Signature 				Date 7/15/26	

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

RECEIVED

Date of Notification (1) 07 / 21 / 26		Name of Building Owner/Operator (2) State of NJ Dept of Property Mgmt / Job #2607-3572 Chk. #4235	
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 33 West State Street	
		City, State, Zip Code Trenton NJ 08625	
		Name of Contact Patrick Littleford	Telephone Number 609-940-9964

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) New Lisbon Development Center- Multiple Bldg		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)	
Street Address 1 Bennion Avenue/Route 72		Square Feet TBD	# of Floors TBD
City (5) Woodland Township		Bldg. Age TBD	
County (6) Burlington	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Developmental Center	
Name of Monitoring Firm Hired by Building Owner (8) USA Environmental Management	ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.	
Street Address 344 West State Street		Street Address 70 Stacy Haines Road Suite 4	
City, State, Zip Code Trenton NJ 08618		City, State, Zip Code Lumberton NJ 08048	
Project Manager for Monitoring Firm William Weisgarber	Telephone No. 609-915-1140	Telephone No. 609-702-0400	License No. 00862
Start Date (10) 07 / 30 / 26	Scheduled Completion Date (11) 08 / 04 / 26	Name of OSHA Monitor EMSL Analytical, Inc.	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 200 U.S. Route 130 North	
		City, State, Zip Code Cinnaminson, NJ 08077	

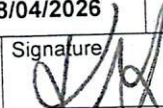
Scope of Work (Check all that apply)

- ☒ ≥3 sf or ≥3 lf
☐ ≥160 sf or ≥260 lf

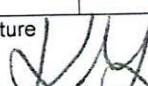
- ☒ Renovation
☐ Demolition

- ☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Admin Bldg & Engineering Services	☐	☐	☒	Drill holes with HEPA-vac		☐	☐	☐	☐
	☐	☐	☐	attachments		☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐

Name of Registered Waste Hauler Asbestos and Mold Services Corp.		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 5	Name of Registered Landfill Fairless Landfill	
City, State Lumberton NJ		Disposal Date 08/04/2026	City, State Morrisville, PA 19067		
Completed By (Print or Type) Kaysi Gruner	Title Office Coordinator	Signature 	Date 7/21/26		

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

Date of Notification (1) 07 / 15 / 26		Name of Building Owner/Operator (2) Larc School / Job #2606-3568-Chk. #4231		PAID RECEIVED					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 1089 Creek Road City, State, Zip Code Bellmawr NJ 08031 Name of Contact Mark Cheeseman Telephone Number 609-617-6740					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Larc School			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)						
Street Address 1089 Creek Road			Square Feet 50,000						
City (5) Bellmawr			# of Floors 1		Bldg. Age 1970				
County (6) Camden		County Code (7)(STATE USE ONLY)		Current Use (Prior if being demolished) Vacant					
Name of Monitoring Firm Hired by Building Owner (8) Epic Environmental Services		ASCM No.		Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.					
Street Address 1930 Brown Road		Street Address 70 Stacy Haines Road							
City, State, Zip Code Newfield NJ 08334		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Jim Eberts		Telephone No. 856-889-1736		Telephone No. 609-702-0400					
License No. 00862									
Start Date (10) 07 / 27 / 26		Scheduled Completion Date (11) 07 / 31 / 26		Name of OSHA Monitor EMSL Analytical, Inc.					
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8AM-3PM/11PM-_____AM			Street Address 200 U.S. Route 130 North City, State, Zip Code Cinnaminson, NJ 08077						
Scope of Work (Check all that apply)									
☐ >3 sf or >3 lf ☒ >160 sf or >260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
First Area	☐	☐	☒	Floor Tile and Mastic	75 SF	☒	☐	☐	☐
Second Area	☐	☐	☒	Floor tile and Mastic	216 SF	☒	☐	☐	☐
3 Locations	☐	☐	☒	Pipe Insulation & Elbows/Fittings	7.5 LF	☒	☐	☐	☐
Exterior	☐	☐	☒	Window Glazing	1 Window	☒	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services		NJDEP Waste Hauler ID No. 0035680		Cubic Yards of Waste 5	Name of Registered Landfill Fairless Landfill				
City, State Lumberton		Disposal Date 07/31/2026		City, State Morrisville PA					
Completed By (Print or Type) Kaysi Gruner		Title Office Coordinator		Signature 			Date 7/15/26		

13800

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

B & G Project # 2026-113

Check # **RECEIVED**

Date of Notification (1) July 21, 2026		Name of Building Owner/Operator (2) Monmouth University							
Agencies Notified	Type Notification	Street Address 400 Cedar Avenue							
☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code West Long Branch, NJ 07764							
		Name of Contact Timothy Orr	Telephone Number 732-571-3566						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Monmouth University - Sub 8		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 400 Cedar Avenue		Square Feet 50,000+	# of Floors 2						
City (5) West Long Branch		Bldg. Age 50+							
County (6) Monmouth	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) University dorm							
Name of Monitoring Firm Hired by Building Owner (8) AHERA Consultants		ASCM No. 00057	Name of Abatement Contractor (9) B & G Restoration, Inc.						
Street Address P.O. Box 385		Street Address 1234 Route 23							
City, State, Zip Code Oceanville, NJ 08231		City, State, Zip Code Butler, NJ 07405							
Project Manager for Monitoring Firm John Smoyer		Telephone No. 609-652-1833	Telephone No. 973-696-6869						
License No. 00378									
Start Date (10) 07/31/2026	Scheduled Completion Date (11) 08/02/2026	Name of OSHA Monitor B & G Restoration, Inc.							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: occupied (7:00 am - 3:30 pm)		Street Address 1234 Route 23							
		City, State, Zip Code Butler, NJ 07405							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ pick up debris/ clean soil/ popup decon ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Great Hall - 4th floor corridor		X		wall & ceiling plaster	50 SF	X			
Name of Registered Waste Hauler B & G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 2	Name of Registered Landfill Grand Central Landfill					
City, State Butler, NJ		Disposal Date 08/03/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer	Signature <i>Gordana Luna</i>			Date 07/21/2026			

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

4373093

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Date of Notification (1) 07 / 22 / 26		Name of Building Owner/Operator (2) Aurorium Labs CHECK#4894							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 239 Snyder Avenue							
		City, State, Zip Code Berkeley Heights, NJ							
		Name of Contact Stan Frankoski	Telephone Number 973.414.9224						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Aurorium Labs		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 239 Snyder Avenue		Square Feet 50,000	# of Floors 2						
City (5) Berkeley Heights		Bldg. Age 50+							
County (6) UNION	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Laboratory							
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) EA Services Corporation							
Street Address		Street Address 530 Church Street- Suite 6							
City, State, Zip Code		City, State, Zip Code Ridgefield, NJ 07657							
Project Manager for Monitoring Firm		Telephone No. 201-295-1700	License No. 01074						
Start Date (10) 08 / 03 / 26	Scheduled Completion Date (11) 08 / 10 / 26	Name of OSHA Monitor Same as above							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM -____PM/____PM-____AM		Street Address							
		City, State, Zip Code							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lab #2	☐	☒	☐	Lab Hood Transite	180 SF	☒	☐	☐	☐
Lab #2	☐	☒	☐	Floor Tile Only	800 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler EA Services Corporation		NJDEP Waste Hauler ID No. 103879		Cubic Yards of Waste tbd	Name of Registered Landfill Minerva Enterprises				
City, State Ridgefield, NJ		Disposal Date tbd		City, State Waynesburg, OH					
Completed By (Print or Type) Marisabel Toribio		Title Clerical		Signature <i>Marisabel Toribio</i>		Date 7/22/2026			

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

4373095

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JUL 27 2026

ASBESTOS CO. Telephone Number 908 804 5719

Date of Notification (1) 7/25/26		Name of Building Owner/Operator (2) J Daryl, LLC							
Agencies Notified	Type Notification	Street Address 37 Main Street							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Clinton, New Jersey							
		Name of Contact George	Telephone Number 908 804 5719						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) J Daryl, LLC property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 37 Main Street		Square Feet 3000	# of Floors 2						
City (5) Clinton		Bldg. Age 100							
County (6) Hunterdon	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) store front							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) Ace Insulation Co., Inc						
Street Address		Street Address 95 Montrose Road							
City, State, Zip Code		City, State, Zip Code Colts Neck New Jersey							
Project Manager for Monitoring Firm		Telephone No. 7322941757	License No. 00029						
Start Date (10) 8/3/26	Scheduled Completion Date (11) 8/8/26	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7am-7pm		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st floor			x	floor tile	1700 sf	x			
Name of Registered Waste Hauler Ace Insulation Co., Inc		NJDEP Waste Hauler ID No. 12086	Cubic Yards of Waste 12	Name of Registered Landfill Chrins					
City, State Colts Neck, New Jersey			Disposal Date 8/8/26	City, State Easton, PA					
Completed by Bree McGuire		Title Secretary Treasurer	Signature Bree McGuire			Date 7/25/26			

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

GAC Project # 060-26

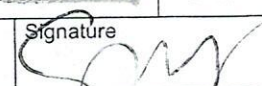
Date of Notification (1) July 24, 2026		PAID		Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ	
Agencies Notified ☒ EPA ☒ DCA ☒ DOL ☒ DEP- No Longer REQUIRED ☒ DOH		Notification Type ☒ Initial Notification ☐ Amended Notification # ☐ Emergency (including justification) ☐ Cancelled		Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS	
				City, State, Zip Code PISCATAWAY, NJ 08854	
		Name of Contact MICHAEL F. SMITH, ENV. HEALTH & SAFETY		Telephone Number & LICENSING 848-445-2550	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) BROWER COMMONS, BLDG# 3085			Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address COLLEGE AVENUE CAMPUS			Sq. Feet: N/A # of Floors: 2 Bldg. Age: 60+ years		
City (5) NEW BRUNSWICK	County (6) MIDDLESEX	County Code (7) (State Use Only)	Current Use (prior if being demolished): ACADEMIC		
Name of Monitoring Firm Hired by Bldg. Owner (8) ATLAS		ASCM No. 00098	Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.		
Street Address 3 TERRI LANE			Street Address 511 MAIN STREET		
City, State, Zip Code BURLINGTON, NJ 08016			City, State, Zip Code BUTLER, NJ 07405		
Project Manager for Monitoring Firm JOHN LUTZ		Telephone Number 609-386-8800	Telephone Number 973-492-0477		License Number 00840
Scheduled Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/31/2026		Name of OSHA Monitor ENVIROVISION, INC.	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Facility Occupied During Abatement ☒ Other- Describe: Shift Schedule: 3PM – 5AM DAILY (24 HRS. & WEEKENDS AS NEEDED)			Street Address 20-21 WARGARAW ROAD, BLDG# 35E		
			City, State, Zip Code FAIRLAWN, NJ 07410		
Scope of Work (Check all that apply)					
☐ ≥ 3 sf or >3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glove bag Procedure / Wrap & Cut ☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)	Amount (Specify SF or LF)	Abatement Type Remove Repair Encap Enclose	
3 rd Floor Penthouse MER 301	☒	Fiberglass Duct Insulation (with Asbestos glue pins underneath)	4800 SF (34 SF)	☒	
3 rd Floor Penthouse MER 301	☒	Duct Insulation	1100 SF	☒	
3 rd Floor Penthouse MER	☒	Pipe & Fitting Insulation	468 LF	☒	
3 rd Floor Penthouse MER	☒	Tank Insulation	130 SF	☒	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 160 CY	Name of Registered Landfill Fairless Landfill / Grand Central Landfill	
Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJDEP # 12561			Disposal Date 08/31/2026	City, State FL - 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700 GCL- 1963 Pen Argyl Rd. Pan Argyl, Pa 18072	
Hauler #2) Century Waste Services LLC, Elizabeth, NJ 07201 NJ DEP # NJ-860					
Completed by (Print or Type) RAYMOND C. PEDALINO		Title SENIOR PROJECT MANAGER	Signature <i>Raymond C. Pedalino</i>		Date July 24, 2026

Copies To: Rutgers, REHS, Attn: Mike Smith and ATLAS, Attn: John Lutz

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

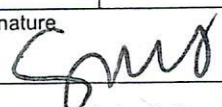
1197211

RECEIVED

Date of Notification (1) 6 / 23 / 26		Name of Building Owner/Operator (2) Cranford Twp. School District Job #2604-6563 Check #18013							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 2 ☐ Emergency (including justification) ☐ Cancellation	Street Address 132 Thomas Street City, State, Zip Code Cranford, NJ 07016 Name of Contact Business Administration							
		Telephone Number 908-272-9100							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Bloomingdale Ave School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 200 Bloomingdale Avenue		Square Feet	# of Floors						
City (5) Cranford		Bldg. Age							
County (6) Union	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) EnviroVision Consultants, Inc.		ASCM No. 00079	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address 20-21 Wagaraw Rd. Bldg. 35E		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Fair Lawn, NJ 07410		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Frederick Lawson		Telephone No. 973-636-9145	License No. 00529						
Start Date (10) 6 / 24 / 26	Scheduled Completion Date (11) 7 / 3 / 26	Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 9000 Commerce Parkway City, State, Zip Code Mount Laurel, NJ 08054							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Kindergarten Wing	☐	☒	☐	Pipe Fittings	55 LF	☒	☐	☐	☐
Kindergarten Wing/All Purpose Room	☐	☒	☐	Window/Door caulk & glazing	303 LF	☒	☐	☐	☐
Kindergarten Wind/Media Center	☐	☒	☐	Floor tile & Mastic	2,650 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill					
City, State Lumberton, NJ		Disposal Date 7/3/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.		Signature 			Date 6-23-26		

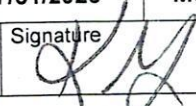
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

3938579

Date of Notification (1) 6 / 23 / 26		Name of Building Owner/Operator (2) Hamilton Township School District Job #2606-6590 Check #18014							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 90 Park Ave. City, State, Zip Code Hamilton, NJ 08690 Name of Contact Business Admin Telephone Number 609-631-4100							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Steinert HS		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 2900 Klockner Rd.		Square Feet							
City (5) Hamilton Square		# of Floors							
County (6) Mercer		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Karl Environmental Group		ASCM No.							
Street Address 20 Lauck Road		Name of Abatement Contractor (9) AbateTech, Inc.							
City, State, Zip Code Mohnton, PA 19540		Street Address 30 Maple Ave. PO Box 25							
Project Manager for Monitoring Firm Mike Krisher		City, State, Zip Code Lumberton, NJ 08048							
Telephone No. 610-223-1832		Telephone No. 609-265-2107							
Start Date (10) 7 / 20 / 26		License No. 00529							
Scheduled Completion Date (11) 7 / 31 / 26		Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM		Street Address 9000 Commerce Parkway Suite B							
Scope of Work (Check all that apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code Mt Laurel, NJ 08054							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Foyer/ Gym 2 Areas	☐	☐	☒	Pipe Fittings/Valves	10 LF	☒	☐	☐	☐
Trainer's Room 2 Areas	☐	☐	☒	Pipe Fittings/Valves	15 LF	☒	☐	☐	☐
Girl's Locker Room 5 Areas	☐	☐	☒	Pipe Fittings/Valves	15 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750		Cubic Yards of Waste 40	Name of Registered Landfill FAIRLESS Landfill				
City, State Lumberton, NJ		Disposal Date 7/31/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwendolyn Dumas		Title Operations Manager		Signature 		Date 6-23-26			

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

4373130
RECEIVED

Date of Notification (1) 07 / 15 / 26		Name of Building Owner/Operator (2) Paco Housing Corporation I # 2510-3445-1 check # 4234						
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 192 Third Street						
		City, State, Zip Code Jersey City, NJ 07302						
		Name of Contact Elizabeth Nunez	Telephone Number 201-492-8247					
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Villa Borinquen		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)						
Street Address 393 Marin Blvd Unit 122		Square Feet 1602	# of Floors 2					
City (5) Jersey City		Bldg. Age 1974						
County (6) Hudson	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residential						
Name of Monitoring Firm Hired by Building Owner (8) Finoq Environmental		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.					
Street Address 617 Stokes Road #4-318		Street Address 70 Stacy Haines Road Suite 4						
City, State, Zip Code Medford NJ 08055		City, State, Zip Code Lumberton NJ 08048						
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994	Telephone No. 609-702-0400					
License No. 00862		Name of OSHA Monitor EMSL Analytical, Inc.						
Start Date (10) 07 / 29 / 26	Scheduled Completion Date (11) 07 / 31 / 26							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM		Street Address 200 U.S. Route 130 North						
		City, State, Zip Code Cinnaminson, NJ 08077						
Scope of Work (Check all that apply)								
☐ >3 sf or >3 lf ☒ >160 sf or >260 lf		☒ Renovation ☐ Demolition						
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 800 SF	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Unit 122	☐	☐	☒	Floor Tile and Mastic	☒	☐	☐	☐
	☐	☐	☒		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills				
City, State Lumberton, NJ		Disposal Date 07/31/2026		City, State Morrisville, PA				
Completed By (Print or Type) Kaysi Gruner		Title Office Admin		Signature 			Date 7/15/26	

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

1206941
RECHECK # 41086

Date of Notification (1) 7/23/26		Name of Building Owner / Operator (2) Willingboro Twp Public Schools	
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Emergency ☐ Cancellation		Street Address 440 Beverly Rancocas Rd
			City, State & Zip Code Willingboro, NJ 08046
			Name of Contact Kelvin Smith
		Telephone Number 609-835-8607	

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Twin Hills		Type of Facility (4) ☒ School (K-12) NON FRIABLE ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 110 Twin Hills Dr		Square Feet 150,000	# of Floors 1
City (5) Willingboro		Bldg. Age 40+	
County (6) Burlington	County Code (7)	Current Use (Prior if being demolished) School	

Name of Monitoring Firm Hired by Building Owner (8) AHERA Consultants Inc		ASCM No.		Name of Abatement Contractor (9) Bristol Environmental, LLC..	
Street Address 36 North Quail Hill Blvd				Street Address 1123 Beaver Street	
City, State & Zip Code Galloway, NJ 08205				City, State & Zip Code Bristol, PA 19007	
Project Manager for Monitoring Firm Eric Clarkson		Telephone Number 609-652-1833		Telephone Number (215)788-6040	License Number 02121
Scheduled Start Date (10) 8/7/26	Scheduled Completion Date (11) 8/7/26		Name of OSHA Monitor Bristol Environmental LLC		

Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: ☒ Facility Occupied During Abatement 7:00AM -3:30PM		Street Address 1123 Beaver Street	
		City, State & Zip Code Bristol, PA 19007	

Scope of Work (Check all that apply)

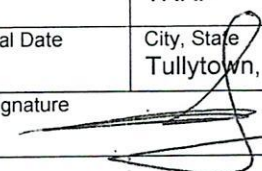
☒ ≥3 sf or ≥3 lf	☒ Renovation	☐ Full Containment with Negative Pressure
☐ ≥160 sf ≥260 lf	☐ Demolition	☐ Mini-Enclosure
		☐ Glove Bag Procedures
		☒ Non-Exempted and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclose
Classroom	☐	☒	☐	Glue Dots	18 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐

Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 20990	Cubic Yards of Waste 1 Cu Yd	Name of Registered Landfill Conestoga Landfill	
City, State Freehold, NJ		Disposal Date 8/7/26		City, State Morgantown, PA	
Completed By (Print or Type) Gino Pizzigoni		Title Project Manager	Signature <i>Gino Pizzigoni</i>		Date 7/23/26

B126112

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

Date of Notification (1) 07/21/2026		Name of Building Owner/Operator (2) Stevens Institute of Technology							
Agencies Notified	Type Notification	Street Address 1 Castle Point on Hudson							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Hoboken, NJ 07030							
		Name of Contact David Fernandez	Telephone Number 201-216-8705						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Williams Library		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1036 Park Ave		Square Feet N/A	# of Floors N/A						
City (5) Hoboken		Bldg. Age N/A							
County (6) Hudson	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Howe Center offices							
Name of Monitoring Firm Hired by Building Owner (8) Briggs Associates		ASCM No. 0004	Name of Abatement Contractor (9) D&S Abatement Company LLC						
Street Address 3 Crosswicks Street		Street Address 329 Parish Drive							
City, State, Zip Code Bordentown, New Jersey 08505		City, State, Zip Code Wayne, NJ 07470							
Project Manager for Monitoring Firm Michael Hoodak		Telephone No. 609-228-5520	License No. 02097						
Start Date (10) 07/31/26	Scheduled Completion Date (11) 08/03/2026	Name of OSHA Monitor D&S Abatement Company LLC							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: unoccupied		Street Address 329 Parish Drive							
		City, State, Zip Code Wayne, NJ 07470							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition	☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
First floor mans room		X		Sprayed on Insulation/ TSI	40 SF/25 LF	X			
First floor womans room				Texture ceiling	82 SF	X			
Mezzanine mans room				Sprayed on Insulation/TSI	40SF/254	X			
Mezzanine womans room				Sprayed on Insulation/TSI	40SF/25Lf	X			
Name of Registered Waste Hauler D&S Abatement Company, LLC		NJDEP Waste Hauler ID No. 0036309		Cubic Yards of Waste TBD	Name of Registered Landfill TRRF				
City, State Wayne, NJ		Disposal Date TBD		City, State Tullytown, PA					
Completed by Dejan Antic Dopsaj		Title President		Signature 		Date 07/21/2026			