

State of New Jersey
 NOTIFICATION OF ASBESTOS ABATEMENT
 Pursuant to NJAC 8:60 and 12:1201

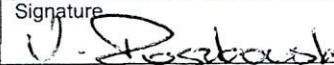
RECEIVED

Date of Notification (1) 07/11/2026		Name of Building Owner/Operator (2) Kearny BOE		JUL 20 2026					
Agencies Notified		Type Notification		Street Address					
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		172 Midland Avenue					
				City, State, Zip Code Kearny, NJ 07032					
		Name of Contact Mark Buscino		Telephone Number 201-955-5000					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Franklin Elementary School				Type of Facility (4)					
Street Address 100 Davis Avenue				☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Kearny				Square Feet	# of Floors				
				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) AHERA Consultants		ASCM No. 0057		Name of Abatement Contractor (9) VMC Company, Inc.					
Street Address PO Box 385				Street Address 208 Piaget Avenue					
City, State, Zip Code Oceanville, NJ 08231				City, State, Zip Code Clifton, NJ 07011					
Project Manager for Monitoring Firm John Smoyer		Telephone No. 609-652-1833		Telephone No. 973-253-8828	License No. 00704				
Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/21/2026		Name of OSHA Monitor VMC Company, Inc					
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: occupied				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
Gym, Kitchen Storage/Mech. Room		x		Flooring	5,400 SF	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste	Name of Registered Landfill IESI Landfill				
City, State Elizabeth, NJ				Disposal Date	City, State Bethlehem, PA				
Completed by Voytek Roszkowski		Title President		Signature V. Roszkowski		Date 07/11/2026			

POCK

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

RECEIVED

Date of Notification (1) 07/13/2026		Name of Building Owner/Operator (2) Kearny BOE		JUL 20 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		Type Notification ☒ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation		Street Address 172 Midland Avenue City, State, Zip Code Kearny, NJ 07032 Name of Contact Mark Buscino					
				Telephone Number 201-955-5000					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Franklin Elementary School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 100 Davis Avenue				Square Feet # of Floors Bldg. Age 					
City (5) Kearny				County Code (7) (STATE USE ONLY) _____					
County (6) HUDSON				Current Use (Prior if being demolished) school					
Name of Monitoring Firm Hired by Building Owner (8) AHERA Consultants		ASCM No. 0057		Name of Abatement Contractor (9) VMC Company, Inc.					
Street Address PO Box 385				Street Address 208 Piaget Avenue					
City, State, Zip Code Oceanville, NJ 08231				City, State, Zip Code Clifton, NJ 07011					
Project Manager for Monitoring Firm John Smoyer		Telephone No. 609-652-1833		Telephone No. 973-253-8828					
License No. 00704									
Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/21/2026		Name of OSHA Monitor VMC Company, 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: <u>occupied</u>				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
Gym, Kitchen Storage/Mech. Room		x		Flooring	5,400 SF	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 		Name of Registered Landfill IESI Landfill			
City, State Elizabeth, NJ				Disposal Date 		City, State Bethlehem, PA			
Completed by Voytek Roszkowski		Title President		Signature 		Date 07/13/2026			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)
PAL Job# 26-1181

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Date of Notification (1) 07/14/2026		Name of Building Owner/Operator (2) Rutgers University							
Agencies Notified	Type Notification	Street Address 33 Knightsbridge Road							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA	☐ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Piscataway, NJ 08854							
		Name of Contact Zaydie Cahdwick	Telephone Number 848-202-6430						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Rutgers University - Plant Physiology Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1 College Farm Road		Square Feet	# of Floors						
City (5) New Brunswick, NJ 08873		Bldg. Age							
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) EFI Global		ASCM No.	Name of Abatement Contractor (9) PAL Environmental Safety Corp. D/B/A PAL Envir						
Street Address 701 Penhorn Avenue		Street Address 11-02 Queens Plaza South							
City, State, Zip Code Secaucus, NJ 07094		City, State, Zip Code Long Island City, NY 11101							
Project Manager for Monitoring Firm Danielle Schaefer		Telephone No. 732-427-5403	Telephone No. 718-349-0900						
License No. 00853									
Start Date (10) 07/27/2026	Scheduled Completion Date (11) 10/27/2026	Name of OSHA Monitor Timothy Barrett							
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 398 Bunker Drive							
		City, State, Zip Code Oceanside, NY 11572							
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 quantity sheet									
Name of Registered Waste Hauler Cardella Trucking Co.		NJDEP Waste Hauler ID No. NJ-851	Cubic Yards of Waste 20 Yards	Name of Registered Landfill Fairless Landfill					
City, State North Bergen, NJ			Disposal Date 07/29/2026	City, State Morrisville, PA					
Completed by Ann A. Ali		Title Compliance Admin	Signature 			Date 07/14/2026			

FLOOR	TYPE OF MATERIAL	QUANTITY	
		SF	LF
1ST FLOOR	MASTIC	30	
	VAT	560	
	PIPE INSULATION		60
	PLASTER WALLS	2,010	
	PLASTER CEILING	1,100	
	CHALKBOARDS	40	
2ND FLOOR	COVE BASE	30	
	VAT	2,100	
	JOINT COMPOUND	30	
	PLASTER WALLS	2,010	
	CHALKBOARDS	40	
EXTERIOR	WINDOW GLAZING	20	
		7970	60

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

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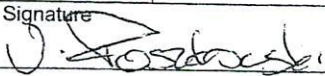
Date of Notification (1) 7/6/2026		Name of Building Owner/Operator (2) Morrow Memorial Church		JUL 15 2026				
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 600 Ridgewood Rd		ASBESTOS CONTROL & LICENSING			
			City, State, Zip Code Maplewood NJ 07040					
			Name of Contact Mike Hertl		Telephone Number 908 330 1859			
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Morrow Memorial Church			Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 600 Ridgewood Rd			Square Feet 30,000	# of Floors 2	Bldg. Age 1911			
City (5) Maplewood		County (6) Essex		County Code (7) (STATE USE ONLY) _____				
Name of Monitoring Firm Hired by Building Owner (8) Empire Environmental Ltd.			ASCM No. _____	Name of Abatement Contractor (9) MKD Property Maintenance LLC				
Street Address 150 River Rd, F4			Street Address 105 Van Riper Avenue					
City, State, Zip Code Montville NJ 07045			City, State, Zip Code Clifton NJ 07011					
Project Manager for Monitoring Firm Michael Boggi		Telephone No. 201 70 3878		Telephone No. 201/899/9008	License No. 01336			
Start Date (10) 7/21/2026		Scheduled Completion Date (11) 9/20/2026		Name of OSHA Monitor MKD PROPERTY MAIN LLC				
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address 105 Van Riper Ave					
			City, State, Zip Code Clifton NJ 07011					
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
Boiler room		X	Pipe insulation	144 LF	x			
Basement storage closet		x	Boiler breeching	130 SF	x			
Name of Registered Waste Hauler MKD Property Maintenance LLC		NJDEP Waste Hauler ID No. 003791	Cubic Yards of Waste N/A	Name of Registered Landfill Fairless Landfill				
City, State Clifton NJ 07011			Disposal Date N/A	City, State Morrisville PA 19067				
Completed by Darko Raloski		Title Owner	Signature 		Date 7/6/2026			

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Print Form

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

JUL 23 2026

Date of Notification (1) 07/20/2026		Name of Building Owner/Operator (2) Dover Public Schools							
Agencies Notified	Type Notification	Street Address 21 Belmont Avenue							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Dover, NJ 07801							
		Name of Contact	Telephone Number 973-989-2000						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Dover High School		Type of Facility (4)							
Street Address 100 Grace Street		☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Dover	Square Feet	# of Floors	Bldg. Age						
County (6) Morris	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) school							
Name of Monitoring Firm Hired by Building Owner (8) RJB Environmental, Inc		ASCM No. 00149	Name of Abatement Contractor (9) VMC Company, Inc						
Street Address PO Box 869		Street Address 208 Piaget Avenue							
City, State, Zip Code Levittown, PA 19058		City, State, Zip Code Clifton, NJ 07011							
Project Manager for Monitoring Firm Richard Beach		Telephone No. 267-991-9212	Telephone No. 973-253-8828						
Start Date (10) 07/31/2026		Scheduled Completion Date (11) 08/21/2026	License No. 00704						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor VMC Company, Inc							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Auditorium		X		Ceiling plaster	6,860 SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Grand Central Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Pen Argyl, PA					
Completed by Voytek Roszkowski		Title President	Signature 			Date 07/20/2026			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

44365
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Date of Notification (1)

7 / 21 /2026

Agencies Notified

☒ EPA
☐ DEP
☒ DOL
☒ DOH
☐ DCA

Type Notification

☐ Initial Notification
☒ Amended Notification #3
☐ Cancellation
☐ On Hold
☐ EMERGENCY NOTIFICATION

Name of Building Owner/Operator (2)
ATLANTIC HEALTH SYSTEM

Street Address
475 SOUTH STREET

City, State, Zip Code
MORRISTOWN, NEW JERSEY 07960
ASBESTOS CONTROL & LICENSING

Name of Contact
VICTOR PENA

Telephone Number
917-596-2158

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)

OVERLOOK MEDICAL CENTER

Type of Facility (4)

☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☒ Other (ie. private & commcl. bldgs., homes, etc.)

Street Address

99 BEAUVOIR AVENUE

Square Feet
400,000

of Floors
8

Bldg. Age
60+

City (5)

SUMMIT

County (6)

UNION

County Code (7)

(STATE USE ONLY)

Current Use (Prior if being demolished)
HOSPITAL

Name of Monitoring Firm Hired by Building Owner (8)

HILLMAN CONSULTING

ASCM No.

104

Name of Abatement Contractor (9)

PAR ENVIRONMENTAL CORPORATION

Street Address

1600 Route 22 East, Suite 107

Street Address

313 SPOOK ROCK ROAD

City, State, Zip Code
Union, NJ 07083

City, State, Zip Code
SUFFERN, NEW YORK 10901

Project Manager for Monitoring Firm

MIKE RIVERA

Telephone Number

908-632-5450

Telephone Number

845-369-7500

License Number

1101

Expected State Date (10)

5 / 5 /26
Month Day Year

Sched. Completion Date (11)

9 / 30 /26
Month Day Year

Name of OSHA Monitor
QUALITY ENVIRONMENTAL

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-FRIDAY 7AM-3:30 PM

Street Address

1379 US HIGHWAY 9

City, State, Zip Code

WAPPINGERS FALL, NEW YORK 12590

Scope of Work (Check all that apply)

☐ Demolition
☐ >3SF OR LF
☒ >160 SF OR 260 LF

☒ Renovation

☒ Full Containment
☐ Mini Enclosure, Tent
☐ Glovebag Procedure
☐ Non-Friable Procedure

Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)	Is Location normally used solely by Maint/Custodial Staff (12)			Description of Asbestos-Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			REMOVAL	REPAIR	ENCAPSULE	ENCLOSURE
4TH FLOOR DIAGNOSTIC IMAGING			X	FLOOR & TILE MASTIC complete	800 SF	X			
4TH FLOOR			X	VAT & MASTIC complete	40 SF	X			
4TH FLOOR			X	PIPE FITTINGS complete	30 LF	X			
ADDITION TO SCOPE:									
4TH FLOOR HALLWAY AND ROOMS			X	CEILING GLUE DABS	2,000 SF	X			

Name of Registered Waste Hauler
NEWARK CARTING

NJDEP Waste Hauler ID No.
913

Cubic Yards of Waste
25

Name of Registered Landfill
GRAND CENTRAL SANITARY

City, State

NEWARK, NEW JERSEY

Disposal Date

3/17/2026-09/30/2026

City, State

PLAINFIELD TOWNSHIP, PA

Completed by (Print or Type)

BENJAMIN SANCHEZ

Title

VICE PRESIDENT, OPERATIONS

Signature

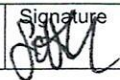
[Signature]

Date

7-21-26

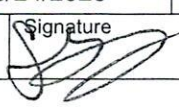
PAID
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 07/21/2026		Name of Building Owner/Operator (2) JUL 24 2026							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 1924 Lark Lane City, State, Zip Code Cherry Hill, NJ 08003 Name of Contact _____ Telephone Number _____						
	FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Balsley Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1924 Lark Lane		Square Feet 2,552	# of Floors 2						
City (5) Cherry Hill		Bldg. Age 56							
County (6) Camden	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv		ASCM No. _____	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address PO Box 341		Street Address 623 Cutler Avenue							
City, State, Zip Code Chesterfield, NJ 08515		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Nora Pearce		Telephone No. 609-298-4070	Telephone No. 856-755-0099						
		License No. 00842							
Start Date (10) 08/17/2026	Scheduled Completion Date (11) 08/21/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ 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
Kitchen & Closet			X	Vinyl Floor	225 SF	X			
Hallway from Kitchen to Laundry Room			X	Vinyl Floor	30 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 2	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ			Disposal Date 08/21/2026	City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator	Signature 	Date 07/21/2026					

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

RECEIVED

Date of Notification (1) 07/21/2026		Name of Building Owner/Operator (2) Newfield National Bank							
Agencies Notified	Type Notification	Street Address 18 S. West Boulevard							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Newfield, NJ 08344							
		Name of Contact Joshua Steelesmith	Telephone Number 856-285-8598						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Vacant Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1181 Karin Street		Square Feet 2,092	# of Floors 2						
City (5) Vineland		Bldg. Age 86							
County (6) Cumberland	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Multi-Unit Residence							
Name of Monitoring Firm Hired by Building Owner (8) FIG Environmental, LLC		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address PO Box 8574		Street Address 623 Cutler Avenue							
City, State, Zip Code Turnersville, NJ 08012		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm John Fiorelli		Telephone No. 856-553-6162	Telephone No. 856-755-0099						
Start Date (10) 08/11/2026		Scheduled Completion Date (11) 08/24/2026	License No. 00842						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other – Describe: _____		Name of OSHA Monitor EMSL Analytical, Inc.							
		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <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	Window Caulk (22 Windows)	225 LF	X			
Unit 2 - Kitchen			X	Sheet Flooring	225 SF	X			
Crawlspace			X	Pipe Fitting/Insulation	385 LF	X			
Crawlspace			X	Pipe Fitting/Insulation Debris	720 SF	X			
Name of Registered Waste Hauler Shade Environmental, LLC		NJDEP Waste Hauler ID No. 32426	Cubic Yards of Waste 11	Name of Registered Landfill Cumberland County Landfill					
City, State Maple Shade, NJ		Disposal Date 08/24/2026		City, State Millville, NJ					
Completed by Samantha Brown		Title Operations Coordinator		Signature 		Date 07/21/2026			

6436
CK # 6436

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

JUL 24 2026

Date of Notification (1) 7-17-26		Name of Building Owner/Operator (2) REUTER CONSTRUCTION								
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation								
Street Address 459 N. BEECHAM RD		City, State, Zip Code WILLIAMSTOWN N.J 08094								
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 B (Other than K-12) ☒ Other (i.e., private & commercial buildings, homes, etc.)								
Street Address 110 45TH ST		Square Feet 1500								
City (5) SEA ISLE CITY		# of Floors 2								
County (6) CAPE MAY		Bldg Age 50								
County Code (7) / STATE USE ONLY		Current Use (Prior if being demolished) VACANT								
Name of Monitoring Firm Hired by Building Owner (8) N/A		Name of Abatement Contractor (9) KLEWCO INC								
Street Address		Street Address 369 S SPRUCE AVE								
City, State, Zip Code		City, State, Zip Code MAPLE SHADE N.J 08052								
Project Manager for Monitoring Firm		Telephone No. 856-779-0472								
Telephone No.		License No. # 01371								
Start Date (10) 7-27-26		Scheduled Completion Date (11) 8-7-26								
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Name of OSHA Monitor N/A								
Street Address		City, State, Zip Code								
Scope of Work (Check all that apply) ☐ < 3 sf or < 3 ft ☒ > 160 sf or > 260 ft ☐ 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	
SIDING			X	TRANSITE	2250 SF	X				
Name of Registered Waste Hauler KLEWCO INC		NJDEP Waste Hauler ID No. 17904		Cubic Yards of Waste 4		Name of Registered Landfill C MAC MUA				
City, State MAPLE SHADE N.J		Disposal Date		City, State WOODBRIE N.J		Signature [Signature]		Date 7-17-26		
Completed By MICHAEL KLEWCO		Title PRES								

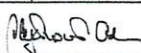
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

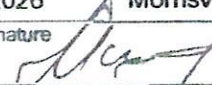
Date of Notification (1) 07/15/2026		Name of Building Owner/Operator (2) Bergen County Department of Public Works		Check No. 4146				
Agencies Notified	Type Notification	Street Address 1 Bergen County Plaza						
☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Hackensack, New Jersey 07601						
		Name of Contact Alex Myers		Telephone Number (201) 336-6804				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Bergen County Annex Bldg.			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 220 East Ridgewood Ave			Square Feet 3000					
City (5) Paramus, New Jersey 07652			# of Floors 1		Bldg. Age 50+			
County (6) Bergen		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Building				
Name of Monitoring Firm Hired by Building Owner (8) Environmental Design, Inc		ASCM No.		Name of Abatement Contractor (9) Lilich Corporation				
Street Address 5434 King Avenue, Suite 101		Street Address 246 Union Boulevard						
City, State, Zip Code Pennsauken, New Jersey 08109		City, State, Zip Code Totowa, New Jersey 07512						
Project Manager for Monitoring Firm Tim Gromen		Telephone No 856-616-9516		Telephone No 973-225-8400				
Start Date (10) 07/25/2026		Scheduled Completion Date (11) 7/30/2026		License No. 01104				
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 LIS Consulting Services, LLC					
			Street Address 3B Cottage Court					
			City, State, Zip Code Manchester Twp, NJ 08759					
Scope of Work (Check All That Apply)								
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glove Bag Procedure / Limited Containment & Tent ☐ Non-Exempted (*) and Non-Friable Procedure				
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
1st Fl exterior		X	Window Glazing (10 EA)	95 SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 10		Name of Registered Landfill Grand Central Sanitary Landfill		
City, State Elizabeth, New Jersey		Disposal Date July/2026		City, State 1963 Pen Argyl Rd, Pen Argyl, PA 18027				
Completed by Adriana Olejarova		Title President		Signature 		Date 07/15/2026		

ASB-41 (R-06-08)

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

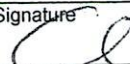
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 07/21/2026		Name of Building Owner/Operator (2) DEPARTMENT OF MILITARY & VETERAN AFFAIRS CAMPUS 2026							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☐ Initial ☒ Amended Amendment <u>1</u> ☐ Emergency (including justification) ☐ Cancellation	101 Eggert's Crossing Road City, State, Zip Code LAWRENCEVILLE, NEW JERSEY Name of Contact Keith Gardner							
		Telephone Number 908-528-7137							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) NJDMVA HEADQUARTERS COMPLEX DLOG'S BUILDING		Type of Facility (4)							
Street Address 101 EGGERT'S CROSSING ROAD		☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) LAWRENCEVILLE, NEW JERSEY		Square Feet N/A	# of Floors N/A						
County (6) Mercer		Bldg. Age N/A							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Administration Building							
Name of Monitoring Firm Hired by Building Owner (8) Whittman Companies		ASCM No. 00110	Name of Abatement Contractor (9) Teal Management						
Street Address 100 Franklin Square Drive, Suite 200		Street Address 24 Motrley Drive							
City, State, Zip Code Somerset, NJ 08873		City, State, Zip Code Woodland Park NJ 07424							
Project Manager for Monitoring Firm Mark Costantino		Telephone No. (732) 390-5858	Telephone No. 862-243-1471						
Start Date (10) 07/29/2026		Scheduled Completion Date (11) 08/15/2026	License No. 02063						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor Teal Management							
☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>UNOCCUPIED BUILDING</u>		Street Address 24 Morley Drive							
		City, State, Zip Code Woodland Park NJ 07424							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Front Office areas including Conference Rms			x	Floor tile & Mastic Under Carpet	10,000 SF	x			
Name of Registered Waste Hauler Teal Management		NJDEP Waste Hauler ID No. 40229	Cubic Yards of Waste 30 CY	Name of Registered Landfill Fairless Hills Landfill					
City, State Woodland Park NJ 07424		Disposal Date 08/10/2026		City, State Morrisville PA					
Completed by Tome Maslarkov		Title Project Manager		Signature 		Date 07/21/2026			

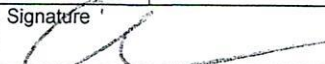
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 7/23/26		Name of Building Owner/Operator (2) Art Corsini							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 220 Ganttown Rd							
		City, State, Zip Code Blackwood NJ 08012							
		Name of Contact Art Corsini	Telephone Number 215-669-6592						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Art Corsini		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 220 Ganttown Rd		Square Feet 1000+	# of Floors 2						
City (5) Blackwood NJ 08012		Bldg. Age 50+							
County (6) Gloucester	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) House							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No. _____	Name of Abatement Contractor (9) Pernaco Inc.						
Street Address		Street Address PO Box 329							
City, State, Zip Code		City, State, Zip Code West Berlin NJ 08091							
Project Manager for Monitoring Firm		Telephone No. 856-753-9800	License No. 00727						
Start Date (10) 8/5/26	Scheduled Completion Date (11) 8/12/26	Name of OSHA Monitor Same							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition	☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior			x	Exterior Siding	560 SF	x			
Basement Windows			x	Caulking & Glazing	32 LF				
Name of Registered Waste Hauler Pernaco Inc		NJDEP Waste Hauler ID No. 21787	Cubic Yards of Waste 2	Name of Registered Landfill Fairless Hills					
City, State Berlin NJ		Disposal Date 8/12/26		City, State Morrisville PA 19067					
Completed by Anthony T Perna		Title President		Signature 			Date 7/23/26		

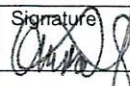
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 7/23/26		Name of Building Owner/Operator (2) Brian Pearce 2nd St Properties LLC							
Agencies Notified	Type Notification	Street Address 162 W Camden Ave							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Moorestown NJ 08057							
		Name of Contact Brian Pearce	Telephone Number 609-744-5451						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Storage Garage		Type of Facility (4)							
Street Address 325 West Main Street		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Moorestown NJ 08057		Square Feet 1000+	# of Floors 2						
County (6) Burlington		County Code (7) (STATE USE ONLY)	Bldg. Age 50+						
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) Pernaco Inc.						
Street Address		Street Address PO Box 329							
City, State, Zip Code		City, State, Zip Code West Berlin NJ 08091							
Project Manager for Monitoring Firm		Telephone No. 856-753-9800	License No. 00727						
Start Date (10) 8/6/26	Scheduled Completion Date (11) 8/24/26	Name of OSHA Monitor Same							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Through-out			x	Floor Tile & Mastic	6120 SF	x			
large office Room			x	Textured Wall Board	970 SF				
Name of Registered Waste Hauler Pernaco Inc		NJDEP Waste Hauler ID No. 21787	Cubic Yards of Waste 30	Name of Registered Landfill Fairless Hills					
City, State Berlin NJ		Disposal Date 8/12/26		City, State Morrisville PA 19067					
Completed by Anthony T Perna		Title President	Signature 			Date 7/23/26			

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

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Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) Cherry Hill Board of Education							
Agencies Notified	Type Notification	Street Address 45 Ranoldo Terrace							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Cherry Hill, NJ 08034							
		Name of Contact Steve Nicoletta	Telephone Number 856-489-5795						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) James H. Johnson Elementary School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 500 Kresson Road		Square Feet 100,000	# of Floors 2						
City (5) Cherry Hill		Bldg. Age 60							
County (6) Camden	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc.		ASCM No. 003	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Tim Popp		Telephone No. 856-840-8800	Telephone No. 856-755-0099						
		License No. 00842							
Start Date (10) 07/23/2026	Scheduled Completion Date (11) 08/14/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: <u>Subchapter 8 Occupied</u>		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Soffit Overhang		X		Exterior Soffit Ceiling	500 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 40	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 08/14/2026		City, State Morgantown, PA					
Completed by Christina Fay		Title VP of Operations		Signature 				Date 07/22/2026	

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

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JUL 27 2026

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 City, State, Zip Code Newark, NJ 07108 Name of Contact Benjamin Olagadeyo Telephone Number 973-733-7220 x 8149						
	FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Chancellor Avenue School Street Address 321 Chancellor Avenue City (5) Newark County (6) Essex County Code (7) (STATE USE ONLY) _____ Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.) Square Feet 100,000 # of Floors 4 Bldg. Age 100 Current Use (Prior if being demolished) School								
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc.		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 856-840-8800	Telephone No. 856-755-0099 License No. 00842						
Start Date (10) 07/24/2026	Scheduled Completion Date (11) 07/28/2026		Name of OSHA Monitor EMSL Analytical, Inc.						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Nurse's Office		X		Floor Tile & Mastic	500 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 4	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ			Disposal Date 07/28/2026	City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator			Signature 		Date 07/23/2026		

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

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Date of Notification (1) 07/23/2026		Name of Building Owner/Operator (2) Newark Board of Education							
Agencies Notified	Type Notification	Street Address 190 Muhammad Ali Avenue							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Newark, NJ 07108							
		Name of Contact Benjamin Olagadeyo	Telephone Number 973-733-7220 x 8149						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) South 17th Street School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 619 South 17th Street		Square Feet 100,000	# of Floors 4						
City (5) Newark		Bldg. Age 141							
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) TTI Environmental, Inc.		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 856-840-8800	License No. 00842						
Start Date (10) 07/27/2026	Scheduled Completion Date (11) 07/31/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) In Facility (13) <u>TO BE ABATED</u>	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
Vice Principal's Office		X		Wall Plaster	20 SF	X			
Vice Principal's Office		X		Pipe Insulation	7 LF	X			
Room 107		X		Floor Tile & Mastic	20 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 07/31/2026		City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator		Signature 				Date 07/23/2026	

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

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JUL 27 2026

Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) Church Street Associates							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address PO Box 43033							
		City, State, Zip Code Upper Montclair, NJ, 07043							
		Name of Contact Akke Wheatley	Telephone Number 859-912-1905						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) The Hall Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 40-46 Church Street		Square Feet 7,000	# of Floors 2						
City (5) Montclair		Bldg. Age 75							
County (6) Essex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Commercial Space							
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address PO Box 341		Street Address 623 Cutler Avenue							
City, State, Zip Code Chesterfield, NJ 08515		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Nora Pearse		Telephone No. 609-298-4070	Telephone No. 856-755-0099						
		License No. 00842							
Start Date (10) 08/01/2026	Scheduled Completion Date (11) 08/05/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: <u>Abatement performed in vacant area</u>		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply)									
☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf									
☒ Renovation ☐ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st Floor Bathroom		X		Floor Tile & Mastic	50 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 08/05/2026		City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator		Signature 		Date 07/22/2026			

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

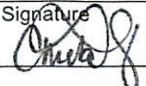
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Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) Newark Board of Education							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 190 Muhammad Ali Avenue						
			City, State, Zip Code Newark, NJ 07108						
		Name of Contact Benjamin Olagadeyo	Telephone Number 973-733-7220 x 8149						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Abington Avenue School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 209 Abington Avenue		Square Feet 100,000	# of Floors 4						
City (5) Newark		Bldg. Age 141							
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) TTI Environmental, Inc.		ASCM No. 003	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 856-840-8800	Telephone No. 856-755-0099						
Start Date (10) 08/04/2026		Scheduled Completion Date (11) 08/22/2026	License No. 00842						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>Subchapter 8 Occupied Procedures</u>		Name of OSHA Monitor EMSL Analytical, Inc.							
		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <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
Room 206 & Closet		X		Ceiling & Wall Plaster	1,200 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 40	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 08/22/2026		City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator		Signature 		Date 07/22/2026			

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

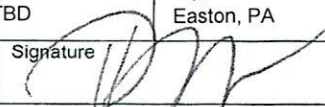
RECEIVED

JUL 27 2026

Date of Notification (1) 07/22/2026			Name of Building Owner/Operator (2) 						
Agencies Notified		Type Notification		Street Address 913 Schuyler Place					
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		City, State, Zip Code Turnersville, NJ 08012					
				Name of Contact _____ Telephone Number _____					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 913 Schuyler Place				Square Feet 1,820					
City (5) Turnersville				# of Floors 2					
County (6) Gloucester				Bldg. Age 67					
County Code (7) (STATE USE ONLY) _____			Current Use (Prior if being demolished) Residence						
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv			ASCM No. _____		Name of Abatement Contractor (9) Shade Environmental, LLC				
Street Address PO Box 341			Street Address 623 Cutler Avenue						
City, State, Zip Code Chesterfield, NJ 08515			City, State, Zip Code Maple Shade, NJ 08052						
Project Manager for Monitoring Firm Nora Pearse			Telephone No. 609-298-4070		Telephone No. 856-755-0099				
					License No. 00842				
Start Date (10) 08/08/2026		Scheduled Completion Date (11) 08/12/2026		Name of OSHA Monitor EMSL Analytical, Inc.					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address 200 Route 130 North					
				City, State, Zip Code Cinnaminson, NJ 08077					
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Laundry Room			X	Floor Tile & Mastic	180 SF	X			
Den			X	Floor Tile & Mastic	299 SF	X			
Name of Registered Waste Hauler Freehold Cartage			NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 3		Name of Registered Landfill Conestoga Landfill		
City, State Freehold, NJ			Disposal Date 08/12/2026		City, State Morgantown, PA				
Completed by Christina Fay			Title VP of Operations		Signature 		Date 07/22/2026		

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

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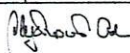
Date of Notification (1) 07/20/26		Name of Building Owner/Operator (2) Wharton Bd of Ed		JUL 23 2026						
Agencies Notified		Type Notification		Street Address						
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		137 E Central Ave City, State, Zip Code Wharton, NJ 07885						
		Name of Contact Sandy Cammarata, BA		Telephone Number 973-361-2593						
FACILITY INFORMATION										
Name of Facility Where Abatement is Taking Place (3) Duffy Elem School				Type of Facility (4)						
Street Address 137 E Central Ave				☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)						
City (5) Wharton				Square Feet n/a	# of Floors 1					
County (6) Morris				County Code (7) (STATE USE ONLY) _____	Bldg. Age unknown					
Name of Monitoring Firm Hired by Building Owner (8) Westchester Environmental, LLC		ASCM No.		Name of Abatement Contractor (9) Panoramic Window & Door Systems, Inc.						
Street Address 1248 Wrights Lane		Street Address 712 Sergeantsville Rd								
City, State, Zip Code Westchester, PA 19380		City, State, Zip Code Stockton, NJ 08559								
Project Manager for Monitoring Firm Matthew Abraham		Telephone No. 610-431-7545		Telephone No. 732-926-0900	License No. 01237					
Start Date (10) 7/30/26		Scheduled Completion Date (11) 9/04/26		Name of OSHA Monitor Panoramic Window & Door Systems, Inc.						
Occupancy Status During Abatement (Check Only One)				Street Address 712 Sergeantsville Rd						
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code Stockton, NJ 08559						
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	
Windows		Yes	No	N/A	panels/perimeter caulk	3592sf	x			
Brick				x	expansion joints	300lf	x			
Name of Registered Waste Hauler Panoramic Window & Door Systems, Inc.		NJDEP Waste Hauler ID No. 0036057		Cubic Yards of Waste TBD	Name of Registered Landfill Chrin Bros Sanitary Landfill					
City, State Stockton, NJ				Disposal Date TBD	City, State Easton, PA					
Completed by Paul Nagy		Title VP		Signature 			Date 7/20/26			

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

PAID

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JUL 24 2026

Date of Notification (1) 07/17/2026		Name of Building Owner/Operator (2) Ileam Facility Development Inc		Check #4147				
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 33-00 Broadway					
			City, State, Zip Code Fair Lawn, NJ 07410					
		Name of Contact Richard Arslan		Telephone Number 708-967-5720				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Warehouse			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial bldgs..., homes, etc.)					
Street Address 155 Sherman Ave								
City (5) Paterson, New Jersey 07502			Square Feet 50,000	# of Floors 2	Bldg. Age +55			
County (6) Passaic		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) warehouse				
Name of Monitoring Firm Hired by Building Owner (8) Detail Associates, Inc		ASCM No. 0012		Name of Abatement Contractor (9) Lilich Corporation				
Street Address 560 Sylvan Ave, Suite 3065		Street Address 246 Union Boulevard						
City, State, Zip Code Englewood Cliffs, NJ 07632		City, State, Zip Code Totowa, New Jersey 07512						
Project Manager for Monitoring Firm Nadine Bello, MS, RPIH, CIEC, AST		Telephone No. 973-981-4850		Telephone No. 973-225-8400	License No. 01104			
Start Date (10) 08/01/2026		Scheduled Completion Date (11) 08/20/2026		Name of OSHA Monitor LIS CONSULTING SERVICES, LLC				
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address 3 B Cottage Court					
			City, State, Zip Code Whiting, New Jersey					
Scope of Work (Check All That Apply)								
☐ ≥ 3 sf or ≥ 3 lf ☐ Renovation ☒ ≥ 160 sf or ≥ 260 lf ☒ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glove bag Procedure / Limited Containment & Tent ☒ Non-Exempted (*) and Non-Frangible 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
Throughout building	X		TSI Pipe Insulation (Wrap & Cut)	1000 LF	X			
1 st & 2 nd FL	X		Tiles & Mastic	3400 SF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 40	Name of Registered Landfill Grand Central Landfill				
City, State Elizabeth, New Jersey			Disposal Date August/2026	City, State Pen Argyl, PA				
Completed by Adriana Olejarova		Title President	Signature 		Date 07/17/2025			

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

Check 3830

JUL 29 2026

Date of Notification (1) 07/18/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 47 Miliken Rd ASBESTOS CONTROL & LICENSING							
☐ 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)		Type of Facility (4)							
Street Address 47 Miliken 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 1,550	# of Floors 1 Bldg. Age 1952						
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/27/2026	Scheduled Completion Date (11) 08/03/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Attic & Basement		x		transite asbestos exhaust duct	all accessible			x	x
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 08/03/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 07/18/2026		

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

Check 3829

RECEIVED

Date of Notification (1) 07/18/2026		Name of Building Owner/Operator (2) JUL 29 2026							
Agencies Notified	Type Notification	Street Address 163 John F Kennedy Blvd							
☐ 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) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 163 John F Kennedy Blvd		Square Feet 1,684	# of Floors 1						
City (5) Somerset, NJ 08873		Bldg. Age 1964							
County (6) Somerset	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 07/27/2026	Scheduled Completion Date (11) 08/03/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Living & Dining room & 3 bedrooms		x		Floor tile & mastic	800 SF	x			
First floor		x		Supply ducts in the floor				x	
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 08/03/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 07/18/2026		

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

Check 3832
RECEIVED

Date of Notification (1) 07/24/2026		Name of Building Owner/Operator (2) JUL 29 2026							
Agencies Notified	Type Notification	Street Address 5 Dogwood Ct							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code East Brunswick, NJ 08816							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4)							
Street Address 5 Dogwood Ct		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) East Brunswick, NJ 08816		Square Feet 1,853	# of Floors 1						
		Bldg. Age 1959							
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)							
Street Address		Street Address							
City, State, Zip Code		City, State, Zip Code							
Project Manager for Monitoring Firm		Telephone No.	License No.						
Start Date (10) 08/05/2026		Scheduled Completion Date (11) 08/10/2026							
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Attic		X		chimney pipe					X
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 08/10/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 07/24/2026			

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

Check 3831

RECEIVED

Date of Notification (1) 07/23/2026		Name of Building Owner/Operator (2) JUL 29 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 206 Browertown Rd City, State, Zip Code Woodland Park, NJ 07424 Name of Contact _____ Telephone Number _____						
			ASBESTOS CONTROL & LICENSING						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 206 Browertown Rd		Square Feet 1,998	# of Floors 2						
City (5) Woodland Park, NJ 07424		Bldg. Age 1930							
County (6) Passaic	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 08/03/2026	Scheduled Completion Date (11) 08/10/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥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 back bedroom		x		Floor tile	200 SF	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 08/10/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 07/23/2026		

3845

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

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Print Form

JUL 29 2026

Date of Notification (1) 07/24/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 8 Elmwood Dr						
			City, State, Zip Code Livingston, NJ 07039						
			Name of Contact _____ Telephone Number _____						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 8 Elmwood Dr			Square Feet 1,524	# of Floors 1	Bldg. Age 1950				
City (5) Livingston, NJ 07039			Current Use (Prior if being demolished) _____						
County (6) Essex		County Code (7) (STATE USE ONLY) _____							
Name of Monitoring Firm Hired by Building Owner (8) _____		ASCM No. _____		Name of Abatement Contractor (9) VEL Construction, LLC					
Street Address _____		Street Address 75 Voorhis Place							
City, State, Zip Code _____		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm _____		Telephone No. _____		Telephone No. 201-466-0166	License No. 02126				
Start Date (10) 08/08/2026		Scheduled Completion Date (11) 08/15/2026		Name of OSHA Monitor _____					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address _____ City, State, Zip Code _____					
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior		x		Siding	1,200 SF	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 10	Name of Registered Landfill Grand Central Sanitary Landfill				
City, State Elizabeth, NJ				Disposal Date 08/15/2026	City, State Pen Argyl, PA				
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 07/24/2026		

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

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Date of Notification (1) 07/24/2026		Name of Building Owner/Operator (2)			
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 75 Woodland Ave City, State, Zip Code Glen Ridge, NJ 07028 Name of Contact _____ Telephone Number _____	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Residential House				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 75 Woodland Ave				Square Feet 1,782	
City (5) Glen Ridge, NJ 07028				# of Floors 2	
County (6) Essex				Bldg. Age 1925	
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)			
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9) VEL Construction, LLC	
Street Address		Street Address 75 Voorhis Place		City, State, Zip Code Ringwood NJ 07456	
City, State, Zip Code		Telephone No. 201-466-0166		License No. 02126	
Project Manager for Monitoring Firm		Telephone No.		Name of OSHA Monitor	
Start Date (10) 08/05/2026		Scheduled Completion Date (11) 08/14/2026		Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____	
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)
	Yes	No	N/A		
Please see attached					
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5	
City, State Elizabeth, NJ		Disposal Date 08/14/2026		Name of Registered Landfill Grand Central Sanitary Landfill	
City, State Pen Argyl, PA		Signature <i>Lubica Perez</i>		Date 07/24/2026	
Completed by Lubica Perez		Title Owner			

VEL Construction LLC**75 Woodland Avenue, Glen Ridge, NJ**

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Is Location Normally Used Solely by Maintenance/ Custodial Staff?	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type
Kitchen	No	floor tile	128 SF	Removal
Living room	No	plaster	287 SF	Removal
Living room	No	trim	72 LF	Removal
Foyer 1 Main level	No	plaster	33 SF	Removal
Foyer 1 Main level	No	trim	25 LF	Removal
Foyer 2 Main level	No	plaster	40 SF	Removal
Foyer 2 Main level	No	trim	29 LF	Removal
Basement utility room	No	plaster	191 SF	Removal
Basement utility closet	No	plaster	7 SF	Removal
Stairwell #2 closet - basement	No	plaster	5 SF	Removal
Stairs #1 - basement	No	plaster	20 SF	Removal

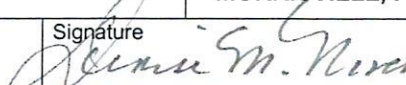
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

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Date of Notification (1) 07-22-2026		Name of Building Owner / Operator (2) The Diocese of Trenton		JUL 24 2026	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Emergency ☐ Cancellation		Street Address 701 Lawrence Rd. Lawrence Twp, NJ 08648 City, State & Zip Code Lawrence Twp, NJ 08648 Name of Contact Reverend William Lago	
				Telephone Number 732-223-0287	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) The Church of St. Denis - Boiler Room Street Address 90 Union Avenue, City (5) Manasquan			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.) Square Feet 2,200		
County (6) Monmouth			# of Floors 2 Bldg. Age 75		
County Code (7) 			Current Use (Prior if being demolished) Church		
Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services Inc. Street Address P.O. Box 365 City, State & Zip Code Berlin, NJ 08009		ASCM No. 		Name of Abatement Contractor (9) Resource Management Group, LLC. Street Address 2115 Hamilton Avenue, Suite 202 City, State & Zip Code Trenton, NJ 08619	
Project Manager for Monitoring Firm Jim Proctor		Telephone Number 609-839-2432		Telephone Number 609-914-4279 License Number 01185	
Scheduled Start Date (10) 08-04-2026		Scheduled Completion Date (11) 08-28-2026		Name of OSHA Monitor J&S Environmental Laboratories, Inc.	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed During Normal Hours Describe: 8:00 am to 4:30pm ☐ Facility Occupied During Abatement			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 ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ 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) Yes No N/A		Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	
Boiler Room		☒ ☐ ☐		Gray Boiler Caulk	
Boiler Room		☒ ☐ ☐		Pipe Fittings	
Boiler Room (from both Boilers)		☒ ☐ ☐		Rope Gasket	
		☐ ☐ ☐			
		☐ ☐ ☐			
		☐ ☐ ☐			
Name of Registered Waste Hauler Resource Management Group, LLC. City, State Trenton, NJ 08619		NJDEP Waste Hauler ID No. 0035218		Cubic Yards of Waste TBD Disposal Date TBD	
				Name of Registered Landfill Grows Landfill City, State Morrisville, PA	
Completed By (Print or Type) Mr. Brian Haney		Title President		Signature <i>Brian Haney</i> Date 07-22-2026	

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

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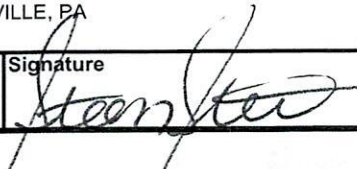
Date of Notification (1) 07 / 23 / 26		Name of Building Owner/Operator (2) VIRTUA HEALTH							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☒ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 2 ☐ Emergency (including justification) ☐ Cancellation	Street Address 20 WEST STOW ROAD-STE. 3 City, State, Zip Code MARLTON, NJ 08053							
	Name of Contact PATRICIA DUFRENE		Telephone Number (609) 267-0700						
	FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) VIRTUA MOUNT HOLLY HOSPITAL		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 175 MADISON AVENUE		Square Feet 650,000	# of Floors 7						
City (5) MOUNT HOLLY, NJ		Bldg. Age 50+/-							
County (6) BURLINGTON	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) HOSPITAL							
Name of Monitoring Firm Hired by Building Owner (8) VERTEX COMPANIES		ASCM No.	Name of Abatement Contractor (9) PEPPER ENVIRONMENTAL SERVICES, INC.						
Street Address 2501 SEAPORT DRIVE-SUITE BH 110		Street Address 2251 FRALEY STREET							
City, State, Zip Code CHESTER, PA 19013		City, State, Zip Code PHILADELPHIA, PA 1917							
Project Manager for Monitoring Firm DON HEIM		Telephone No. (610) 787-0402	License No. 01166						
Start Date (10) 06 / 22 / 26	Scheduled Completion Date (11) 09 / 25 / 26	Name of OSHA Monitor VERTEX COMPANIES							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-7PM / PM-5AM		Street Address 2501 SEAPORT DRIVE-SUITE BH 110 City, State, Zip Code CHESTER, PA 19013							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler HORIZON DISPOSAL SERVICES		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill WASTE MANAGEMENT					
City, State TRENTON, NJ			Disposal Date	City, State MORRISVILLE, PA					
Completed By (Print or Type) DENISE M. NIVEN		Title ADMIN. ASST.	Signature 	Date 7/23/26					

LOCATION OF ASBESTOS CONTAINING MATERIAL (ACM) TO BE ABATED IN FACILITY	IN LOCATION USED SOLELY BY MAINTENANCE/ CUSTODIAL STAFF? YES-NO-N/A	DESCRIPTION OF ASBESTOS-CONTAINING MATERIAL (ACM) (I.E. THERMAL SYSTEMS INSULATION, SURFACING, VAT, OR OTHER MISCELLANEOUS)	AMOUNT OF ASBESTOS (SF OR LF)	ABATEMENT TYPE			
				REMOVAL	REPAIR	ENCAPSULATE	ABATEMENT TYPE
4TH FLOOR CHEMISTRY LAB	N/A	VAT/MASTIC	14 SF	YES	NO	NO	NO
LAB "T" 4094	N/A	ACPI	3 LF	YES	NO	NO	NO
4TH FLOOR SLEEP CENTER (10 SEPARATE LOCATIONS ABOVE CEILING <1 LF EACH)	N/A	WHITE SEAM MASTIC	5 LF	YES	NO	NO	NO
4TH FLOOR SLEEP CENTER	N/A	FLOOR MASTIC	6 SF	YES	NO	NO	NO

1216

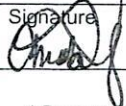
STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7)

CK 1216

Date of Notification (1) 06 / 22 / 26		Name of Building Owner / Operator (2) IMTT	
Agencies Notified ☐ EPA ☐ DEP ☒ DOH ☒ DOL ☐		Type of Notification ☐ Initial ☒ Amended ☒ Amendment # 1 ☐ Emergency w/ justification ☐ Cancellation	
Street Address 250 EAST 22ND STREET		City, State, Zip Code BAYONNE, NJ	
Name of Contact JOSH FOSTER		Telephone Number 504.619.2329	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) IMTT - YARD 4		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private & commercial bldgs., homes, etc.)	
Street Address 250 EAST 22ND STREET		Building Age N/A	
City (5) BAYONNE	County (6) HUDSON	County Code (7)	Square Feet N/A
Current Use (Prior if being demolished) FUEL STORAGE		# Of Floors N/A	
Name of Monitoring Firm Hired by Bldg. Owner (8) AET		ASCM NO NORTHSTAR CONTRACTING GROUP, INC.	
Street Address 28 Pennell Road		Street Address 32 Williams Parkway	
City, State, Zip Code Media, PA 19063		City, State, Zip Code East Hanover, NJ 07936	
Project Mngr. For Monitoring Firm ERIC SUTHERLAND		Telephone Number 610-891-0114	
Scheduled Start Date (10) 07 / 01 / 26	Sched. Completion Date (11) 06 / 30 / 27	Telephone Number 973-884-8682	License Number 00860
Occupancy Status During Abatement (Check Only 1) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe: ☒ Other - Describe: 7:00AM-5:30PM - MON - FRI 7:00AM - 3:30 SAT		Name of OSHA Monitor NORTHSTAR CONTRACTING GROUP, INC. Street Address 32 Williams Parkway City, State, Zip Code East Hanover, NJ 07936	
Scope of Work (Check All That Apply) ☐ Demolition ☒ Renovation ☐ Full Containment with Negative Pressure ☐ ≥3sf or ≥3lf ☐ Mini - Enclosure ☒ ≥160 sf or ≥260 lf ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure			
Location of Asbestos Containing 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)
TANK 4001	☐ YES ☒ NO ☐ N/A	ANTI CORROSIVE TAR	43,500SF
TANK 4006	☐ YES ☒ NO ☐ N/A	ANTI CORROSIVE TAR	43,500SF
PIPE RACKS	☐ YES ☒ NO ☐ N/A	PIPE INSULATION	640 LF
Name of Registered Waste Hauler NORTHSTAR CONTRACTING GROUP, INC		NJDEP Waste Hauler ID No. NJ 750	Name of Registered Landfill FAIRLESS LANDFILL
City, State EAST HANOVER, NJ 07936		Disposal Date	City, State MORRISVILLE, PA
Completed by (Print or Type) STEVEN STILES		Title Project Manager	Signature  Date 07/24/26

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

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Date of Notification (1) 07/23/2026		Name of Building Owner/Operator (2) Cherry Hill Board of Education		JUL 27 2026						
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation		Street Address 45 Rinaldo Terrace City, State, Zip Code Cherry Hill, NJ 08034 Name of Contact Steve Nicoletta Telephone Number 856-489-5795						
FACILITY INFORMATION										
Name of Facility Where Abatement is Taking Place (3) James H. Johnson Elementary School			Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 500 Kresson Road			Square Feet 100,000 # of Floors 2 Bldg. Age 60							
City (5) Cherry Hill			County (6) Camden County Code (7) (STATE USE ONLY) _____ Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc.		ASCM No. 003		Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue		City, State, Zip Code Maple Shade, NJ 08052						
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052		Project Manager for Monitoring Firm Tim Popp Telephone No. 856-840-8800 Telephone No. 856-755-0099 License No. 00842						
Start Date (10) 07/23/2026		Scheduled Completion Date (11) 08/14/2026		Name of OSHA Monitor EMSL Analytical, Inc.						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: Work area to be isolated from occupied areas				Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077						
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure										
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) 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
Exterior Soffit Overhang		X			Exterior Soffit Ceiling	500 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 40		Name of Registered Landfill Conestoga Landfill				
City, State Freehold, NJ		Disposal Date 08/14/2026		City, State Morgantown, PA						
Completed by Christina Fay		Title VP of Operations		Signature 		Date 07/23/2026				

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

1024
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Date of Notification (1) 07/20/26		Name of Building Owner/Operator (2) Township of Kearny							
Agencies Notified	Type Notification	Street Address 402 Kearny Ave.							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Kearny, NJ 07032							
		Name of Contact George King	Telephone Number 201-955-7400						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Kearny Board of Health Building		Type of Facility (4)							
Street Address 645 Kearny Ave		☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Kearny, NJ	Square Feet 4,800 sf.	# of Floors 1	Bldg. Age 69 Yrs.						
County (6) Hudson	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) BOH Offices							
Name of Monitoring Firm Hired by Building Owner (8) DAI Environmental Services		ASCM No. 00012	Name of Abatement Contractor (9) Lesco Services Inc.						
Street Address 560 Sylvan Ave.		Street Address 156 Maple Ave.							
City, State, Zip Code Engelwood Cliffs, NJ 07632		City, State, Zip Code Wallington, NJ 07057							
Project Manager for Monitoring Firm Stephen Jaraczewski		Telephone No. 201-569-6708	License No. 01107						
Start Date (10) 08/03/26	Scheduled Completion Date (11) 08/14/26	Name of OSHA Monitor Leslaw Nalodka							
Occupancy Status During Abatement (Check Only One)		Street Address 156 Maple Ave.							
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: <u>occupade</u>		City, State, Zip Code Wallington, NJ 07057							
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		*		brown linoleum flooring	600 sf.	*			
basement		*		floor tiles	25 sf.	*			
Name of Registered Waste Hauler Century Waste Services Inc.		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 10 cy.	Name of Registered Landfill GCSL					
City, State Elizabeth, NJ		Disposal Date 08/14/26		City, State Pen Argyl, PA					
Completed by Leslaw Nalodka		Title President		Signature 		Date 07/20/26			

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

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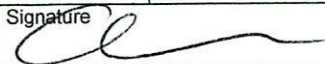
CK# 1129

Date of Notification (1) 7/24/2026		Name of Building Owner/Operator (2) Long Beach Consolidated School District							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 200 South Barnegat Avenue ASBESTOS CONTROL & LICENSING							
		City, State, Zip Code Surf City, NJ 08008							
		Name of Contact Mike Tartaglia	Telephone Number 732-803-4632						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Ethel Jacobsen Elementary School		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 200 Barnegat Avenue		Square Feet	# of Floors						
City (5) Surf City		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) RJB Environmental, Inc.		ASCM No. 149	Name of Abatement Contractor (9) NorthEast Management LLC						
Street Address PO Box 869		Street Address 41 Madison Avenue							
City, State, Zip Code Levittown, PA 19058		City, State, Zip Code Rochelle Park, NJ 07662							
Project Manager for Monitoring Firm Richard Beach		Telephone No. 267-991-9212	License No. 02008						
Start Date (10) 8/3/2026		Scheduled Completion Date (11) 9/4/2026							
Name of OSHA Monitor NorthEast Management LLC									
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 41 Madison Avenue							
		City, State, Zip Code Rochelle Park, NJ 076620							
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
Restrooms 14B/14C			X	Pipe Fitting Insulation	13LF	X			
Restrooms 14B/14C			X	ACM mastic	32SF	X			
Throughout			X	Vermiculite Insulation	492SF	X			
Throughout			X	Board Glue Dots	334SF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth, NJ		Disposal Date		City, State Morrisville, PA					
Completed by Sonja Dimovska		Title Owner		Signature <i>S. Dimovska</i>		Date 7/24/2026			

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

RECEIVED

JUL 17 2026

Date of Notification (1) 7/14/26		Name of Building Owner/Operator (2) Rancocas Vally Regional High School							
Agencies Notified	Type Notification	Street Address 520 Jacksonville Road							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Mount Holly NJ 08060							
		Name of Contact Robert Forvour	Telephone Number 609-227-0915						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Rancocas Vally Regional High School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 520 Jacksonville Road		Square Feet 1000+	# of Floors 2						
City (5) Mount Holly NJ 08060		Bldg. Age 50+							
County (6) Burlington	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Coastal Environmental Compliance		ASCM No.	Name of Abatement Contractor (9) Pernaco Inc.						
Street Address PO Box 167		Street Address PO Box 329							
City, State, Zip Code Hammonton NJ 08037		City, State, Zip Code West Berlin NJ 08091							
Project Manager for Monitoring Firm Cathy Ledden		Telephone No. 609-820-9312	License No. 00727						
Start Date (10) 7/27/26	Scheduled Completion Date (11) 8/7/26	Name of OSHA Monitor Same							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: <u>Work Area Closed Off</u>		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
Rms 239, 240,241,A244, B224,			x	Floor Tile & Mastic	2884 SF	x			
Rms 239, 240,241,A244, B224			x	Glue Dots	900 SF	x			
All One Work Area Above									
Rms 118			x	Floor Tile & Mastic	150 SF	x			
Name of Registered Waste Hauler Champion Disposal		NJDEP Waste Hauler ID No. 32707		Cubic Yards of Waste 20	Name of Registered Landfill Fairless Hills				
City, State Hianesport NJ				Disposal Date 8/7/26	City, State Morrisville PA 19067				
Completed by Anthony T Perna		Title President		Signature 		Date 7/14/26			

Notification #4
CORRECT

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

RECEIVED

OK#1124

Date of Notification (1) 7/17/2026		Name of Building Owner/Operator (2) GCC Newark LLC							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 3333 Michelson Drive - Suite 1050							
		City, State, Zip Code Irvine, CA 92612							
		Name of Contact Dave Hoehmann	Telephone Number 201-252-8600						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Commercial		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 200 US-1									
City (5) Newark, NJ 07114		Square Feet	# of Floors Bldg. Age						
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Vacant							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) NorthEast Management LLC						
Street Address		Street Address 41 Madison Avenue							
City, State, Zip Code		City, State, Zip Code Rochelle Park, NJ 07662							
Project Manager for Monitoring Firm		Telephone No. 201-577-1381	License No. 02008						
Start Date (10) 7/27/2026	Scheduled Completion Date (11) 8/27/2026	Name of OSHA Monitor NorthEast Management LLC							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Other - Describe:		Street Address 41 Madison Avenue 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) 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			X	See attached	see attached	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Morrisville, PA					
Completed by Sonja Dimovska		Title Owner	Signature <i>S. Dimovska</i>			Date 7/17/2026			

RE: 200 US-1, NEWARK, NJ 07114 - Abandoned front offices

- Throughout – Pipe insulation – 3,000LF
- Throughout – Duct insulation – 3,800SF
- Throughout –Floor Tiles & Mastic – 28,000SF
- Throughout – Base layer plaster ceiling – 23,000SF
- Exterior – Parapit Wall Caulking – 800LF
- Exterior – Roofing– 21,000SF

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

RECEIVED OK# 1124

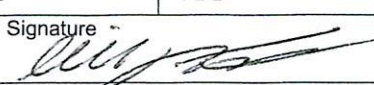
Date of Notification (1) 6/18/2026		Name of Building Owner/Operator (2) GCC Newark LLC		JUL 22 2026	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 3333 Michelseon Drive - Suite 1050 City, State, Zip Code Irvine, CA 92612 Name of Contact Dave Hoehmann Telephone Number 201-252-8600	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Commercial			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 200 US-1			Square Feet		
City (5) Newark, NJ 07114			# of Floors		
County (6) Essex			County Code (7) (STATE USE ONLY)		
Name of Monitoring Firm Hired by Building Owner (8)			Name of Abatement Contractor (9) NorthEast Management LLC		
Street Address			Street Address 41 Madison Avenue		
City, State, Zip Code			City, State, Zip Code Rochelle Park, NJ 07662		
Project Manager for Monitoring Firm			Telephone No. 201-577-1381		
Start Date (10) 6/29/26			Scheduled Completion Date (11) 8/1/2026		
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 NorthEast Management LLC		
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			Street Address 41 Madison Avenue City, State, Zip Code Rochelle Park, NJ 07662		
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)	
See attached		X		See attached	
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste	
City, State Elizabeth, NJ		Disposal Date		Name of Registered Landfill TRRF	
Completed by Sonja Dimovska		Title Owner		Signature S. Dimovska	
				Date 6/18/2026	

RE: 200 US-1, NEWARK, NJ 07114- Brew Tower 202 Section & Tank Area 204 Section

- **Throughout – Pipe Insulation – 12,190LF**
- **Throughout – Tar Coating/insulation – 47,400SF**
- **Throughout –Lab Hood/Top – 1,600SF**
- **Throughout –Floor Tiles & Mastic – 6,000SF**
- **Exterior – Roof Flashing – 800SF**

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

25 W Erie Ave
RECEIVED
L.E.M. Construction LLC
JUL 2 2007
Rutherford, NJ 07070
ASBESTOS CONTAINMENT & LICENSING

Date of Notification (1) 7/23/26		Name of Building Owner/Operator (2) Guru Home Developers LLC							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 11 Oak St City, State, Zip Code Avenel NJ 07001 Name of Contact _____ Telephone Number _____						
	FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) 11 Oak St		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 11 Oak St									
City (5) Avenel	Square Feet	# of Floors	Bldg. Age						
County (6) Essex County	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) vacant							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) LEM CONSTRUCTION LLC						
Street Address		Street Address 25 W ERIE AVE							
City, State, Zip Code		City, State, Zip Code RUTHERFORD NJ 07070							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 201-500-9896 License No. 02004						
Start Date (10) 8/4/26	Scheduled Completion Date (11) 8/6/26	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: _____		Street Address City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☐ Renovation ☐ ≥160 sf or ≥260 lf ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
SIDING				EXTERIOR SIDING AROUND	1200SF	X			
				AND GARAGE					
Name of Registered Waste Hauler TBD		NJDEP Waste Hauler ID No. TBD	Cubic Yards of Waste TBD	Name of Registered Landfill TBD					
City, State TBD		Disposal Date TBD		City, State TBD					
Completed by Michael Urbizagastegui		Title Owner	Signature 			Date 7/23/26			

27394

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

JUL 27 2026

Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) CLARK PUBLIC SCHOOL DISTRICT							
Agencies Notified	Type Notification	Street Address 365 WESTFIELD AVENUE							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code CLARK, NJ 07066							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) VALLEY ROAD ELEMENTARY SCHOOL		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 150 VALLEY RD		Square Feet	# of Floors						
City (5) CLARK		Bldg. Age							
County (6) UNION	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) TWO BROTHERS CONTRACTING, INC.						
Street Address		Street Address 11 VREELAND AVENUE							
City, State, Zip Code		City, State, Zip Code TOTOWA, NJ 07512							
Project Manager for Monitoring Firm		Telephone No. 973-956-8700	License No. 00494						
Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/21/2026							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>EXTERIOR WORK</u>		Name of OSHA Monitor SAME AS (9) ABOVE							
		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) 790 LF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
ROOF C ONLY		X		ALL FLASHING 1X1		X			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING, INC.		NJDEP Waste Hauler ID No. 18743	Cubic Yards of Waste 30 +/-	Name of Registered Landfill WASTE MANAGEMENT					
City, State TOTOWA, NJ 07512		Disposal Date		City, State MORRISVILLE, PA					
Completed by Alexandra Llaque		Title Project Coordinator		Signature <i>Alexandra Llaque</i>				Date 07/22/2026	

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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) CLARK PUBLIC SCHOOL DISTRICT		JUL 27 2026					
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		Street Address 365 WESTFIELD AVENUE City, State, Zip Code CLARK, NJ 07066 Name of Contact Telephone Number					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) ARTHUR L. JOHNSON HIGH SCHOOL				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 365 WESTFIELD AVE				Square Feet # of Floors Bldg. Age					
City (5) CLARK		County (6) UNION		County Code (7) (STATE USE ONLY) _____ Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.		Name of Abatement Contractor (9) TWO BROTHERS CONTRACTING, INC.					
Street Address		Street Address 11 VREELAND AVENUE		City, State, Zip Code TOTOWA, NJ 07512					
City, State, Zip Code		Telephone No. 973-956-8700		License No. 00494					
Project Manager for Monitoring Firm		Telephone No.		Name of OSHA Monitor SAME AS (9) ABOVE					
Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/21/2026		Street Address					
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>EXTERIOR WORK</u>				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
ROOF L 2 SECTION		X		ROOFING MATERIAL	4,822 SF	X			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING, INC.		NJDEP Waste Hauler ID No. 18743		Cubic Yards of Waste 30 +/-		Name of Registered Landfill WASTE MANAGEMENT			
City, State TOTOWA, NJ 07512		Disposal Date 08/21/2026		City, State MORRISVILLE, PA					
Completed by Alexandra Llaque		Title PROJECT COORDINATOR		Signature <i>Alexandra Llaque</i>		Date 07/22/2026			

21393

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

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JUL 27 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) CLARK PUBLIC SCHOOL DISTRICT	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 365 WESTFIELD AVENUE	
		City, State, Zip Code CLARK, NJ 07066	
		Name of Contact	Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) FRANK K. HEHNLY ELEMENTARY SCHOOL		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 590 RARITAN RD		Square Feet	# of Floors
City (5) CLARK		Bldg. Age	
County (6) UNION	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) TWO BROTHERS CONTRACTING, INC.
Street Address		Street Address 11 VREELAND AVENUE	
City, State, Zip Code		City, State, Zip Code TOTOWA, NJ 07512	
Project Manager for Monitoring Firm		Telephone No. 973-956-8700	License No. 00494
Start Date (10) 08/03/2026	Scheduled Completion Date (11) 08/21/2026	Name of OSHA Monitor SAME AS (9) ABOVE	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>EXTERIOR WORK</u>		Street Address	
		City, State, Zip Code	
Scope of Work (Check All That Apply)			
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
ROOF TOP F		X	ROOFING MATERIAL
ROOF TOP G (PARTIAL)		X	ROOFING MATERIAL
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING, INC.		NJDEP Waste Hauler ID No. 18743	Name of Registered Landfill WASTE MANAGEMENT
City, State TOTOWA, NJ 07512		Cubic Yards of Waste 30 +/-	Disposal Date
Completed by Alexandra Llaque		Title Project Coordinator	Signature <i>Alexandra Llaque</i>
			Date 07/22/2026

27397

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

RECEIVED

JUL 27 2026

Date of Notification (1) 07/22/2026		Name of Building Owner/Operator (2) Property People Group							
Agencies Notified	Type Notification	Street Address 400 Broadacres Drive Suite 180							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Bloomfield NJ 07003							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 65 Carteret Street		Square Feet	# of Floors						
City (5) Bloomfield		Bldg. Age							
County (6) Essex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) TWO BROTHERS CONTRACTING, INC.						
Street Address		Street Address 11 VREELAND AVENUE							
City, State, Zip Code		City, State, Zip Code TOTOWA, NJ 07512							
Project Manager for Monitoring Firm		Telephone No. 973-956-8700	License No. 00494						
Start Date (10) 08/01/2026	Scheduled Completion Date (11) 08/03/2026	Name of OSHA Monitor SAME AS (9) ABOVE							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ Renovation ☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 75LF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
BASEMENT		X		PIPE INSULATION		X			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING, INC.		NJDEP Waste Hauler ID No. 18743	Cubic Yards of Waste 1+/-	Name of Registered Landfill WASTE MANAGEMENT					
City, State TOTOWA, NJ 07512		Disposal Date 08/03/2026		City, State MORRISVILLE, PA					
Completed by ALEXANDRA LLAQUE		Title PROJECT COORDINATOR		Signature <i>Alexandra Llaque</i>		Date 07/22/2026			

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

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Date of Notification (1) 07 / 27 / 26		Name of Building Owner/Operator (2) Gateway Regional School District							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 775 Tanyard Road							
		City, State, Zip Code Woodbury Heights, NJ 08097							
		Name of Contact Tom O'Donnel	Telephone Number 856-848-8200 x 264						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Gateway Regional High 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 775 Tanyard Road									
City (5) Woodbury Heights		Square Feet 200000	# of Floors 2						
		Bldg. Age 75 +/-							
County (6) Gloucester	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) Horizon Environmental		ASCM No.	Name of Abatement Contractor (9) USA Environmental Management, Inc.						
Street Address PO Box 316		Street Address 8436 Enterprise Avenue							
City, State, Zip Code Thorofare, NJ 08086		City, State, Zip Code Philadelphia, PA 19153							
Project Manager for Monitoring Firm Steve Flanigan		Telephone No. 856-848-0800	License No. 1156						
Start Date (10) 08 / 06 / 26	Scheduled Completion Date (11) 08 / 06 / 26	Name of OSHA Monitor USA Environmental Management, 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: 7:00 AM-3:30 PM		Street Address 8436 Enterprise Avenue							
		City, State, Zip Code Philadelphia, PA 19153							
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
Hallway (near Room 111)	☐	☐	☒	Glue Dots	36 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler USA Environmental Management, Inc.		NJDEP Waste Hauler ID No. 32610	Cubic Yards of Waste 5 CY	Name of Registered Landfill Modern Landfill					
City, State Philadelphia, PA 19153		Disposal Date 7/05/2021		City, State York, PA					
Completed By (Print or Type) James Mscisz		Title Program Manager		Signature <i>For J. Mscisz</i>		Date 7-27-26			

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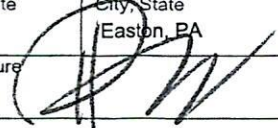
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

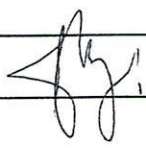
JUL 29 2026

Date of Notification (1) 7/23/26		Name of Building Owner/Operator (2) Bridgewater Raritan Regional School District							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 836 Newmans Lane City, State, Zip Code Bridgewater, NJ 08807 Name of Contact Kevin Lomski, BA Telephone Number 908-685-2777							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Hillside Intermediate School Phase 1		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 844 Brown Road		Square Feet n/a	# of Floors 2						
City (5) Bridgewater		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) Briggs Associates		ASCM No.	Name of Abatement Contractor (9) Panoramic Window & Door Systems, Inc.						
Street Address 3 Crosswicks Street		Street Address 712 Sergeantsville Rd							
City, State, Zip Code Bordentown, NJ 08505		City, State, Zip Code Stockton, NJ 08559							
Project Manager for Monitoring Firm Michael Hoodak		Telephone No. 609-298-5520	Telephone No. 732-926-0900						
License No. 01237									
Start Date (10) 8/03/26	Scheduled Completion Date (11) 9/25/26	Name of OSHA Monitor Panoramic Window & Door Systems, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement to 9/4 7-3pm ☒ Abatement Performed Outside of Normal Facility Hours to 9/25 3-11pm ☐ Other - Describe: _____		Street Address 712 Sergeantsville Rd							
		City, State, Zip Code Stockton, NJ 08559							
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
Windows			X	Remaining perimeter caulk from Phase 1	2038 LF	X			
Name of Registered Waste Hauler Panoramic Window & Door Systems, Inc.		NJDEP Waste Hauler ID No. 0036057	Cubic Yards of Waste TBD	Name of Registered Landfill Chrin Bros Sanitary Landfill					
City, State Stockton, NJ		Disposal Date TBD		City, State Easton, PA					
Completed by Paul Nagy		Title VP	Signature 			Date 7/23/26			

2370

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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) 7/24/2026		Name of Building Owner/Operator (2) JUL 29 2026							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 607 Hamilton Road							
		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 & Commercial buildings, homes, etc.)							
Street Address 607 Hamilton Road									
City (5) South Orange		Square Foot 2,000	# of Floors 2						
County (6) Essex		Bldg. Age 55+							
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) Unicorn Contracting Corp.						
Street Address		Street Address 14 Willow Street							
City, State, Zip Code		City, State, Zip Code Bloomfield, NJ 07003							
Project Manager for Monitoring Firm		Telephone No. 973-333-9176	License No. 01331						
Start Date (10) 7/27/2026		Scheduled Completion Date (11) 7/28/2026							
Name of OSHA Monitor Envirovision Consultants, Inc.									
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 8am-4:30pm		Street Address 20-21 Wagaraw Rd., Bldg. 35-E							
		City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <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) 20 LF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement boiler room		X		TSI		X			
Name of Registered Waste Hauler Unicorn Contracting Corp.		NJDEP Waste Hauler ID No. 0035844		Cubic Yards of Waste 1+	Name of Registered Landfill Fairless Hills Landfill				
City, State Bloomfield, New Jersey		Disposal Date TBD		City, State Morrisville, PA					
Completed by Blazhe Grozdanov		Title Project Manager		Signature 		Date 7/24/2026			

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

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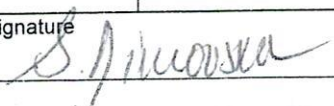
ck# 1130

Date of Notification (1) 7/24/2026		Name of Building Owner/Operator (2) Highground Industrial	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 12 Industrial Drive	
		City, State, Zip Code Florida, NY 10921	
		Name of Contact Nick Stagliano	Telephone Number 845-978-2222

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Summit Hospital		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 99 Beauvoir Avenue		Square Feet	# of Floors
City (5) Summit		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) NorthEast Management LLC
Street Address		Street Address 41 Madison Avenue	
City, State, Zip Code		City, State, Zip Code Rochelle Park, NJ 07662	
Project Manager for Monitoring Firm		Telephone No. 201-577-1381	License No. 02008
Start Date (10) 8/3/2026	Scheduled Completion Date (11) 8/17/2026	Name of OSHA Monitor NorthEast Management LLC	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 41 Madison Avenue	
		City, State, Zip Code Rochelle Park, NJ 076620	

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
Boiler House			X	Pipe Insulation	20LF	x			

Name of Registered Waste Hauler Century Waste	NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill
City, State Elizabeth, NJ		Disposal Date	City, State Morrisville, PA
Completed by Sonja Dimovska	Title Owner	Signature 	Date 7/24/2026

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Project #

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

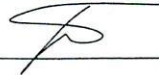
Check # 5965

JUL 30 2026

Date of Notification (1) 07/20/2026		Name of Building Owner/Operator (2) Moonachie BOE					
Agencies Notified ☐ EPA ☐ DEP ☐ DOL ☐ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation					
Street Address 70 W Park st		City, State, Zip Code Moonachie, NJ 07074					
Name of Contact Rezzuk Ayoglu		Telephone Number 201-488-6555					
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Robert L. Craig School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 20 W Park St		Square Feet					
City (5) Moonachie, NJ 07074		# of Floors					
County (6) Bergen County		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) Karl Environmental Group		ASCM No.					
Street Address 20 Luck Rd		Name of Abatement Contractor (9) Nick Restoration LLC					
City, State, Zip Code Mohnton, PA 19540		Street Address 72 Brookside Rd					
Project Manager for Monitoring Firm		City, State, Zip Code Randolph NJ 07869					
Telephone No. 800-527-5581		Telephone No. 973-933-2550					
License No. 01358							
Start Date (10) 07/22/2026		Scheduled Completion Date (11) 07/24/2026					
Name of OSHA Monitor Nick Restoration 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: 3:30 PM		Street Address 72 Brookside Rd					
		City, State, Zip Code Randolph NJ 07869					
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			
				Removal	Repair	Encapsulate	Enclosure
Room # 77	X	Wrap & cure	30 LF		X		
Room # 79	X	Wrap & cure	12 LF		X		
Room # 79	X	TSI- glove bag	3 LF	X			
Name of Registered Waste Hauler Nick Restoration LLC		NJDEP Waste Hauler ID No. 33782	Cubic Yards of Waste TBD	Name of Registered Landfill G.R.O.W.S			
City, State Randolph, NJ 07869		Disposal Date TBD	City, State Tullytown, PA				
Completed by Nikica Mrda		Title President	Signature <i>Nikica Mrda</i>		Date 07/20/2026		

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

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Date of Notification (1) 07/29/2026		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 765 Broad Street City, State, Zip Code Newark, NJ 07102 Name of Contact Benjamin Olagadeyo						
	Telephone Number 973-332-4012								
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) East Side High School		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 238 Van Buren St		Square Feet 50,000	# of Floors 2						
City (5) Newark		Bldg. Age 50+							
County (6) Essex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Educational							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc		ASCM No. 0003	Name of Abatement Contractor (9) Spes Contracting LLC						
Street Address 1253 North Church Street		Street Address 59 Beaverbrook Rd. Suite 302 E							
City, State, Zip Code Moorestown, New Jersey 08057		City, State, Zip Code Lincoln Park, NJ 07035							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 609-314-1683	License No. 01383						
Start Date (10) 08/07/2026	Scheduled Completion Date (11) 08/15/2026	Name of OSHA Monitor Spes Contracting LLC							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 59 Beaverbrook Rd. Suite 302 E							
		City, State, Zip Code Lincoln Park, NJ 07035							
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ 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
Suite101 and adjacent Hallway		X		Pipe Insulation	200 LF	X			
Name of Registered Waste Hauler Spes Contracting LLC		NJDEP Waste Hauler ID No. 0038075	Cubic Yards of Waste 10	Name of Registered Landfill Tri State Transfer & Associates					
City, State Lincoln Park, NJ 07035		Disposal Date TBD		City, State Bronx, NY					
Completed by Branislav Pavlov		Title President		Signature 			Date 07/29/2026		

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

RECEIVED

Date of Notification (1) 07/29/2026		Name of Building Owner/Operator (2) Newark Board of Education		JUL 31 2026					
Agencies Notified		Type Notification		Street Address					
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		765 Broad Street					
				City, State, Zip Code Newark, NJ 07102					
		Name of Contact Benjamin Olagadeyo		Telephone Number 973- 332-4012					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Weequahic High School				Type of Facility (4)					
Street Address 279 Chancellor Ave				☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Newark		Square Feet 50,000		# of Floors 2	Bldg. Age 50+				
County (6) Essex		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Educational					
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc		ASCM No. 0003		Name of Abatement Contractor (9) Spes Contracting LLC					
Street Address 1253 North Church Street		Street Address 59 Beaverbrook Rd. Suite 302 E							
City, State, Zip Code Moorestown, New Jersey 08057		City, State, Zip Code Lincoln Park, NJ 07035							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 609-314-1683		Telephone No. 973-807-6330	License No. 01383				
Start Date (10) 08/07/2026		Scheduled Completion Date (11) 08/15/2026		Name of OSHA Monitor Spes Contracting LLC					
Occupancy Status During Abatement (Check Only One)				Street Address 59 Beaverbrook Rd. Suite 302 E					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other – Describe: _____				City, State, Zip Code Lincoln Park, NJ 07035					
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ 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 Storage Room		X		Pipe Insulation	30 LF	X			
Name of Registered Waste Hauler Spes Contracting LLC		NJDEP Waste Hauler ID No. 0038075		Cubic Yards of Waste 10	Name of Registered Landfill Tri State Transfer & Associates				
City, State Lincoln Park, NJ 07035				Disposal Date TBD	City, State Bronx, NY				
Completed by Branislav Pavlov		Title President		Signature 		Date 07/29/2026			

11230

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

RECEIVED

Date of Notification (1) 07/29/2026		Name of Building Owner/Operator (2) AUG 3 2026							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 65 Crestwood Drive City, State, Zip Code Watchung, NJ 07069 Name of Contact Telephone Number						
			ASBESTOS CONTROL & LICENSING						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Marton Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 65 Crestwood Drive		Square Feet 2,981	# of Floors 1						
City (5) Watchung		Bldg. Age 67							
County (6) Somerset	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Eagle Industrial Hygiene Associates, Inc.		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 216 Cedar Avenue		Street Address 623 Cutler Avenue							
City, State, Zip Code Willow Grove, PA 19090		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Tim Harris		Telephone No. 215-672-6088	License No. 00842						
Start Date (10) 07/30/2026	Scheduled Completion Date (11) 08/03/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Floor Tile	586 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 4	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 08/03/2026		City, State Morgantown, PA					
Completed by Shannon Thomson		Title Operations Manager		Signature <i>Shannon Thomson</i>			Date 07/29/2026		

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

RECEIVED

AUG 3 2026

Date of Notification (1) 07/29/2026		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 ASBESTOS CONTROL & LICENSING City, State, Zip Code Newark, NJ 07108 Name of Contact Benjamin Olagadeyo Telephone Number 973-733-7220 x 8149						
	FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Wilson Avenue School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 19 Wilson Avenue		Square Feet 100,000	# of Floors 4						
City (5) Newark		Bldg. Age 100							
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) TTI Environmental, Inc.		ASCM No. _____	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 856-840-8800	Telephone No. 856-755-0099 License No. 00842						
Start Date (10) 07/31/2026	Scheduled Completion Date (11) 08/03/2026		Name of OSHA Monitor EMSL Analytical, Inc.						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Room 114		X		Pipe Insulation	4 LF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ		Disposal Date 08/03/2026		City, State Morgantown, PA					
Completed by Christina Fay		Title VP of Operations		Signature 			Date 07/29/2026		

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

RECEIVED

Date of Notification (1) 07/30/2026		Name of Building Owner/Operator (2) Newark Board of Education		AUG 3 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 190 Muhammad Ali Avenue City, State, Zip Code Newark, NJ 07108 Name of Contact Benjamin Olagadeyo Telephone Number 973-733-7220 x 8149					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) University High School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 55 Clinton Place				Square Feet 100,000					
City (5) Newark				# of Floors 4					
County (6) Essex				Bldg. Age 100					
County Code (7) (STATE USE ONLY) _____				Current Use (Prior if being demolished) School					
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc.			ASCM No. _____		Name of Abatement Contractor (9) Shade Environmental, LLC				
Street Address 1253 N. Church Street			Street Address 623 Cutler Avenue						
City, State, Zip Code Moorestown, NJ 08057			City, State, Zip Code Maple Shade, NJ 08052						
Project Manager for Monitoring Firm Jim Guilardi			Telephone No. 856-840-8800		License No. 00842				
Start Date (10) 08/04/2026		Scheduled Completion Date (11) 08/08/2026		Name of OSHA Monitor EMSL Analytical, Inc.					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077					
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Classroom 103 Side Storage Room		X		Mastic	64 SF	X			
Name of Registered Waste Hauler Freehold Cartage			NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill			
City, State Freehold, NJ			Disposal Date 08/08/2026		City, State Morgantown, PA				
Completed by Shannon Thomson			Title Operations Manager		Signature <i>Shannon Thomson</i>		Date 07/30/2026		

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

RECEIVED

Date of Notification (1) 07/29/2026		Name of Building Owner/Operator (2) Newark Board of Education		AUG 3 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 190 Muhammad Ali Avenue City, State, Zip Code Newark, NJ 07108 Name of Contact Benjamin Olagadeyo Telephone Number 973-733-7220 x 8149					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Hawthorne Avenue School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 428 Hawthorne Avenue				Square Feet 100,000 # of Floors 4 Bldg. Age 100					
City (5) Newark		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) TTI Environmental, Inc.		ASCM No. _____		Name of Abatement Contractor (9) Shade Environmental, LLC					
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 856-840-8800		Telephone No. 856-755-0099 License No. 00842					
Start Date (10) 08/08/2026		Scheduled Completion Date (11) 08/10/2026		Name of OSHA Monitor EMSL Analytical, Inc.					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077					
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) 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
Custodial Office		X		Pipe Insulation	8 LF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 1		Name of Registered Landfill Conestoga Landfill			
City, State Freehold, NJ		Disposal Date 08/10/2026		City, State Morgantown, PA					
Completed by Christina Fay		Title VP of Operations		Signature 		Date 07/29/2026			

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

RECEIVED

AUG 3 2026

Date of Notification (1) 07/29/2026		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						
			City, State, Zip Code Newark, NJ 07108						
		Name of Contact Benjamin Olagadeyo	Telephone Number 973-733-7220 x 8149						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Franklin Elementary School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 42 Park Avenue		Square Feet 100,000	# of Floors 4						
City (5) Newark		Bldg. Age 100							
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) TTI Environmental, Inc.		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 1253 N. Church Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 856-840-8800	License No. 00842						
Start Date (10) 08/05/2026	Scheduled Completion Date (11) 08/07/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North							
		City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Mechanical Room by Boiler Room		X		Pipe Insulation	8 LF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 1	Name of Registered Landfill Conestoga Landfill					
City, State Freehold, NJ			Disposal Date 08/07/2026	City, State Morgantown, PA					
Completed by Christina Fay		Title VP of Operations		Signature 			Date 07/29/2026		

11239

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

RECEIVED

Date of Notification (1) 07/30/2026		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		City, State, Zip Code Newark, NJ 07108							
Name of Contact Benjamin Olagadeyo		Telephone Number 973-733-7220 x 8149							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Lafayette Street School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 205 Lafayette Street		Square Feet 100,000							
City (5) Newark		# of Floors 4							
County (6) Essex		Bldg. Age 100							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc.		ASCN No. _____							
Street Address 1253 N. Church Street		Name of Abatement Contractor (9) Shade Environmental, LLC							
City, State, Zip Code Moorestown, NJ 08057		Street Address 623 Cutler Avenue							
Project Manager for Monitoring Firm Jim Guilardi		City, State, Zip Code Maple Shade, NJ 08052							
Telephone No. 856-840-8800		Telephone No. 856-755-0099							
Start Date (10) 08/14/2026		License No. 00842							
Scheduled Completion Date (11) 08/17/2026		Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North							
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 Cinnaminson, NJ 08077							
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
Cafeteria #2 Closet		X		Ceiling Plaster	6 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 1		Name of Registered Landfill Conestoga Landfill			
City, State Freehold, NJ		Disposal Date 08/17/2026		City, State Morgantown, PA					
Completed by Shannon Thomson		Title Operations Manager		Signature <i>Shannon Thomson</i>		Date 07/30/2026			

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

Date of Notification (1) 07/30/2026		Name of Building Owner/Operator (2) AUG 3 2026							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 102 Philadelphia Avenue City, State, Zip Code Cape May, NJ 08204 Name of Contact _____ Telephone Number _____						
	FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Street Address 102 Philadelphia Avenue City (5) Cape May County (6) Cape May		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.) Square Feet 4,200 # of Floors 3 Bldg. Age 70 County Code (7) (STATE USE ONLY) _____ Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv		ASCM No. _____	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address PO Box 341 City, State, Zip Code Chesterfield, NJ 08515		Street Address 623 Cutler Avenue City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Nora Pearse		Telephone No. 609-298-4070	Telephone No. 856-755-0099 License No. 00842						
Start Date (10) 08/19/2026	Scheduled Completion Date (11) 08/21/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ 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
2nd Floor Bathroom			X	Plaster	142 SF	X			
Name of Registered Waste Hauler Shade Environmental, LLC		NJDEP Waste Hauler ID No. 32426	Cubic Yards of Waste 1	Name of Registered Landfill Cape May County Landfill					
City, State Maple Shade, NJ			Disposal Date 08/21/2026	City, State Woodbine, NJ					
Completed by Shannon Thomson		Title Operations Manager	Signature <i>Shannon Thomson</i>			Date 07/30/2026			

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

RECEIVED

Date of Notification (1) 07/23/2026		Name of Building Owner/Operator (2) GRATER EGG HARBOR REG. BAUE 3 2026							
Agencies Notified	Type Notification	Street Address							
☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	1824 DR. DENNIS FOREMAN DR. City, State, Zip Code MAYS LANDING, NJ 08330 ASBESTOS CONTROL & LICENSING							
		Name of Contact KEITH NELSON	Telephone Number 609-625-1456						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) OALCREST HIGH SCHOOL		Type of Facility (4)							
Street Address 1824 DENNIS FOREMAN DRIVE		☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) MAYS LANDING	Square Feet	# of Floors	Bldg. Age						
County (6) ATLANTIC	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) EPIC ENVIRONMENTAL SERVICE	ASCM No.	Name of Abatement Contractor (9) VMC Company, Inc							
Street Address 80 FORK BEIDGE RD	Street Address 208 Piaget Ave								
City, State, Zip Code PITTSBURGH, NJ 08318	City, State, Zip Code Clifton, NJ 07011								
Project Manager for Monitoring Firm JAMES GREETS	Telephone No. 856-205-1077	Telephone No. 973-253-8828	License No. 00704						
Start Date (10) 07/27/2026	Scheduled Completion Date (11) 07/29/2026	Name of OSHA Monitor VMC Company, Inc.							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
MUSIC ROOM		X		VAT/MASTIC	1500sf	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill IESI Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Bethlehem, PA					
Completed by Voytek Roszkowski		Title President		Signature Voytek Roszkowski		Date 07/23/2026			

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

RECEIVED

Date of Notification (1) 07/29/2026		Name of Building Owner/Operator (2) GEORGIAN COLLEGE UNIVERSITY							
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation							
Street Address 900 LAKEWOOD AVE		City, State, Zip Code LAKEWOOD, NJ 08701							
Name of Contact CRAIG GORCZYKA		Telephone Number 973-560-1400							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) ST. JOSEPH DORM		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 900 LAKEWOOD AVE		Square Feet	# of Floors						
City (5) LAKEWOOD		Bldg. Age							
County (6) UNION	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) DORM							
Name of Monitoring Firm Hired by Building Owner (8) EWMA		ASCM No.	Name of Abatement Contractor (9) VMC Company, Inc						
Street Address 800 LANDEX PLAZA		Street Address 208 PIAGET AVE							
City, State, Zip Code PARSIPPANY, NJ 07054		City, State, Zip Code CLIFTON, NJ 07011							
Project Manager for Monitoring Firm CRAIG GORCZYKA		Telephone No. 973-560-1400	License No. 00704						
Start Date (10) 07/29/2026	Scheduled Completion Date (11) 07/31/2026	Name of OSHA Monitor VMC Company, 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		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
BATHROOMS 1ST FL		X		PIPEFITTING WRAP & COV.	5 LF	X			
BATHROOMS 2ND FL		X		" "	5 LF	X			
BATHROOMS 3RD FL		X		" "	6 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill IESI Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Bethlehem, PA					
Completed by Voytek Roszkowski		Title President	Signature <i>Voytek Roszkowski</i>	Date 07/29/2026					

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

Date of Notification (1) 7/28/26		Name of Building Owner/Operator (2) Landmark Excavation / Private Home		RECEIVED					
Agencies Notified		Type Notification		Street Address					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		7 6th Ave Seaside Park					
				City, State, Zip Code Seaside Park NJ 08752					
		Name of Contact Joycelynn Carr		Telephone Number 609-294-4900					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 7 6th Ave Seaside Park				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Seaside Park NJ 08752				Square Feet 1000+	# of Floors 2				
County (6) Ocean				County Code (7) (STATE USE ONLY)	Bldg. Age 50+				
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.		Name of Abatement Contractor (9) Pernaco Inc.					
Street Address		Street Address PO Box 329		City, State, Zip Code West Berlin NJ 08091					
City, State, Zip Code		Telephone No. 856-753-9800		License No. 00727					
Project Manager for Monitoring Firm		Telephone No.		Name of OSHA Monitor Same					
Start Date (10) 8/6/26		Scheduled Completion Date (11) 8/12/26		Occupancy Status During Abatement (Check Only One)					
				☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Siding			x	Exterior Siding	1200 SF	x			
Name of Registered Waste Hauler Pernaco Inc		NJDEP Waste Hauler ID No. 21787		Cubic Yards of Waste 3	Name of Registered Landfill Fairless Hills				
City, State Berlin NJ		Disposal Date 8/12/26		City, State Morrisville PA 19067					
Completed by Anthony T Perna		Title President		Signature 		Date 7/28/26			

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

PAGE#1

Check# 1330

Date of Notification (1) 07/30/2026		Name of Building Owner/Operator (2) Morris Companies, LLC							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation	350 Veterans Boulevard City, State, Zip Code Rutherford, NJ 07070							
		Name of Contact Dan Bayle	Telephone Number 973-219-5035						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Warehouse		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1291 Rahway Avenue		Square Feet	# of Floors						
City (5) Avenel, NJ 07001		Bldg. Age							
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) Gr Tech LLC						
Street Address		Street Address 576 Valley Road#283							
City, State, Zip Code		City, State, Zip Code Wayne, NJ 07470							
Project Manager for Monitoring Firm		Telephone No. 973-356-3511	License No. 01127						
Start Date (10) 07/24/2026	Scheduled Completion Date (11) 08/28/2026	Name of OSHA Monitor Envirovision Consultants, Inc							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 20-21 Wagaraw Road, Bldg.# 35 E City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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
1st floor-warehouse			x	Pipe insulation-wrap&cut	1,615 LF	x			
1st floor-warehouse			x	VAT -floor tiles-9x9 and Mastic	930 SF	x			
1st floor-warehouse			x	Vinyl sheet flooring and mastic	120 SF	x			
1st floor-warehouse-ceiling/wall meet			x	Transite panels	4,000 SF	x			
Name of Registered Waste Hauler Gr Tech LLC		NJDEP Waste Hauler ID No. 0033785	Cubic Yards of Waste TBD	Name of Registered Landfill T.R.R.F. Inc					
City, State Wayne, NJ 07470		Disposal Date TBD		City, State Tullytown, PA					
Completed by G.Ristanovic		Title Owner	Signature Gradimir Ristanovic			Date 07/30/2026			

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

PAGE#2

Check# 1330

Date of Notification (1) 07/30/2026		Name of Building Owner/Operator (2) Morris Companies, LLC							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☒ DEP ☒ DOL	☐ Initial ☒ Amended Amendment # 1	350 Veterans Boulevard							
☒ DOH ☐ DCA	☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Rutherford, NJ 07070							
		Name of Contact Dan Bayle	Telephone Number 973-219-5035						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Warehouse		Type of Facility (4)							
Street Address 1291 Rahway Avenue		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Avenel, NJ 07001		Square Feet	# of Floors						
County (6) Middlesex		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9)						
Street Address			Gr Tech LLC						
City, State, Zip Code			Street Address 576 Valley Road#283						
			City, State, Zip Code Wayne, NJ 07470						
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 973-356-3511						
			License No. 01127						
Start Date (10) 07/24/2026		Scheduled Completion Date (11) 08/28/2026	Name of OSHA Monitor Envirovision Consultants, Inc						
Occupancy Status During Abatement (Check Only One)		Street Address 20-21 Wagaraw Road, Bldg.# 35 E							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition	☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Warehouse-crawl space			x	Pipe insulation-wrap&cut	790 LF	x			
Warehouse-exterior			x	White transite panes	4,000 SF	x			
Warehouse-exterior			x	Siding caulking	50 SF	x			
Warehouse-roof			x	Base flashing	360 SF	x			
Name of Registered Waste Hauler Gr Tech LLC		NJDEP Waste Hauler ID No. 0033785	Cubic Yards of Waste TBD	Name of Registered Landfill T.R.R.F. Inc					
City, State Wayne, NJ 07470		Disposal Date TBD		City, State Tullytown, PA					
Completed by G.Ristanovic		Title Owner	Signature Gradimir Ristanovic			Date 07/30/2026			

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

RECEIVED

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

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

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

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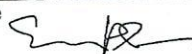
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Check# 1335

Date of Notification (1) 08/07/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	355 Stratton Ct. City, State, Zip Code Wyckoff, NJ 07481							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private house		Type of Facility (4)							
Street Address 355 Stratton Ct.		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Wyckoff, NJ 07481		Square Feet	# of Floors						
County (6) Bergen		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9)						
Street Address		Gr Tech LLC							
City, State, Zip Code		Street Address 576 Valley Road#283							
Project Manager for Monitoring Firm		Telephone No.	License No.						
		973-356-3511	01127						
Start Date (10) 08/08/2026	Scheduled Completion Date (11) 08/13/2026	Name of OSHA Monitor Envirovision Consultants, Inc							
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:		20-21 Wagaraw Road, Bldg.# 35 E							
		City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Kitchen floor			x	Linoleum	240 SF	x			
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill					
Gr Tech LLC		0033785	TBD	T.R.R.F. Inc					
City, State		Disposal Date		City, State					
Wayne, NJ 07470		TBD		Tullytown, PA					
Completed by		Title	Signature			Date			
G.Ristanovic		Owner	Gradimir Ristanovic			08/07/2026			

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

RECEIVED

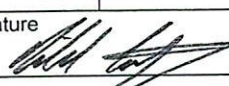
Date of Notification (1) 8 / 3 / 26		Name of Building Owner/Operator (2) West Central Jersey							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 9 Ilene Ct, Building 6, Unit 7							
		City, State, Zip Code Hillsborough, NJ 08844							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 667 Foothill Road		Square Feet 1500	# of Floors 1						
City (5) Bridgewater		Bldg. Age 68							
County (6) Somerset	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired by Building Owner (8) Indoor Air Services		ASCM No.	Name of Abatement Contractor (9) Brick Industries, Inc.						
Street Address 2015 Old York Road		Street Address PO Box 915							
City, State, Zip Code Burlington, NJ 08016		City, State, Zip Code Brick, NJ 08723							
Project Manager for Monitoring Firm Tom Worrell		Telephone No. 609-351-1362	Telephone No. 7328997499						
License No. 01196									
Start Date (10) 8 / 4 / 26	Scheduled Completion Date (11) 8 / 5 / 26	Name of OSHA Monitor Indoor Air Services							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 2015 Old York Road							
		City, State, Zip Code Burlington, NJ 08016							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement	☐	☐	☒	Floor tile	650SF	☒	☐	☐	☐
Basement	☐	☐	☒	Mastic	650SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste 5	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 8/6/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 				Date 8/3/26	

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

RECEIVED

Date of Notification (1) 8 / 4 / 26		Name of Building Owner/Operator (2) ASBESTOS CONTROL & LICENSING							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 313 Nottingham Dr City, State, Zip Code Brick, NJ 08724 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 313 Nottingham Dr		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
City (5) Brick	Square Feet 1200	# of Floors 1	Bldg. Age 72						
County (6) Ocean	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						
Start Date (10) 8 / 5 / 26		Scheduled Completion Date (11) 8 / 6 / 26	License No. 01196						
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 AZ Solution Consulting							
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) 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	☐	☐	☐	Floor tile	180SF	☒	☐	☐	☐
Basement	☐	☐	☐	Mastic	180SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
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 8/7/26	City, State Morrisville, PA						
Completed By (Print or Type) Eric Plackis		Title President	Signature 				Date 8/4/26		

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

Date of Notification (1) 8/4/26		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 149 Bellevue Ave. City, State, Zip Code Summit, Nj 07901 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 149 Bellevue Ave.			Square Feet 3000	# of Floors 2	Bldg. Age 60 +/-				
City (5) Summit		Current Use (Prior if being demolished) Residential Home							
County (6) Union		County Code (7) (STATE USE ONLY) _____							
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. _____		Telephone No. 201-600-3184	License No. 01305				
Start Date (10) 8/5/26		Scheduled Completion Date (11) 8/7/26		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) 680 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				Disposal Date TBD	City, State Easton, PA				
Completed by Richard Cristofol		Title		Signature 			Date 8/4/26		

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

4376269

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Date of Notification (1) 7/29/2026		Name of Building Owner/Operator (2) State of New Jersey - Department of Transportation							
Agencies Notified	Type Notification	Street Address 1035 Parkway Avenue							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Ewing, New Jersey 08618							
		Name of Contact Sheryl Quatermas	Telephone Number 609-963-2175						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Greenwood Lake Airport - Main Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 126 Airport Road		Square Feet	# of Floors						
City (5) West Milford		Bldg. Age							
County (6) Passaic County	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Airport							
Name of Monitoring Firm Hired by Building Owner (8) USA Environmental Management, Inc.		ASCM No. 112	Name of Abatement Contractor (9) Active Environmental Technologies, Inc.						
Street Address 344 West State Street		Street Address 203 Pine Street							
City, State, Zip Code Trenton, New Jersey 08618		City, State, Zip Code Mount Holly, New Jersey 08060							
Project Manager for Monitoring Firm William Weisgarber, Jr.		Telephone No. 609-656-8101	Telephone No. 609-702-1500						
License No. 01299									
Start Date (10) 8/10/2026	Scheduled Completion Date (11) 8/14/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: Main facility operational - abatement locations isolated		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 (Duct Paper) ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure (Flooring)							
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
2nd Floor Restaurant Storage		X		Resilient Sheet Flooring	645 SF	X			
Aircraft-Rear of Fuselage		X		Duct Paper Insulation	3 SF	X			
Aircraft-Air Handling Room	X			Duct Paper Insulation	15 SF	X			
Name of Registered Waste Hauler R&B Debris, LLC		NJDEP Waste Hauler ID No. 29439	Cubic Yards of Waste 30	Name of Registered Landfill Waste Management/Fairless					
City, State Hainesport, New Jersey		Disposal Date 8/14/2026		City, State Morrisville, Pennsylvania					
Completed by Anthony Salange		Title Operations Manager		Signature <i>Anthony Salange</i>		Date 7/29/2026			

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

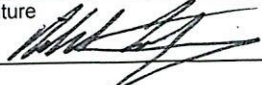
Date of Notification (1) 8/03/2026		Name of Building Owner/Operator Private Building	
Agencies Notified ☒ EPA ☐ DCA ☒ DOL ☐ DEP ☒ DOH		Notification Type ☐ Initial Notification ☐ Amended #1 ☒ Emergency notification (including justification) ☐ Cancelled	
Street Address 57 N Day Street		City, State, Zip Code Orange NJ 07050	
Name of Contact Denis O'Connor		Telephone Number 732-558-7517	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Private Building		Type of Facility (4) ☒ School (K-12) Subchapter 8 ☐ Subchapter 8 (other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 57 N Day Street		Sq. Feet: 2323 # of Floors: 2 Bldg. Age: 1864	
City (5) Orange NJ 07050	County (6) Essex	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner IAQ Guru Inc		ASCM No.	
Street Address 49 Frances Street		Name of Contractor (9) BL Contracting Inc.	
Totowa NJ 07512		Street Address 5 Marguerite Lane	
Project Manager for Monitoring Firm Mark Jovic		City, State, Zip Code Towaco NJ 07082	
973-659-0392		Telephone Number 973-901-0153	
Scheduled Start Date (10) 08/06/2026		License Number 01265	
Scheduled Completion Date (11) 8/16/2026		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 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)
Second Floor	☒	Asbestos Floor Tile	450 SF
Name of Reg. Waste Hauler BL Contracting Inc	NJDEP Waste Hauler ID # 0036784	Cubic Yards of Waste 6	Name of Registered Landfill T.R.R.F
Disposal Date 08/20/2026		City, State Tully town, PA	
Completed by (Print or Type) Nedo Vasilic	Title Project Manager	Signature Nedo Vasilic	Date 08/03/2026

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

Date of Notification (1) 8 / 6 / 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 # 2 ☐ 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	# of Floors						
City (5) Cranford		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		ASCM No.	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) 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: 7AM-330PM / PM - AM *Bristol will be on site 8/12/26-8/14/26		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
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 8/16/26			

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

RECEIVED

Date of Notification (1) 8/5/26		Name of Building Owner/Operator (2) Crestron		AUG 10 2026	
Agencies Notified		Type Notification		Street Address 15 Volvo Dr.	
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		City, State, Zip Code Rockleigh, NJ 07647	
		Name of Contact Eric Baylor		Telephone Number 910-368-6454	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Commercial Building			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 15 Volvo Dr.			Square Feet 85,000		# of Floors 1
City (5) Rockleigh			Bldg. Age 60 +/-		
County (6) Bergen		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Commercial Building	
Name of Monitoring Firm Hired by Building Owner (8) 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. _____		Telephone No. 201-600-3184	
				License No. 01305	
Start Date (10) 8/7/26		Scheduled Completion Date (11) 8/12/26		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) 1,293 SF
	Yes	No	N/A		
Hallway		X		VAT	
Name of Registered Waste Hauler All Stages Abatement		NJDEP Waste Hauler ID No. 0036592		Cubic Yards of Waste 10 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 8/5/26

7092



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

RECEIVED

Date of Notification (1) 7-28-26		Name of Building Owner/Operator (2)					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 320 39th					
		City, State, Zip Code Burlington NJ 08703					
		Name of Facility Burlington					
Name of Facility Where Abatement is Taking Place (3) Resident		Type of Facility (4) ☐ School (K-12) ☐ Subchapter S (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 320 39th Street		Square Feet 900	# of Floors 2 Bldg. Age 70				
City (5) Burlington		Current Use (Prior if being demolished) Residential					
County (6) Atlantic		County Code (7) (STATE USE ONLY)					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) Air-Jet Abatement Corporation LLC				
Street Address		Street Address 1212 Burlington Ave					
City, State, Zip Code		City, State, Zip Code Atlantic NJ 08705					
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 609-346-5916				
Start Date (10) 8-10-26		Scheduled Completion Date (11) 8-20-26	License No. 01070				
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor Self					
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>Demolition</u>		Street Address					
Scope of Work (Check All That Apply)		City, State, Zip Code					
☐ 25 sf or 25 lf ☒ ≥160 sf or 250 lf		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Frangible Procedure					
Location of Asbestos-Containing Material (ACM) in Facility (12)	Is Location Normally Used Solely by Maintenance/Construction Staff? (13)	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	Encapsulation	Enclosure
Outside	Yes	ACM siding	1500 SF				
Name of Registered Waste Hauler Cari Man		NJDEP Waste Permit No.	Name of Registered Landfill H.C. U.A.				
City Egg Harbor Township		Cubic Yards of Waste 130	City, State Atlantic Co. NJ				
Signed by Egg Harbor		Signature [Signature]	Date 7-29-26				

* Do not use this form for asbestos license exempted activities

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

Date of Notification (1) 08/03/2026		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 43 Jay Dr City, State, Zip Code Paramus, NJ Name of Contact Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 43 Jay Dr		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 43 Jay Dr		Square Feet 1,554	# of Floors 1						
City (5) Paramus		Bldg. Age 1955							
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residential Property							
Name of Monitoring Firm Hired by Building Owner (8) Efex Environmental Inc		ASCM No. 114208	Name of Abatement Contractor (9) General Contracting Group LLC						
Street Address 955 Evergreen Avenue		Street Address 105 Pleasant Ave. suite E							
City, State, Zip Code Bronx, NY 104		City, State, Zip Code Upper Saddle River, NJ 07458							
Project Manager for Monitoring Firm Ehis Igbinsosa		Telephone No. (646) 350-9079	License No. 02086						
Start Date (10) 8/13/2026	Scheduled Completion Date (11) 8/14/2026	Name of OSHA Monitor General Contracting Group LLC							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 105 Pleasant Ave. suite E City, State, Zip Code Upper Saddle River, NJ 07458							
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		Black floor mastic - 2% chrysotile	132 SF	X			
Basement 1 - Laundry & Bathroom		X		9" x 9" Brown floor tile - 12% chrysotile	253 SF	X			
Basement 2				9" x 9" Light blue floor tile	553 SF	X			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Grand Central					
City, State 623 Dowd Ave Elizabeth, NJ		Disposal Date		City, State Pen Argyl, PA					
Completed by Seamus Schofield		Title President		Signature <i>Seamus Schofield</i>			Date 8/3/2026		

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

Print Form

Check # 12004

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Date of Notification (1) AUGUST 3, 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 348 HURFFVILLE GRENLOCH ROAD		City, State, Zip Code SEWELL, NJ 08080							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) SINGLE FAMILY DWELLING		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 301 TRAVISTOCK BLVD.		Square Feet	# of Floors 2						
City (5) HADDENFIELD, NJ 08033		Bldg. Age 65+-							
County (6) CAMDEN	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) EPC TECHNOLOGIES, INC		ASCM No. N/A	Name of Abatement Contractor (9) EPC TECHNOLOGIES, INC						
Street Address P.O. BOX 337		Street Address P.O. BOX 337							
City, State, Zip Code NEW EGYPT, NJ 08876		City, State, Zip Code NEW EGYPT, NJ 08876							
Project Manager for Monitoring Firm STEVE SCHENKER		Telephone No. 609-744-6384	Telephone No. 609 744-65384						
Start Date (10) AUGUST 13, 2026		Scheduled Completion Date (11) AUGUST 17, 2026	License No. 00394						
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 EPC TECHNOLOGIES, INC							
		Street Address P.O. BOX 337							
		City, State, Zip Code NEW EGYPT, NJ 08533							
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		XXX		9X9 FLOOR TILES	600 SF	XXX			
KITCHEN	XXX			FLOOR SHEETING	150 SF	XXX			
DETACHED GARAGE				FLOOR SHEETING	150 SF	XXX			
Name of Registered Waste Hauler EPC TECHNOLOGIES, INC		NJDEP Waste Hauler ID No. 17000		Cubic Yards of Waste 3	Name of Registered Landfill FAIRLESS LANDFILL				
City, State NEW EGYPT, NJ 08533				Disposal Date AUG 11, 2026	City, State MORRISVILLE, PA				
Completed by STEVE SCHENKER		Title PRESIDENT		Signature <i>Steve Schenker</i>		Date AUGUST 3, 2026			

PAID

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

CK#12149

Date of Notification (1) 7/31/2026		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 227 N. Nevada Ave.		City, State, Zip Code Atlantic City, NJ 08401							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Vacant Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 227 N. Nevada Avenue		Square Feet 1144	# of Floors 2						
City (5) Atlantic City		Bldg. Age 100+							
County (6) Atlantic	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Unoccupied							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) American Demolition Corp.						
Street Address		Street Address 2 English Lane							
City, State, Zip Code		City, State, Zip Code Egg Harbor Twp., NJ 08234							
Project Manager for Monitoring Firm		Telephone No. 609-926-7373	License No. 02056						
Start Date (10) 7/15/2026	Scheduled Completion Date (11) 8/14/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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			X	Grey Exterior CMU coating	510 sf	X			
Name of Registered Waste Hauler American Demolition Corp		NJDEP Waste Hauler ID No. 16473	Cubic Yards of Waste	Name of Registered Landfill ACUA					
City, State Egg Harbor Twp., NJ			Disposal Date TBD	City, State Pleasantville					
Completed by Jannie Truehart		Title Project Manager		Signature <i>Jannie Truehart</i>		7/31/2026			

1334

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

Check# 1334

Date of Notification (1) 08/03/2026		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 123 Green Avenue City, State, Zip Code Madison, NJ 07940 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private house		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 123 Green Avenue		Square Feet	# of Floors						
City (5) Madison, NJ 07940		Bldg. Age							
County (6) Morris	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) Gr Tech LLC						
Street Address		Street Address 576 Valley Road#283							
City, State, Zip Code		City, State, Zip Code Wayne, NJ 07470							
Project Manager for Monitoring Firm		Telephone No. 973-356-3511	License No. 01127						
Start Date (10) 08/13/2026	Scheduled Completion Date (11) 08/14/2026	Name of OSHA Monitor Envirovision Consultants, Inc							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 20-21 Wagaraw Road, Bldg.# 35 E							
		City, State, Zip Code Fair Lawn, NJ 07410							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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
Garage			x	Duct insulation	120 SF	x			
Name of Registered Waste Hauler Gr Tech LLC		NJDEP Waste Hauler ID No. 0033785		Cubic Yards of Waste TBD	Name of Registered Landfill T.R.R.F. Inc				
City, State Wayne, NJ 07470		Disposal Date TBD		City, State Tullytown, PA					
Completed by G.Ristanovic		Title Owner		Signature Gradimir Ristanovic		Date 08/03/2026			

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

B & G Project # 2026-120

Check #

13819

Date of Notification (1) August 4, 2026		Name of Building Owner/Operator (2) Woodbridge Township School District	
Agencies Notified	Type Notification	Street Address 421 School Street	
☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Woodbridge, NJ 07095	
		Name of Contact Charles Impaglia	Telephone Number 732-602-8536

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AUG - 6 2026
ASBESTOS CONTROL & LICENSING

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Colonia Middle School NON 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 100 Delaware Avenue		Square Feet 50,000+	# of Floors 3
City (5) Colonia, NJ		Bldg. Age 50+	
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Middle School (NON SUB 8)	
Name of Monitoring Firm Hired by Building Owner (8) T&M Associates		ASCM No.	Name of Abatement Contractor (9) B & G Restoration, Inc.
Street Address 11 Tindall Road		Street Address 1234 Route 23	
City, State, Zip Code Middletown, NJ 07748		City, State, Zip Code Butler, NJ 07405	
Project Manager for Monitoring Firm Kevin Burns		Telephone No. 908-347-4396	Telephone No. 973-696-6869
License No. 00378		Name of OSHA Monitor B & G Restoration, Inc.	
Start Date (10) 08/10/2026	Scheduled Completion Date (11) 08/18/2026		
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours Other - Describe: 7:00 am - 3:30 pm occupied		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	
		☐ Building Demolition with asbestos in-place ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Rooms 303, 305, 306, 312 ***		X		VAT & mastic	3,920 SF ***	X			

Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 40	Name of Registered Landfill Grand Central Landfill	
City, State Butler, NJ		Disposal Date 08/10/26-08/18/26		City, State Pen Argyl, PA	
Completed by Gordana Luna	Title Secretary / Treasurer	Signature <i>Gordana Luna</i>		Date 08/04/2026	

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

Date of Notification (1) July 31, 2026		Name of Building Owner/Operator (2) Our Lady of Sorrows - St. Anthony							
Agencies Notified	Type Notification	Street Address 3816 E. State Street							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Hamilton, NJ 08619							
		Name of Contact Mike Jakobowski	Telephone Number 609-607-1400						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Our Lady of Sorrow (former convent)		Type of Facility (4)							
Street Address 3800 E. State Street		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Hamilton		Square Feet 9,000	# of Floors 3						
County (6) Mercer		County Code (7) (STATE USE ONLY)	Bldg. Age 60+						
Name of Monitoring Firm Hired by Building Owner (8) Environmental Technicians		ASCM No.	Name of Abatement Contractor (9) ecoservices, LLC						
Street Address 441 East High Street, #25		Street Address 303 B National Road							
City, State, Zip Code Philadelphia, PA 19144		City, State, Zip Code Exton, PA 19341							
Project Manager for Monitoring Firm Norman Harrison		Telephone No. 215-200-9400	Telephone No. 484-872-8884						
Start Date (10) 9/21/26		Scheduled Completion Date (11) 11/6/26	License No. 01161						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor EMSL							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other -- Describe: _____		Street Address 200 Route 1 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) 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	X			Boiler Breeching	240 SF	X			
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No.	Cubic Yards of Waste 100	Name of Registered Landfill Fairless Landfill					
City, State Trenton, NJ		Disposal Date TBD		City, State Morrisville, PA					
Completed by Jack Bally		Title Sr. Project Manager		Signature <i>Jack Bally</i>			Date 7/31/26		

13815

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

B & G Project # 2026-93B

Check # 13815

Date of Notification (1) 07/31/2026		Name of Building Owner/Operator (2) Freehold Township School District		RECEIVED					
Agencies Notified		Type Notification		Street Address					
☐ EPA ☒ DEP ☐ DOL ☒ DOH ☐ DCA		☐ Initial ☒ Amended Amendment # RESUME ☐ Emergency (including justification) ☐ Cancellation		384 West Main Street City, State, Zip Code Freehold, NJ 07728					
		Name of Contact Robert DeVita, Business Administrator		Telephone Number 732-462-8400 x 8809					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) C Richard Applegate Elementary School - NON-Sub 8				Type of Facility (4)					
Street Address 47 Jeanne Brennan Drive				☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Freehold, NJ 07728				Square Feet 50,000+	# of Floors 3				
County (6) Monmouth				Bldg. Age 100+					
		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) educational - NON-Sub 8					
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No. 3		Name of Abatement Contractor (9) B & G Restoration, Inc.					
Street Address 1253 North Church Street		Street Address 1234 Route 23							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Butler, NJ 07405							
Project Manager for Monitoring Firm Brian Clark		Telephone No. 856-840-8800		Telephone No. 973-696-6869	License No. 00378				
Start Date (10) 08/04/2026 **** Resume ****		Scheduled Completion Date (11) 08/15/2026 *****		Name of OSHA Monitor B & G Restoration, Inc.					
Occupancy Status During Abatement (Check Only One)				Street Address 1234 Route 23					
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: <u>occupied</u>				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		☐ wrap & cut procedure ☐ 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 entrance above class doors			X	transite panels	21 panels	X			
exterior Main entrance			X	soffit transite facia	120 LF				
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563		Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Landfill				
City, State Butler, NJ		Disposal Date 08/04/26 - 08/10/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature <i>Gordana Luna</i>			Date 07/31/2026		

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

RECEIVED

Date of Notification (1) 07/30/2026		Name of Building Owner/Operator (2) Temple Sharey Tefilo-Israel							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 432 Scotland Road		City, State, Zip Code South Orange, NJ 07079							
Name of Contact Beth Blackman		Telephone Number 201-669-2908							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Commercial		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 432 Scotland Road		Square Feet	# of Floors						
City (5) South Orange, 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) A. Seine Lighthouse Solutions		ASCM No.	Name of Abatement Contractor (9) All Pro Management, LLC						
Street Address PO Box 354		Street Address 27 Outwater Lane							
City, State, Zip Code South Orange, NJ 07079		City, State, Zip Code Garfield, NJ 07026							
Project Manager for Monitoring Firm Sarah Calandra		Telephone No. 201-394-2666	Telephone No. 973-928-4888						
License No. 1188		Name of OSHA Monitor A. Seine Lighthouse Solutions							
Start Date (10) 08/08/2026	Scheduled Completion Date (11) 08/31/2026	Street Address PO Box 354							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code South Orange, NJ 07079							
Scope of Work (Check All That Apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 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			X	VAT/Mastic	3,200 SF	X			
Name of Registered Waste Hauler Century Waste LLC		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ		Disposal Date		City, State Morrisville, PA					
Completed by Jacqueline Anello		Title Office Administrator		Signature <i>Jacqueline Anello</i>				Date 07/30/2026	

10365

check # 10365

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 31, 2026		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 CAMDEN CAMPUS		Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS	
City (5) CAMDEN		City, State, Zip Code PISCATAWAY, NJ 08854	
County (6) CAMDEN		Name of Contact MICHAEL F. SMITH, ENV. HEALTH & SAFETY	
County Code (7) (State Use Only)		Telephone Number 848-445-2550	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) ARMITAGE HALL, BLDG# 7036		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: N/A # of Floors: 4 Bldg. Age: 60+ years	
Street Address 3 TERRI LANE		Current Use (prior if being demolished): ACADEMIC	
City, State, Zip Code BURLINGTON, NJ 08016		Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.	
Project Manager for Monitoring Firm JOHN LUTZ		Street Address 511 MAIN STREET	
Telephone Number 609-386-8800		City, State, Zip Code BUTLER, NJ 07405	
Scheduled Start Date (10) 08/14/2026		Telephone Number 973-492-0477	
Scheduled Completion Date (11) 08/17/2026		License Number 00840	
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: 4PM - 5AM (24 HRS. & WEEKENDS AS NEEDED)		Name of OSHA Monitor ENVIROVISION, INC.	
Scope of Work (Check all that apply) ☐ ≥ 3 sf or >3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition		Street Address 20-21 WARGARAW ROAD, BLDG# 35E	
Location of Asbestos-Containing Material (ACM) in Facility (13) Room B035		City, State, Zip Code FAIRLAWN, NJ 07410	
Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA ☒ YES		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) VAT	
Amount (Specify SF or LF) 255 SF		Abatement Type Remove Repair Encap Enclose ☒ Remove	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Waste Hauler ID # See Below	
Cubic Yards of Waste: 10 CY		Name of Registered Landfill Fairless Landfill / Grand Central Landfill	
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJDEP # 12561 Hauler #2) Century Waste Services LLC, Elizabeth, NJ 07201 NJ DEP # NJ-860		Disposal Date 08/17/2026	
City, State FL - 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700 GCL- 1963 Pen Argyl Rd. Pan Argyl, Pa 18072		Signature <i>Raymond C. Pedalino</i>	
Completed by (Print or Type) RAYMOND C. PEDALINO		Date July 31, 2026	
Title SENIOR PROJECT MANAGER			

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

13804

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

B & G Project # 2026-93A

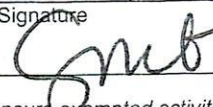
Check #

JUL 29 2026

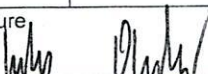
Date of Notification (1) 07/16/2026		Name of Building Owner/Operator (2) Freehold Township School District							
Agencies Notified	Type Notification	Street Address 384 West Main Street							
☒ EPA ☒ DEP ☒ DOL	☐ Initial ☒ Amended Amendment #4	City, State, Zip Code Freehold, NJ 07728							
☒ DOH ☐ DCA	☐ Emergency (including justification) ☐ Cancellation	Name of Contact Robert DeVita, Business Administrator	Telephone Number 732-462-8400 x 8809						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Marshall W Errickson Elementary School - 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 271 Elton-Adelphia Road		Square Feet 50,000+	# of Floors 3						
City (5) Freehold, NJ 07728		Bldg. Age 100+							
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) educational - Sub 8							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No. 3	Name of Abatement Contractor (9) B & G Restoration, Inc.						
Street Address 1253 North Church Street		Street Address 1234 Route 23							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Butler, NJ 07405							
Project Manager for Monitoring Firm Brian Clark		Telephone No. 856-840-8800	License No. 00378						
Start Date (10) July 1, 2026	Scheduled Completion Date (11) 08/31/2026	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: <u>un-occupied</u>		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		☐ wrap & cut procedure ☒ 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
throughout the building			X	ceiling tiles	36,275 SF ***	X			
exterior entrance above class doors			X	transite panels	21 panels	X			
exterior Main entrance			X	soffit transite facia	120 LF	X			
Art Room Closet ***			X	VAT & mastic	170 SF ***	X			
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 450 cy	Name of Registered Landfill Grand Central Landfill					
City, State Butler, NJ		Disposal Date 07/01/2026 - 08/31/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature Gordana Luna			Date 07/27/2026		

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

RECEIVED

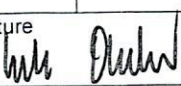
Date of Notification (1) 7 / 29 / 26		Name of Building Owner/Operator (2) Transcontinental Gas Pipe Line Job # 2607-6597 Check # AUG - 3 2026							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 5 ☐ Emergency (including justification) ☐ Cancellation	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 Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Gas Pipe Line							
County (6) GLE									
Name of Monitoring Firm Hired by Building Owner (8) NA		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 / 20 / 26	Scheduled Completion Date (11) 7 / 31 / 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 ☐ ≥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) 12 LF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Dig #3480	☐	☐	☒	Coal Tar Wrap- 12" Line		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
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 7/31/26		City, State Morrisville, PA 19067					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 				Date 7-29-26	

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

Date of Notification (1) 07 / 28 / 26		Name of Building Owner/Operator (2) Cherry Hill Public Schools							
Agencies Notified ☒ EPA ☒ DOLWDD ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation		Street Address 45 Ranoldo Terrace						
			City, State, Zip Code Cherry Hill, NJ 08002						
			Name of Contact Steve Nicolella						
		Telephone Number 856-616-0275							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Carusi Middle School		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 315 Roosevelt Drive									
City (5) Cherry Hill	Square Feet 129,522	# of Floors 1	Bldg. Age 54						
County (6) Camden	County Code (7)(STATE USE ONLY)		Current Use (Prior if being demolished) Middle School						
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc		ASCM No. 00003	Name of Abatement Contractor (9) East Coast Haz Mat Removal, Inc.						
Street Address 1253 North Church Street		Street Address 494 East 41st Street							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Paterson, NJ 07504							
Project Manager for Monitoring Firm Tim Popp	Telephone No. 856-840-8800	Telephone No. 973-345-0022	License No. 02117						
Start Date (10) 06 / 26 / 25	Scheduled Completion Date (11) 08 / 29 / 25		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-3:30PM/ PM-____AM		Street Address							
		City, State, Zip Code							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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
D & Partial C Wing	☐	☒	☐	Transite Panels (Door Frame)	315 SF (12)	☒	☐	☐	☐
D & Partial C Wing	☐	☒	☐	Chalkboards/Tackboards	28 Each	☒	☐	☐	☐
D & Partial C Wing	☐	☒	☐	Interior Picture Windows Glazing	400LF/12 Each	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC.		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 380	Name of Registered Landfill Waste Mgmt. - Fairless Hills					
City, State Elizabeth, NJ 07201		Disposal Date 08-25-2026		City, State Morrisville, PA					
Completed By (Print or Type) Leslie Olszewski		Title Project Manager		Signature 			Date 07-28-2026		

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

Ch. # 1102
RECEIVED

Date of Notification (1) 07 / 28 / 26		Name of Building Owner/Operator (2) Cherry Hill Public Schools							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 45 Ranoldo Terrace							
		City, State, Zip Code Cherry Hill, NJ 08002							
		Name of Contact Steve Nicoletta	Telephone Number 856-616-0275						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Carusi Middle School		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 315 Roosevelt Drive									
City (5) Cherry Hill	Square Feet 129,522	# of Floors 1	Bldg. Age 54						
County (6) Camden	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Middle School							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental, Inc	ASCM No. 00003	Name of Abatement Contractor (9) East Coast Haz Mat Removal, Inc.							
Street Address 1253 North Church Street		Street Address 494 East 41st Street							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Paterson, NJ 07504							
Project Manager for Monitoring Firm Tim Popp	Telephone No. 856-840-8800	Telephone No. 973-345-0022	License No. 02117						
Start Date (10) 06 / 23 / 26	Scheduled Completion Date (11) 08 / 25 / 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-3:30PM/ PM-____AM		Street Address							
		City, State, Zip Code							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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
D & Partial C Wing	☐	☒	☐	Entire Ceiling System/Plaster/Glue	17,108 SF	☒	☐	☐	☐
D & Partial C Wing	☐	☒	☐	Pipe Ins./Fittings/above Ceiling	350 LF	☒	☐	☐	☐
D & Partial C Wing	☐	☒	☐	Floor Tiles/Mastic	9,241	☒	☐	☐	☐
D & Partial C Wing	☐	☒	☐	Stucco Ceiling-Entire Ceiling Syst.	3,883	☒	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC.		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 380	Name of Registered Landfill Waste Mgmt. - Fairless Hills					
City, State Elizabeth, NJ 07201		Disposal Date 08-25-2026		City, State Morrisville, PA					
Completed By (Print or Type) Leslie Olszewski		Title Project Manager		Signature 			Date 07-28-2026		

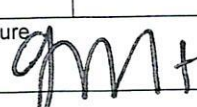
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:13)

RECEIVED
4372243
JUL 29 2026

Date of Notification (1) 7 / 24 / 26		Name of Building Owner/Operator (2) Transcontinental Gas Pipe Line Job # 2607-6597 Check #							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment #3 ☐ 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							
City (5) Swedesboro		# of Floors							
County (6) GLE		Bldg. Age							
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		ASCM No.							
Street Address		Name of Abatement Contractor (9) AbateTech, Inc.							
City, State, Zip Code		Street Address 30 Maple Ave. PO Box 25							
Project Manager for Monitoring Firm		City, State, Zip Code Lumberton, NJ 08048							
Telephone No.		Telephone No. 609-265-2107							
Start Date (10) 7 / 20 / 26		License No. 00529							
Scheduled Completion Date (11) 7 / 28 / 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 ☐ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior 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 7/28/26		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 / 27 / 26		Name of Building Owner/Operator (2) Transcontinental Gas Pipe Line		Job # 2607-6607 Check # 18092	
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ 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 #1690				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)	
Street Address 835 New York Avenue				Square Feet	
City (5) Trenton				# of Floors	
County (6) Mercer				Bldg. Age	
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		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.		License No.	
		609-265-2107		00529	
Start Date (10) 8 / 5 / 26		Scheduled Completion Date (11) 8 / 7 / 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 ☐ ≥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) 10 LF
	Yes	No	N/A		
Exterior Dig #1690	☐	☐	☒	Coal Tar Wrap- 6" Line	10 LF
	☐	☐	☐		
	☐	☐	☐		
	☐	☐	☐		
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750		Cubic Yards of Waste 12	
City, State Lumberton, NJ		Disposal Date 8/7/26		Name of Registered Landfill Fairless Landfill	
City, State Morrisville, PA 19067					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 	
				Date 7-27-26	



PAID

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

RECEIVED

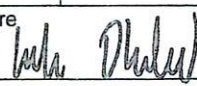
Check # 13811

B & G Project # 2026-120

Date of Notification (1) July 30, 2026		Name of Building Owner/Operator (2) Woodbridge Township School District		AUG - 4 2026	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 421 School Street City, State, Zip Code Woodbridge, NJ 07095 Name of Contact Charles Impaglia Telephone Number 732-602-8536	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Colonia Middle School NON 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 100 Delaware Avenue			Square Feet 50,000+		
City (5) Colonia, NJ			# of Floors 3		Bldg. Age 50+
County (6) Middlesex			County Code (7) (STATE USE ONLY; _____)		Current Use (Prior if being demolished) Middle School (NON SUB 8)
Name of Monitoring Firm Hired by Building Owner (8) T&M Associates			ASCM No.		Name of Abatement Contractor (9) B & G Restoration, Inc.
Street Address 11 Tindall Road			Street Address 1234 Route 23		
City, State, Zip Code Middletown, NJ 07748			City, State, Zip Code Butler, NJ 07405		
Project Manager for Monitoring Firm Kevin Burns			Telephone No. 908-347-4396		Telephone No. 973-696-6869
Start Date (10) 08/10/2026			Scheduled Completion Date (11) 08/14/2026		License No. 00378
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7:00 am - 3:30 pm occupied			Name of OSHA Monitor B & G Restoration, Inc.		
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf			Street Address 1234 Route 23		
☒ Renovation ☐ Demolition			City, State, Zip Code Butler, NJ 07405		
☐ Building Demolition with asbestos in-place ☐ 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)	
Rooms 303, 305, 306		X		VAT & mastic	
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563		Cubic Yards of Waste 30	
City, State Butler, NJ		Disposal Date 08/10/26-08/15/26		Name of Registered Landfill Grand Central Landfill	
City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature Gordana Luna	
				Date 07/30/2026	

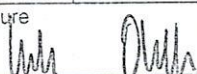
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

#1105
RECEIVED

Date of Notification (1) <u>07</u> / <u>29</u> / <u>26</u>		Name of Building Owner/Operator (2) County of Essex, Office of Purchasing Department AUG - 3 2026							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address Hall of Records, Room 335						
			City, State, Zip Code Newark, NJ 07102						
			Name of Contact Sanjeev Varghese, County Engineer		Telephone Number 973-621-5100				
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Essex County Transportation Election Storage Facility				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 39 Commerce Court				Square Feet 16500					
City (5) Verona				# of Floors 1	Bldg. Age 50+				
County (6) Essex		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Pre-Demolition (Storage Facility)					
Name of Monitoring Firm Hired by Building Owner (8) IRIS Environmental Laboratories		ASCM No.		Name of Abatement Contractor (9) East Coast Haz Mat Removal, Inc.					
Street Address 2333 Route 22 West		Street Address 494 East 41st Street		City, State, Zip Code Paterson, NJ 07504					
City, State, Zip Code Union, NJ 07083		Telephone No. 800-908-6679		Telephone No. 973-345-0022	License No. 02117				
Project Manager for Monitoring Firm Rick Eustaquio		Telephone No. 800-908-6679		License No. 02117					
Start Date (10) <u>08</u> / <u>17</u> / <u>26</u>		Scheduled Completion Date (11) <u>09</u> / <u>14</u> / <u>26</u>		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: <u>7AM-3:30PM</u> / <u> </u> PM - <u> </u> AM				Street Address City, State, Zip Code					
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1 st Fl - Rm 6,7,9,10,11,12 & 13	☐	☐	☒	VAT/mastic	1,310	☒	☐	☐	☐
1 st Fl - Bathroom & Boiler Rm 16	☐	☐	☒	Pipe/Joints	8LF/114 each	☒	☐	☐	☐
Exterior-Windows (4'x3.5') - 17	☐	☐	☒	Caulking/Putties	255 LF	☒	☐	☐	☐
Exterior-Shed-Roof	☐	☐	☒	Roofing/Flashing	600SF/100 SF	☒	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC.		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 30	Name of Registered Landfill Waste Mgmt. - Fairless Hills				
City, State Elizabeth, NJ 07201		Disposal Date 09-14-2026		City, State Morrisville, PA					
Completed By (Print or Type) Leslie Olszewski		Title Project Manager		Signature 		Date 07-29-26			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:26 and 5:16)

ch # 1099

Date of Notification (1) 07 / 22 / 26		Name of Building Owner/Operator (2) Hillsdale Public Schools		RECEIVED JUL 30 2026					
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 32 Ruckman Road City, State, Zip Code Hillsdale, NJ 07642 Name of Contact Rep. Kevin Burns					
				Telephone Number 732-676-4000					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) George G. White Middle School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 120 Magnolia Avenue				Square Feet 61500					
City (5) Hillsdale				# of Floors 3					
County (6) Bergen				Bldg. Age 54					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Middle School							
Name of Monitoring Firm Hired by Building Owner (8) T & M Associates		ASCM No.		Name of Abatement Contractor (9) East Coast Haz Mat Removal, Inc.					
Street Address 40 Monmouth Park Hwy, Suite 2		Street Address 494 East 41st Street							
City, State, Zip Code West Long Branch, NJ 07764		City, State, Zip Code Paterson, NJ 07504							
Project Manager for Monitoring Firm Kevin Burns		Telephone No. 732-676-4000		License No. 02117					
Start Date (10) 08 / 06 / 26		Scheduled Completion Date (11) 08 / 22 / 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: 7AM-3:30PM / ____PM-____AM				Street Address City, State, Zip Code					
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) 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 - Outside Windows	☐	☒	☐	Windows spandrel transite panels	140 SF	☒	☐	☐	☐
Second Floor - Outside Windows	☐	☒	☐	Windows spandrel transite panels	140 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC.		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 15		Name of Registered Landfill Waste Mgmt. - Fairless Hills			
City, State Elizabeth, NJ 07201				Disposal Date 08-25-2026		City, State Morrisville, PA			
Completed By (Print or Type) Leslie Olszewski		Title Project Manager		Signature 		Date 07-22-26			

6/16

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

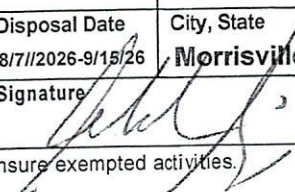
RECEIVED

Date of Notification (1) 7/28/26		Name of Building Owner/Operator (2) Bergenfield Board of Education		JUL 31 2026	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 225 West Clinton Ave City, State, Zip Code Bergenfield, NJ 07621 Name of Contact Joann K Telephone Number 201-385-8801	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Bergenfield Lincoln School			Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 115 Highview Ave			Square Feet		
City (5) Bergenfield			# of Floors		
County (6) Bergen			Bldg. Age		
County Code (7) (STATE USE ONLY) _____			Current Use (Prior if being demolished)		
Name of Monitoring Firm Hired by Building Owner (8) Westchester Environmental		ASCM No. 00127		Name of Abatement Contractor (9) Academy Construction Inc	
Street Address 1248 Wrights Lane		Street Address 7 East Garden Place		City, State, Zip Code Pompton Plains, NJ 07444	
City, State, Zip Code Westchester, PA 19380		Telephone No. 610-431-7545		Telephone No. 973 832 4244	
Project Manager for Monitoring Firm Phillip Conteh		License No. 01379		Name of OSHA Monitor Same as above	
Start Date (10) 8/10/26		Scheduled Completion Date (11) 8/30/26		Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____	
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)	
Room 309		x		Wood Floor / Mastic Tar	
Name of Registered Waste Hauler Academy Construction Inc		NJDEP Waste Hauler ID No. 0034422		Cubic Yards of Waste 25 cu yd	
City, State Pompton Plains, NJ		Disposal Date TBD		Name of Registered Landfill Fairless Landfill	
Completed by John Geleski		Title Supervisor		Signature 	
				Date 7/28/26	

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

Check No. 2210

RECEIVED

Date of Notification (1) July 28, 2026		Name of Building Owner/Operator (2) PA of NY & NJ					
Agency Notified ☒ EPA ☒ DEP Notified by DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 241 Erie Street					
		City, State, Zip Code Jersey City, NJ 07302					
		Name of Contact Tom Taylor	Telephone Number 609-744-3471				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) PANYNJ Holland Tunnel Admin Building - Service Garage #2 Boiler Room		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 124 13th Street		Square Feet 17,000	# of Floors 2				
City (5) Jersey City, 07310		Bldg. Age 80+					
County (6) Hudson	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Administration					
Name of Monitoring Firm Hired by Building Owner (8) PANYNJ	ASCM No. N/A	Name of Abatement Contractor (9) B&N&K Restoration Co., Inc.					
Street Address 241 Erie Street		Street Address 223 Randolph Avenue					
City, State, Zip Code Jersey City, 07310		City, State, Zip Code Clifton, NJ 07011					
Project Manager for Monitoring Firm Tom Taylor	Telephone No. 609-744-3471	Telephone No. 973-478-4681	License No. 00120				
Start Date (10) August 07, 2026	Scheduled Completion Date (11) September 15, 2026	Name of OSHA Monitor The Saban Engineering Group, Inc.					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: unoccupied space		Street Address 201 Stuyvesant Avenue					
		City, State, Zip Code Lyndhurst, NJ 07071-1704					
Scope of Work (Check all that apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Boiler Room	☒	pipe insulation	75 LF	☒			
Name of Registered Waste Hauler Cardella Trucking		NJDEP Waste Hauler ID No. 378756	Cubic Yards of Waste 4	Name of Registered Landfill Fairless Landfill			
City, State North Bergen		Disposal Date 8/7/2026-9/15/26		City, State Morrisville, PA			
Completed by Aleksandar Kuridza	Title Project Manager	Signature 		Date 7/28/2026			

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

Check # 4688

Date of Notification (1) 7 / 28 / 26		Name of Building Owner/Operator (2) Verizon Communications	
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	
Street Address 15 East Montgomery Street		City, State, Zip Code Pittsburgh, PA 15212	
Name of Contact Brian Kingsbury (Owners Rep)		Telephone Number 201-388-0620	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Verizon Manahawkin Central Office		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)	
Street Address 32 Stafford Avenue		Square Feet # of Floors Bldg. Age	
City (5) Manahawkin		3 +75	
County (6) Ocean		County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Verizon	
Name of Monitoring Firm Hired by Building Owner (8) USA Environmental		ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC	
Street Address 344 West State Street		Street Address 1123 BEAVER STREET	
City, State, Zip Code Trenton, NJ 08618		City, State, Zip Code BRISTOL, PA 19007	
Project Manager for Monitoring Firm Matt Chapuis		Telephone No. 609.656.8101	
Start Date (10) 8 / 7 / 26		Scheduled Completion Date (11) 8 / 12 / 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 5 PM - 1 AM		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC	
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-Exempt and Non-Friable Procedure		Street Address 1123 BEAVER STREET	
City, State, Zip Code BRISTOL, PA 19007			
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)	
Frame Area		60 SF	
Co-Location Area		5 SF	
Switch Area		2 SF	
Throughout 1 st Floor Misc. Location		10 SF	
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No.	
City, State Freehold NJ		Cubic Yards of Waste Disposal Date TBD	
Name of Registered Landfill Conestoga Landfill		City, State Morgantown, PA	
Completed By (Print or Type) Dillan DeCaro		Signature Dillan DeCaro / KB	
Title Estimator		Date 7/28/26	

13380

D&S Proj. #: 26-115



State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

AUG - 3 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 10/17/12/17/12/16/		Name of Building Owner/Operator (2) Sally Becker	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment #: _____ ☐ Emergency (including justification) ☐ Cancellation	
Street Address 30 Industrial Ave		City, State, Zip Code Mahwah, NJ 07430	
Name of Contact Sally Becker		Telephone Number 201-519-6053	

FACILITY INFORMATION

Name of facility where abatement is taking place (3) Warehouse			Type of Facility (4) ☐ School (K - 12) ☐ Subchapter 8 (Other than K-12) ☒ Other (Private/Commercial Bldgs./Homes, etc.)		
Street Address 30 Industrial Ave			Square Feet 20,000 SF		
City (5) Mahwah, NJ 07430			# of Floors 01		
County (6) Bergen			Bldg. Age 60		
County Code (7) (State use only)			Current Use (Prior if being demolished) Residential		

Name of Monitoring Firm Hired by Bldg. Owner (8) N/A		ASCM No.		Name of Abatement Contractor (9) D&S Restoration, Inc.	
Street Address				Street Address 20 California Ave	
City, State, Zip Code				City, State, Zip Code Paterson, NJ 07503	
Project Manager for Monitoring Firm		Phone Number		Telephone Number 973-345-8020	
Start Date (10) 08/05/2026		Sched. Completion Date (11) 08/10/2026		License Number 01169	
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: Normal Hours				Name of OSHA Monitor D&S Restoration, Inc.	
				Street Address 20 California Ave	
				City, State, Zip Code Paterson, NJ 07503	

Scope of Work (check all that apply) ☐ >3 sf or >3 lf ☒ ≥160 sf or ≥260 lf				☒ Renovation ☐ Demolition				☐ Full Containment w/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)	Amount (Specify SF or LF)	R e m o v e	R e p a i r	E n c a p	E n c l
	Yes	No	N/A						
Ground Floor		☒		Pipe Insulation	122 LF	☒	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐

Registered Waste Hauler D&S Restoration, Inc.		NJDEP Hauler ID# 13506		Cubic Yards of Waste 1 CYD.		Name of Registered Landfill TULLYTOWN, RESOURCE RECOVERY	
City, State Paterson, NJ 07503		Disposal Date TBD		City, State TULLYTOWN, PA			
Completed by (Print or Type) BOGDAN JOLDZIC		Title PRESIDENT		Signature <i>Bogdan Joldzic</i>		Date 07/27/2026	

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

Date of Notification (1) 07/30/2026		Name of Building Owner/Operator (2) Borough of Fairview							
Agencies Notified		Type Notification		Street Address 723 Fairview Ave					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA		☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		City, State, Zip Code Fairview, NJ 07022					
				Name of Contact Berge V. Tombalakian					
				Telephone Number 201-943-0857					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Fairview Health Department Building				Type of Facility (4)					
Street Address 53 Grant St				☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Fairview, NJ 07022				Square Feet 3,000	# of Floors 02				
				Bldg. Age 70					
County (6) Bergen		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Offices (Vacant)					
Name of Monitoring Firm Hired by Building Owner (8) McCabe Environmental, LLC		ASCM No. 117		Name of Abatement Contractor (9) D&S Restoration, Inc.					
Street Address 464 Valley Brook Ave		Street Address 20 California Ave							
City, State, Zip Code Lyndhurst, NJ 07071		City, State, Zip Code Paterson, NJ 07503							
Project Manager for Monitoring Firm Jared Panecki		Telephone No. 800-423-0766		Telephone No. 973-345-8020	License No. 01169				
Start Date (10) 08/17/2026		Scheduled Completion Date (11) 08/25/2026		Name of OSHA Monitor D&S Restoration, Inc					
Occupancy Status During Abatement (Check Only One)				Street Address 20 California Ave					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: <u>Normal Hours</u>				City, State, Zip Code Paterson, NJ 07503					
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/Mastic	2,200 SF	X			
Name of Registered Waste Hauler D&S Restoration, Inc.		NJDEP Waste Hauler ID No. 13506		Cubic Yards of Waste 20 YDS	Name of Registered Landfill Tullytown Resource Recovery				
City, State Paterson, NJ 07503				Disposal Date TBD	City, State Tullytown, PA				
Completed by Bogdan Joldzic		Title President		Signature <i>Bogdan Joldzic</i>		Date 07/30/2026			

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

RECEIVED
HMD 25-228

Date of Notification (1) 7/30/2026		Name of Building Owner/Operator (2) GEM Property Mgmt, Inc. CK#4974							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 12 Furler St. Po Box 145							
		City, State, Zip Code Totowa, NJ 07512							
		Name of Contact Shelly Evans	Telephone Number 973-785-0441						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Gothic Towers		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 50 Henwood Ave.		Square Feet 10,000	# of Floors 9						
City (5) Jersey City		Bldg. Age 95							
County (6) Hudson	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Condo							
Name of Monitoring Firm Hired by Building Owner (8) Whitestone Associates, Inc.		ASCM No. _____	Name of Abatement Contractor (9) Hazmat Diagnostic, LLC						
Street Address 30 Independence Blvd. Suite 250		Street Address 16 Glenwild Ave							
City, State, Zip Code Warren, NJ 07059		City, State, Zip Code Bloomingdale, NJ 07403							
Project Manager for Monitoring Firm Jeremy M. Hassett		Telephone No. 267-496-7955	License No. 01181						
Start Date (10) 8-14-2026	Scheduled Completion Date (11) 8-16-2026	Name of OSHA Monitor Hazmat Diagnostic, 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: Fri: 7:00am-3:30pm, Saturday 7:00 am-3:30 pm		Street Address 16 Glenwild Ave							
		City, State, Zip Code Bloomingdale, NJ 07403							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Wrap n Cut ☐ 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
Boiler Room			X	Boiler Gasket	3 Sf	X			
Boiler Room			X	Mechanical Pipe Gaskets	9 Sf	X			
Name of Registered Waste Hauler Hazmat Diagnostic, LLC		NJDEP Waste Hauler ID No. 0035440	Cubic Yards of Waste TBD	Name of Registered Landfill Minerva Landfill					
City, State Bloomingdale, NJ			Disposal Date TBD	City, State Waynesburg, OH					
Completed by Deni Naumovski		Title President	Signature <i>Deni Naumovski</i>			Date 7/30/2026			

13812

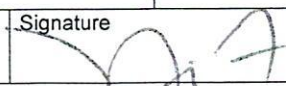
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

B & G Project # 2026-121

Check # 13812

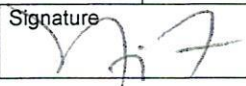
Date of Notification (1) July 30, 2026		Name of Building Owner/Operator (2) Woodbridge Township School District		AUG - 4 2026	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 421 School Street City, State, Zip Code Woodbridge, NJ 07095 Name of Contact Charles Impaglia	
				Telephone Number 732-602-8536	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Kennedy Park Elementary School				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 150 Goodrich Street				Square Feet 50,000+	
City (5) Iselin, NJ 08830				# of Floors 3	
				Bldg. Age 50+	
County (6) Middlesex		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Elementary School (NON SUB 8)	
Name of Monitoring Firm Hired by Building Owner (8) T&M Associates		ASCM No. _____		Name of Abatement Contractor (9) B & G Restoration, Inc.	
Street Address 11 Tindall Road				Street Address 1234 Route 23	
City, State, Zip Code Middletown, NJ 07748				City, State, Zip Code Butler, NJ 07405	
Project Manager for Monitoring Firm Kevin Burns		Telephone No. 908-347-4396		Telephone No. 973-696-6869	
				License No. 00378	
Start Date (10) 08/10/2026		Scheduled Completion Date (11) 08/14/2026		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: <u>7:00 am - 3:30 pm occupied</u>				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		☐ Building Demolition with asbestos in-place ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	
		Yes	No		
Room 16			X		VAT & mastic
					980 SF
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563		Cubic Yards of Waste 10	
City, State Butler, NJ				Name of Registered Landfill Grand Central Landfill	
				Disposal Date 08/10/26-08/15/26	
				City, State Pen Argyl, PA	
Completed by Gordana Luna		Title Secretary / Treasurer		Signature <i>Gordana Luna</i>	
				Date 07/30/2026	

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

Date of Notification (1) 07 / 27 / 26		Name of Building Owner/Operator (2) New Horizon Properties							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 79 Route 520, Suite 200							
		City, State, Zip Code Englishtown, NJ 07726							
		Name of Contact Jeff Mendelson	Telephone Number 732-617-6593						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 494 Middle Road		Square Feet 1260	# of Floors 1						
City (5) Holmdel		Bldg. Age 70							
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Building							
Name of Monitoring Firm Hired by Building Owner (8)		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. 732-349-9932	License No. 00624						
Start Date (10) 08 / 06 / 26	Scheduled Completion Date (11) 08 / 10 / 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) <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	☐	☒	☐	asbestos roof flashing	150 lf	☒	☐	☐	☐
exterior	☐	☒	☐	asbestos caulk on windows	30 lf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
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 08/10/26	City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/27/26		

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

RECEIVED

Date of Notification (1) 07 / 27 / 26		Name of Building Owner/Operator (2) New Horizon Properties							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 79 Route 520, Suite 200							
		City, State, Zip Code Englishtown, NJ 07726							
		Name of Contact Jeff Mendelson	Telephone Number 732-617-6593						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Building		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 979 Amboy Avenue									
City (5) Edison	Square Feet 3500	# of Floors 1	Bldg. Age 70						
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Building							
Name of Monitoring Firm Hired by Building Owner (8)		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. 732-349-9932	License No. 00624						
Start Date (10) 08 / 06 / 26	Scheduled Completion Date (11) 08 / 10 / 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) 3250 sf	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior	☐	☒	☐	asbestos roof		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 5	Name of Registered Landfill Fairless Landfill					
City, State Toms River, New Jersey		Disposal Date 08/10/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/27/26		

Check # 3832



PAID
nt to N.J.A.C.

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~~ASBESTOS CONTROL & LICENSING~~

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

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

Check # 3831
RECEIVED

GAC Project # 060-26

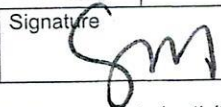
Date of Notification (1) July 31, 2026			Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ		
Agencies Notified ☐ EPA ☐ DCA ☒ DOL ☒ DEP- No Longer REQUIRED ☒ DOH		Notification Type ☒ Initial Notification ☐ Amended Notification # ☐ Emergency (including justification) ☐ Cancelled		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 848-445-2550	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) SCHOOL OF DENTAL MEDICINE, BLDG# 7253			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address RBHS NEWARK CAMPUS			Sq. Feet: N/A # of Floors: 3 Bldg. Age: 60+ years		
City (5) NEWARK	County (6) ESSEX	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) 08/14/2026		Scheduled Completion Date (11) 08/17/26		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 FRI- 5AM MON (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) B837 MER	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA ☒ YES	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) TSI	Amount (Specify SF or LF) <9LF	Abatement Type Remove Repair Encap Enclose ☒ Remove	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 5 CY	Name of Registered Landfill Fairless Landfill / Grand Central Landfill	
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJDEP # 12561 Hauler #2) Century Waste Services LLC, Elizabeth, NJ 07201 NJ DEP # NJ-860			Disposal Date 08/17/2026	City, State FL - 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700 GCL- 1963 Pen Argyl Rd. Pan Argyl, Pa 18072	
Completed by (Print or Type) RAYMOND C. PEDALINO		Title SENIOR PROJECT MANAGER	Signature <i>Raymond C. Pedalino</i>		Date July 31, 2026

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

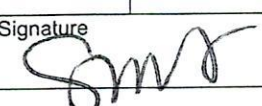
18093

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

RECEIVED

Date of Notification (1) <u>7</u> / <u>28</u> / <u>26</u>		Name of Building Owner/Operator (2) NJ DPMC / Job #2601-6534 Check #18093							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # <u>4</u> ☐ Emergency (including justification) ☐ Cancellation		Street Address PO Box 0034 City, State, Zip Code Trenton, NJ 08625						
			Name of Contact Business Admin						
			Telephone Number 609-292-9292						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Richard J Hughes Justice 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 25 Market Street				Square Feet # of Floors Bldg. Age					
City (5) Trenton, NJ 08611									
County (6) Mercer		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8) USA Environmental		ASCM No.		Name of Abatement Contractor (9) AbateTech, Inc.					
Street Address 344 West State Street		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Trenton, NJ 08618		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm William Weisgarber		Telephone No. 609-656-8101		Telephone No. 609-265-2107					
				License No. 00529					
Start Date (10) <u>7</u> / <u>29</u> / <u>26</u>		Scheduled Completion Date (11) <u>8</u> / <u>7</u> / <u>26</u>		Name of OSHA Monitor IATL					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM				Street Address 9000 Commerce Parkway Suite B City, State, Zip Code Mount Laurel, NJ 08054					
Scope of Work (Check all that apply)									
☐ >3 sf or >3 lf ☒ >160 sf or >260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior, Lower-Level Cooling Tower	☐	☐	☒	Grey Sealant/Caulk	600 LF	☒	☐	☐	☐
Exterior, Lower-Level Cooling Tower	☐	☐	☒	Black Caulk	600 LF	☒	☐	☐	☐
Penthouse	☐	☐	☒	Tan Caulk	60 LF	☒	☐	☐	☐
Throughout	☐	☐	☒	Gaskets assoc. with valves/flanges	200 units	☒	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750		Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill				
City, State Lumberton, NJ				Disposal Date 8/7/26	City, State Tullytown, PA				
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 			Date 7-28-26		

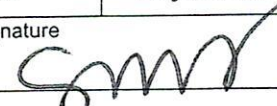
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 7 / 31 / 26		Name of Building Owner/Operator (2) Ewing Township BOE / Job #2607-6600 Check #18094							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 2099 Pennington Rd.							
		City, State, Zip Code Ewing, NJ 08618							
		Name of Contact Vincent Ferrara	Telephone Number 609-538-9800						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Fisher 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 1325 Lower Ferry Road									
City (5) Ewing	Square Feet	# of Floors	Bldg. Age						
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, Inc.		ASCM No. 00030	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address 120 North Warren Street		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Trenton, NJ 08608		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Rollie Jones		Telephone No. 609-392-4200	Telephone No. 609-265-2107						
		License No. 00529							
Start Date (10) 8 / 10 / 26	Scheduled Completion Date (11) 8 / 11 / 26		Name of OSHA Monitor IATL						
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM		Street Address 9000 Commerce Parkway Suite B							
		City, State, Zip Code Mount Laurel, NJ 08054							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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	☐	☐	☒	Pipe Insulation (wrap & repair)	100 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 8/11/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coordinator		Signature 				Date 7-31-26	

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

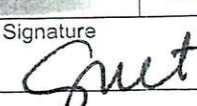
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AUG - 3 2020

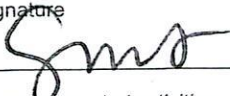
Date of Notification (1) 7 / 31 / 26		Name of Building Owner/Operator (2) NJ DOT / Job #2402-6221 Check #18095							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address PO Box 600							
		City, State, Zip Code Trenton, NJ 08625							
		Name of Contact Saffiyah Cunningham	Telephone Number 732-947-6039						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) NJ DOT Lafayette Maintenance Yard		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 38 Route 94		Square Feet	# of Floors						
City (5) Lafayette		Bldg. Age							
County (6) Sussex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Maintenance Yard							
Name of Monitoring Firm Hired by Building Owner (8) USA Environmental		ASCM No.	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address 344 West State Street		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Trenton, NJ 08618		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm William Weisgarber		Telephone No. 609-656-8101	License No. 00529						
Start Date (10) 8 / 10 / 26	Scheduled Completion Date (11) 8 / 14 / 26	Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM		Street Address 9000 Commerce Parkway Suite B							
		City, State, Zip Code Mount Laurel, NJ 08054							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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	☒	☐	☐	Gasket/Rope@Boiler Exhaust Flange	4 LF	☒	☐	☐	☐
Boiler Room	☒	☐	☐	Gasket/Rope@Boiler Rib Seams	20 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 30	Name of Registered Landfill Fairless Landfill					
City, State Lumberton, NJ		Disposal Date 8/14/26		City, State Tullytown, PA					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 			Date 7-31-26		

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

RECEIVED

Date of Notification (1) 7 / 29 / 26		Name of Building Owner/Operator (2) Jersey City Public Schools Job #2601-6527 Check # AUG - 2 2026							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 3 ☐ Emergency (including justification) ☐ Cancellation	Street Address 346 Claremont Avenue							
		City, State, Zip Code Jersey City, NJ 07305							
		Name of Contact Business Administration	Telephone Number 201-915-6000						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) James J Ferris High 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 35 Colgate Street		Square Feet							
City (5) Jersey City		# of Floors							
County (6) Hudson		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection		ASCM No.							
Name of Abatement Contractor (9) AbateTech, Inc.		Street Address 30 Maple Ave. PO Box 25							
Street Address 120 North Warren St.		City, State, Zip Code Lumberton, NJ 08048							
City, State, Zip Code Trenton, NJ 08608		Telephone No. 609-265-2107							
Project Manager for Monitoring Firm Jordan Reed		License No. 00529							
Telephone No. 609-392-4200		Name of OSHA Monitor IATL							
Start Date (10) 7 / 1 / 26		Scheduled Completion Date (11) 8 / 14 / 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 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
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 8/14/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.		Signature 			Date 7-29-26		

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

Date of Notification (1) 7 / 31 / 26		Name of Building Owner/Operator (2) Jersey City Public Schools Job #2603-6550 Check #17931							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 2 ☐ Emergency (including justification) ☐ Cancellation	Street Address 346 Claremont Avenue							
		City, State, Zip Code Jersey City, NJ 07305							
		Name of Contact Business Administration	Telephone Number 201-915-6000						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Dickinson 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 2 Palisade Avenue		Square Feet	# of Floors						
City (5) Jersey City		Bldg. Age							
County (6) Hudson	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection		ASCM No.	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. 609-392-4200	License No. 00529						
Start Date (10) 5 / 18 / 26	Scheduled Completion Date (11) 8 / 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: 5PM-11AM		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
Main Storage Room	☐	☒	☐	Duct Vibration Cloth	8 SF	☒	☐	☐	☐
Room #237	☐	☒	☐	Floor tile & Mastic	30 LF	☒	☐	☐	☐
Throughout	☐	☒	☐	Floor tile & Mastic	420 SF	☒	☐	☐	☐
Throughout	☐	☒	☐	O&M Hole Drilling/Spot Removal	22 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 8/31/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.		Signature 			Date 7-31-26		

13821



PAID
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 9:60 and 12:120)

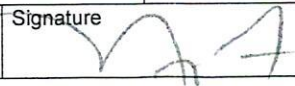
B & G Project # 2026-93C

Check #

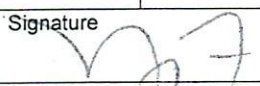
13821

Date of Notification (1) 08/04/2026		Name of Building Owner/Operator (2) Freehold Township School District							
Agencies Notified	Type Notification	Street Address 384 West Main Street							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Freehold, NJ 07728							
		Name of Contact Robert DeVita, Business Administrator	Telephone Number 732-462-8400 x 8809						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Early Childhood Learning Center - NON-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 510 Stillwells Corner Road		Square Feet 50,000+	# of Floors 3						
City (5) Freehold, NJ 07728		Bldg. Age 100+							
County (6) Monmouth	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) educational - NON-Sub 8							
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No. 3	Name of Abatement Contractor (9) B & G Restoration, Inc.						
Street Address 1253 North Church Street		Street Address 1234 Route 23							
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code Butler, NJ 07405							
Project Manager for Monitoring Firm Brian Clark		Telephone No. 856-840-8800	Telephone No. 973-696-6869						
License No. 00378									
Start Date (10) 08/05/2026 @ 2:00 PM	Scheduled Completion Date (11) 08/10/2026	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: <u>occupied</u>		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							
		☒ wrap & cut procedure ☐ 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
corridor L-50			X	pipe (wrap & cut)	60 LF	X			
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 1	Name of Registered Landfill Grand Central Landfill					
City, State Butler, NJ		Disposal Date 08/10/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature <i>Gordana Luna</i>				Date 08/05/2026	

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

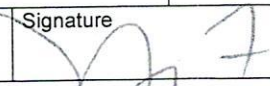
Date of Notification (1) 07 / 27 / 26		Name of Building Owner/Operator (2) Enviro-Tactics							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 1330 Laurel Avenue Building 3							
		City, State, Zip Code Sea Girt, NJ 08750							
		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 1260 South River Road		Square Feet 3000							
City (5) Cranbury		# of Floors 2							
County (6) Middlesex		Bldg. Age 100							
County Code (7) (STATE USE ONLY) Middlesex		Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Guardian Contracting		ASCM No. _____							
Street Address 1889 Route 9, Unit 61		Name of Abatement Contractor (9) Guardian Contracting, Inc.							
City, State, Zip Code Toms River, New Jersey		Street Address 1889 Route 9, Unit 61							
Project Manager for Monitoring Firm Nicholas Fernicola		City, State, Zip Code Toms River, New Jersey 08755							
Telephone No. 732-349-9932		Telephone No. 732-349-9932							
Start Date (10) 08 / 19 / 26		License No. 00624							
Scheduled Completion Date (11) 08 / 20 / 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
2nd floor kitchen	☐	☒	☐	asbestos floor tile & mastic	200 sf	☒	☐	☐	☐
office area	☐	☒	☐	asbestos floor tile	500 sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
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 08/20/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/27/26		

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

Date of Notification (1) 07 / 27 / 26		Name of Building Owner/Operator (2) Greg Lertch Demolition		RECEIVED 50484 JUL 30 2026				
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 1516 Adrienne Road		City, State, Zip Code Wall, NJ 07719				
		Name of Contact		Telephone Number				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Residene			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 470 Ocean Avenue								
City (5) Sea Bright			Square Feet 2700	# of Floors 2	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) N/A		ASCM No.		Name of Abatement Contractor (9) Guardian Contracting, Inc.				
Street Address		Street Address 1889 Route 9, Unit 61						
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755						
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 732-349-9932	License No. 00624			
Start Date (10) 08 / 21 / 26		Scheduled Completion Date (11) 08 / 24 / 26		Name of OSHA Monitor E.M.S.L. Analytical				
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____AM-_____PM/_____PM-_____AM			Street Address 1056 Stelton					
			City, State, Zip Code Piscataway, New Jersey 08854					
Scope of Work (Check all that apply)								
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 1250 sf	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
exterior	☐	☒	☐	asbestos siding	☒	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223		Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill			
City, State Toms River, New Jersey		Disposal Date 08/24/26		City, State Morrisville Pennsylvania				
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 		Date 7/27/26		

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

RECEIVED

Date of Notification (1) 07 / 30 / 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		Square Feet 1800	# of Floors 1						
City (5) Point Pleasant		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.		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	Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 08 / 13 / 26	Scheduled Completion Date (11) 08 / 17 / 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) <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
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 08/17/26	City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/30/26		

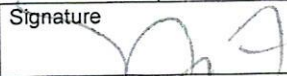
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Ch# 0003

Date of Notification (1) 6/17/2026		Name of Building Owner/Operator (2) Private Property							
Agencies Notified	Type Notification <i>Response</i>	Street Address 481 Blair Road							
☒ EPA ☒ DEP ☒ DOL	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Avenel NJ							
☒ DOH ☒ DCA		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 481 Blair Road		Square Feet 3575	# of Floors 1						
City (5) Avenel NJ		Bldg. Age +50							
County (6) Middlesex County	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No. N/A	Name of Abatement Contractor (9) ACM Abatement Services LLC						
Street Address N/A		Street Address 31 Turnberry Road							
City, State, Zip Code N/A		City, State, Zip Code Little Falls NJ 07424							
Project Manager for Monitoring Firm N/A		Telephone No. 201-218-4206	License No. 02150						
Start Date (10) 6/17/2026	Scheduled Completion Date (11) 7/31/2026	Name of OSHA Monitor Hillman Consulting							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7:00 AM to 4:00 PM		Street Address 1620 Route 22 East							
		City, State, Zip Code Union NJ 07803							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <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
Main roof			X	Roofing material	3575 SF	X			
Name of Registered Waste Hauler Rovic transport		NJDEP Waste Hauler ID No. 20785	Cubic Yards of Waste	Name of Registered Landfill Blythe Township Landfill					
City, State 60 Riverdale Rd Riverdale NJ			Disposal Date	City, State 1061 Burma Rd New Philadelphia NJ					
Completed by Edwin Precilla		Title Principal	Signature <i>Edwin Precilla</i>			Date 6/17/2026			

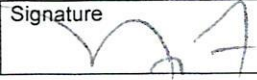
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

RECEIVED

Date of Notification (1) 07 / 30 / 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 315 Saint Louise Avenue		Square Feet 1800	# of Floors 1						
City (5) Point Pleasant		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)		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. 732-349-9932	License No. 00624						
Start Date (10) 08 / 13 / 26	Scheduled Completion Date (11) 08 / 17 / 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)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior-back of hoouse	☐	☒	☐	asbestos siding	700 sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
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 08/17/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 		Date 7/30/26			

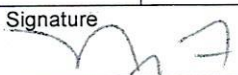
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

RECEIVED

Date of Notification (1) 07 / 28 / 26		Name of Building Owner/Operator (2) H & D Rosetto							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 352 Edison Avenue							
		City, State, Zip Code Jackson, NJ 08527							
		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 330 Cheryl Drive									
City (5) Toms River	Square Feet 900	# of Floors 1	Bldg. Age 65						
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)		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. 732-349-9932	License No. 00624						
Start Date (10) 08 / 18 / 26	Scheduled Completion Date (11) 08 / 20 / 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)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
exterior	☐	☒	☐	asbestos siding	900 sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
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 08/20/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 		Date 7/28/26			

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

RECEIVED

Date of Notification (1) 07 / 28 / 26		Name of Building Owner/Operator (2) 504914 2026							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 778 Garfield Avenue							
		City, State, Zip Code Toms River, NJ 08753							
		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 537 Harding Avenue									
City (5) Toms River	Square Feet 900	# of Floors 1	Bldg. Age 65						
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)		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. 732-349-9932	License No. 00624						
Start Date (10) 08 / 13 / 26	Scheduled Completion Date (11) 08 / 17 / 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) 900 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 08/17/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/28/26		

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

Ch# 0009

Date of Notification (1) 7/9/2026		Name of Building Owner/Operator (2) Private property		RECEIVED					
Agencies Notified		Type Notification		Street Address 590 56th Street					
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		City, State, Zip Code West New York NJ					
		Name of Contact		Telephone Number DL & LICENSING					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Property				Type of Facility (4)					
Street Address 590 56th Street				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) West New York NJ				Square Feet 8000SF	# of Floors 2 floors				
County (6) Hudson County				County Code (7) (STATE USE ONLY) _____	Bldg. Age +50				
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No. N/A		Name of Abatement Contractor (9) ACM Abatement Services LLC					
Street Address N/A		Street Address 31 Turnberry Road							
City, State, Zip Code N/A		City, State, Zip Code Little Falls NJ 07424							
Project Manager for Monitoring Firm N/A		Telephone No.		Telephone No. 201-218-4206	License No. 02150				
Start Date (10) 7/20/2026		Scheduled Completion Date (11) 7/30/2026		Name of OSHA Monitor Hillman Consulting					
Occupancy Status During Abatement (Check Only One)				Street Address 1620 Route 22 East					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7:00 AM to 4:00 PM				City, State, Zip Code Union NJ 07803					
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) 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
Office roof			x	Roofing Material	1200 SF	x			
Name of Registered Waste Hauler Rovic transport		NJDEP Waste Hauler ID No. 20785		Cubic Yards of Waste	Name of Registered Landfill Blythe Township Landfill				
City, State 60 Riverdale Rd Riverdale NJ				Disposal Date	City, State 1061 Burma Rd New Philadelphia NJ				
Completed by Edwin Precilla		Title Principal		Signature Edwin Precilla		Date 7/9/2026			

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

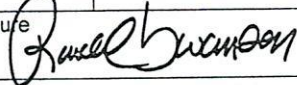
UH# 0010

RECEIVED

Date of Notification (1) 7/13/2026		Name of Building Owner/Operator (2) Private property							
Agencies Notified	Type Notification	Street Address 127 Henry Street							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Paramus NJ							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 127 Henry Street		Square Feet 1500SF	# of Floors 1 floors						
City (5) Paramus NJ		Bldg. Age +50							
County (6) Bergen County	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A	ASCM No. N/A	Name of Abatement Contractor (9) ACM Abatement Services LLC							
Street Address N/A		Street Address 31 Turnberry Road							
City, State, Zip Code N/A		City, State, Zip Code Little Falls NJ 07424							
Project Manager for Monitoring Firm N/A	Telephone No.	Telephone No. 201-218-4206	License No. 02150						
Start Date (10) 7/24/2026	Scheduled Completion Date (11) 7/27/2026	Name of OSHA Monitor Hillman Consulting							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 7:00 AM to 4:00 PM		Street Address 1620 Route 22 East							
		City, State, Zip Code Union NJ 07803							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1sf floor			x	Floor tile	1000 SF	x			
Name of Registered Waste Hauler Rovic transport		NJDEP Waste Hauler ID No. 20785	Cubic Yards of Waste	Name of Registered Landfill Blythe Township Landfill					
City, State 60 Riverdale Rd Riverdale NJ			Disposal Date	City, State 1061 Burma Rd New Philadelphia NJ					
Completed by Edwin Precilla		Title Principal	Signature			Date 7/13/2026			

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

CHECK # 2078

Date of Notification (1) 07/27/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address 806 YORKTOWN ROAD							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code BLACKWOOD NJ 08012							
		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 806 YORKTOWN ROAD		Square Feet 2406	# of Floors 2						
City (5) BLACKWOOD		Bldg. Age 67							
County (6) GLOUCESTER	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) RESIDENTIAL							
Name of Monitoring Firm Hired by Building Owner (8) SEM INC.		ASCM No.	Name of Abatement Contractor (9) ASSURED ENVIRONMENTAL SERVICES INC.						
Street Address 1634 S DELAWARE STREET		Street Address 570 CLEMS RUN							
City, State, Zip Code PAULSBORO NJ 08066		City, State, Zip Code MULLICA HILL NJ 08062							
Project Manager for Monitoring Firm ED KEEGAN		Telephone No. 856-423-5711	Telephone No. 610-304-4676						
		License No. 01145							
Start Date (10) 08/12/2026	Scheduled Completion Date (11) 08/17/2026	Name of OSHA Monitor EMSL							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 200 RT. 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
BASEMENT			X	FLOOR TILE & MASTIC	552 SF	X			
Name of Registered Waste Hauler ASSURED ENVIRONMENTAL		NJDEP Waste Hauler ID No. 0034895	Cubic Yards of Waste 05	Name of Registered Landfill MINERVA LANDFILL					
City, State MULLICA HILL NJ		Disposal Date 08/18/2026		City, State WAYNESBURG OHIO					
Completed by RON SWANSON		Title GENERAL MANAGER		Signature 				Date 07/27/2026	

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

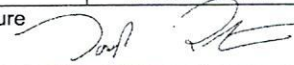
1949

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 Check # 1949

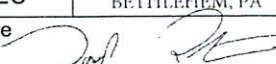
AUG - 3 2026

Date of Notification (1) 7/28/2026		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) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 38 Wendy Rd.		Square Feet 1,551	# of Floors 2						
City (5) Colonia, NJ 07067		Bldg. Age 1949							
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) DANVIC CONTRACTING LLC						
Street Address		Street Address 240 South 5th St.							
City, State, Zip Code		City, State, Zip Code Elizabeth, NJ 07206							
Project Manager for Monitoring Firm		Telephone No. 908-906-4123	License No. 01355						
Start Date (10) 8/8/2026	Scheduled Completion Date (11) 8/10/2026		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: OCCUPIED		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
2nd floor Attic Knee wall closet			X	Ductwork Insulation	12 LF			X	
2nd floor Attic Knee wall closet			X	Transite Vent Pipe	6 L:F				
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 7/28/2026			

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

Date of Notification (1) 07/27/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	235 WEARIMUS RD City, State, Zip Code HOHOKUS NJ 07423 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4)							
Street Address 235 WEARIMUS RD		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) HOHOKUS	Square Feet	# of Floors	Bldg. Age						
County (6) Bergen	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		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) 08/12/2026	Scheduled Completion Date (11) 08/12/2026	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) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				Pipe Insulation	220 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 08/12/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER		Signature 		Date 07/27/2026			

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

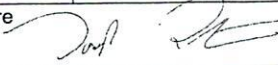
Date of Notification (1) 07/27/2026		Name of Building Owner/Operator (2) Zarella plumbing		RECEIVED					
Agencies Notified		Type Notification		Street Address					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		318 4th Ave City, State, Zip Code Bradley Beach NJ 07720					
		Name of Contact		Telephone Number					
		ASBESTOS		LICENSING					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence			Type of Facility (4)						
Street Address 318 4th Ave			☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
City (5) Bradley Beach			Square Feet	# of Floors	Bldg. Age				
County (6) Monmouth		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9)					
				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.	License No.				
				732-719-5649	1200				
Start Date (10) 08/10/2026		Scheduled Completion Date (11) 08/10/2026		Name of OSHA Monitor AAA Lead Professionals					
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: _____				6 White Dove Court					
				City, State, Zip Code					
				Lakewood, NJ, 08701					
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				Pipe Insulation	250 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 08/10/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER		Signature 		Date 07/27/2026			

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JUL 31 2026

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

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Date of Notification (1) 07/27/2026		Name of Building Owner/Operator (2)					
Agencies Notified	Type Notification	Street Address 153 Regent Dr					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Lakewood, NJ 08701					
		Name of Contact	Telephone Number				
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4)					
Street Address 153 Regent Dr		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Lakewood		Square Feet	# 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.	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) 08/05/2026		Scheduled Completion Date (11) 08/05/2026					
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor AAA Lead Professionals					
☐ 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) 1500SF	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Exterior	Yes No N/A	Siding		☒			
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 07/27/2026		

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

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Date of Notification (1) JULY 29, 2026		Name of Building Owner/Operator (2) PAID							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 45 FIELDSTONE DRIVE City, State, Zip Code SOMERVILLE, NJ 08876 Name of Contact Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) SINGLE FAMILY DWELLING		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 45 FIELDSTONE DRIVE		Square Feet	# of Floors 2						
City (5) SOMERVILLE, NJ 08876		Bldg. Age 55							
County (6) SOMERSET	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) EPC TECHNOLOGIES, INC		ASCM No. N/A	Name of Abatement Contractor (9) EPC TECHNOLOGIES, INC						
Street Address P.O. BOX 337		Street Address P.O. BOX 337							
City, State, Zip Code NEW EGYPT, NJ 08876		City, State, Zip Code NEW EGYPT, NJ 08876							
Project Manager for Monitoring Firm STEVE SCHENKER		Telephone No. 609-744-6384	License No. 00394						
Start Date (10) AUGUST 10, 2026	Scheduled Completion Date (11) AUGUST 11, 2026	Name of OSHA Monitor EPC TECHNOLOGIES, 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 P.O. BOX 337							
		City, State, Zip Code NEW EGYPT, NJ 08533							
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		XXX		9X9 FLOOR TILES	400 SF	☒			
Name of Registered Waste Hauler EPC TECHNOLOGIES, INC		NJDEP Waste Hauler ID No. 17000	Cubic Yards of Waste 3	Name of Registered Landfill FAIRLESS LANDFILL					
City, State NEW EGYPT, NJ 08533			Disposal Date AUG 11, 2026	City, State MORRISVILLE, PA					
Completed by STEVE SCHENKER		Title PRESIDENT	Signature <i>Steve Schenker</i>			Date JULY 29, 2026			

State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 10/17/12 17/12/16		Name of Building Owner/Operator (2)	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment #: _____ ☐ Emergency (including justification) ☐ Cancellation	
Street Address 295 Orchard Pl		City, State, Zip Code Ridgewood, NJ 07450	
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 (Private/Commercial Bldgs./Homes, etc.)		
Street Address 295 Orchard Pl			Square Feet 1,400 SF		
City (5) Ridgewood, NJ 07450			# of Floors 03		
County (6) Bergen			Bldg. Age 90		
County Code (7) (State use only)			Current Use (Prior if being demolished) Residential		
Name of Monitoring Firm Hired by Bldg. Owner (8) N/A			ASCM No.		
Street Address			Name of Abatement Contractor (9) D&S Restoration, Inc.		
City, State, Zip Code			Street Address 20 California Ave		
Project Manager for Monitoring Firm			City, State, Zip Code Paterson, NJ 07503		
Phone Number			Telephone Number 973-345-8020		
Start Date (10) 08/10/2026			License Number 01169		
Sched. Completion Date (11) 08/14/2026			Name of OSHA Monitor D&S Restoration, Inc.		
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: Normal Hours			Street Address 20 California Ave		
			City, State, Zip Code Paterson, NJ 07503		

Scope of Work (check all that apply)

☐ >3 sf or >3 lf☒ Renovation☒ ≥160 sf or ≥260 lf☐ Demolition☒ Full Containment w/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)	Amount (Specify SF or LF)	R e m o v e	R e p a i r	E n c a p	E n c l
	Yes	No	N/A						
Attic		☒		Vermiculite	300 SF	☒	☐	☐	☐
Attic		☒		Paper Duct Insulation	2 SF	☒	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐

Registered Waste Hauler D&S Restoration, Inc.	NJDEP Hauler ID# 13506	Cubic Yards of Waste 1/2 CYD.	Name of Registered Landfill TULLYTOWN, RESOURCE RECOVERY
City, State Paterson, NJ 07503	Disposal Date 3 yds	City, State TULLYTOWN, PA	
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	Signature <i>Bohdan Joldzic</i>	Date 07/27/2026

13385

D&S Proj. #: 26-114

State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

JUL 31 2026

Date of Notification (1) 10/17/12/17/12/16/		Name of Building Owner/Operator (2)	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment #: _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 45 Wyncote Rd	
		City, State, Zip Code Ho Ho Kus, NJ 07423	
		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 (Private/Commercial Bldgs./Homes, etc.)		
Street Address 45 Wyncote Rd			Square Feet 1,300 SF	# of Floors 02	Bldg. Age 70
City (5) Ho Ho Kus, NJ 07423	County (6) Bergen	County Code (7) (State use only)	Current Use (Prior if being demolished) Residential		

Name of Monitoring Firm Hired by Bldg. Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) D&S Restoration, Inc.	
Street Address		Street Address 20 California Ave		
City, State, Zip Code		City, State, Zip Code Paterson, NJ 07503		
Project Manager for Monitoring Firm	Phone Number	Telephone Number 973-345-8020	License Number 01169	
Start Date (10) 08/07/2026	Sched. Completion Date (11) 08/11/2026	Name of OSHA Monitor D&S Restoration, Inc.		
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: Normal Hours		Street Address 20 California Ave		
		City, State, Zip Code Paterson, NJ 07503		

Scope of Work (check all that apply)

☐ >3 sf or >3 lf	☒ Renovation	☒ Full Containment w/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)	Amount (Specify SF or LF)	R e m o v e	R e p a i r	E n c a p	E n c l
	Yes	No	N/A						
Basement		☒		Transite Pipe	34 LF	☒	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐

Registered Waste Hauler D&S Restoration, Inc.	NJDEP Hauler ID# 13506	Cubic Yards of Waste 1 CYD.	Name of Registered Landfill TULLYTOWN, RESOURCE RECOVERY
City, State Paterson, NJ 07503	Disposal Date TBD	City, State TULLYTOWN, PA	
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	Signature <i>Bogdan Joldzic</i>	Date 07/27/2026

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

Date of Notification (1) 07/24/2026		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 160 Lela K Ave City, State, Zip Code Springfield, NJ 07081 JUL 30 2026							
		Telephone Number ASBESTOS							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Street Address 432 Alden Ave City (5) Westfield County (6) Union		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.) Square Feet 2527 # of Floors 2 Bldg. Age 1954 Current Use (Prior if being demolished) N/A							
Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code		ASCM No. Telephone No.	Name of Abatement Contractor (9) ABATE LLC Street Address 100-128 Union St, Suite 65 City, State, Zip Code Elizabeth NJ 07202 Telephone No. 908-372-8375 License No. 02019						
Start Date (10) 08/07/2026		Scheduled Completion Date (11) 08/16/2026							
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 Ryan J Passos Street Address 100-128 Union St, Suite 65 City, State, Zip Code Elizabeth NJ 07202							
Scope of Work (Check All That Apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Asbestos Floor Tile	600 S.F	X			
Name of Registered Waste Hauler ABATED		NJDEP Waste Hauler ID No. 0038720	Cubic Yards of Waste 4	Name of Registered Landfill Fairless Hills (W-M)					
City, State Elizabeth, NJ		Disposal Date 08/16/2026		City, State Morrisville PA					
Completed by Ryan J Passos		Title President		Signature 		Date 07/24/2026			

437

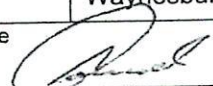
OK 437

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

RECEIVED

Date of Notification (1) <u>7/16/2026</u>		Name of Building Owner/Operator (2) _____	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address <u>1013 Lakeshore Drive</u> City, State, Zip Code <u>Haddon Twp, NJ 08108</u>	
		Name of Contact _____ Telephone Number _____	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) <u>Residence</u> Street Address <u>1013 Lakeshore Drive</u> City (s) <u>Haddon Twp, NJ 08108</u>		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private & commercial buildings, homes, etc.) Square Feet <u>1900sf</u> # of Floors <u>2</u> Bldg. Age <u>45 yrs</u>	
County (6) <u>Camden</u>	County Code(7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) <u>Residence</u>	
Name of Monitoring Firm Hired by Building Owner (8) _____ Street Address _____ City, State, Zip Code _____		Name of Abatement Contractor (9) <u>AEi2, LLC</u> Street Address <u>PO Box 499</u> City, State, Zip Code <u>Hammonton, NJ 08037</u>	
Project Manager for Monitoring Firm _____ Telephone No. _____		Telephone No. <u>609-381-2990</u> License No. <u>00689</u>	
Start Date (10) <u>7/25/26</u>	Scheduled Completion Date (11) <u>8/10/26</u>	Name of OSHA Monitor <u>AEi2, LLC</u>	
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 <u>PO Box 499</u> City, State, Zip Code <u>Hammonton, NJ 08037</u>	
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 IN Facility (13)</u>	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)		
Crawl Space		X	Duct Insulation 9 LF
Name of Registered Waste Hauler <u>TBD</u>		NJDEP Waste Hauler ID No. <u>TBD</u>	Cubic Yards of Waste <u>1</u>
City, State <u>TBD, NJ</u>		Name of Registered Landfill <u>TBD</u>	
Disposal Date <u>TBD</u>		City, State <u>NJ</u>	
Completed By <u>Wm. Minnick</u>	Title <u>Program Mgr.</u>	Signature 	Date <u>7/16/26</u>

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

Date of Notification (1) 07/24/2026		Name of Building Owner/Operator (2) Village of Ridgewood		RECEIVED JUL 20 2026					
Agencies Notified	Type Notification	Street Address 131 N Maple Avenue		City, State, Zip Code Ridgewood, NJ 07450					
☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Name of Contact		Telephone Number					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Schedler Site			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 460 W. Saddle River Rd			Square Feet	# of Floors	Bldg. Age				
City (5) Ridgewood			Current Use (Prior if being demolished) Farmhouse						
County (6) Bergen		County Code (7) (STATE USE ONLY) _____							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9) ELCON Environmental					
Street Address		Street Address 150 Glenwood Drive		City, State, Zip Code Washington Crossing, PA 18977					
City, State, Zip Code		Telephone No. 215-313-7427		License No. 02081					
Project Manager for Monitoring Firm		Telephone No.		Name of OSHA Monitor Same					
Start Date (10) 08/03/2026		Scheduled Completion Date (11) 08/09/2026		Street Address					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code					
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) 60 yd^3	Abatement Type			
						Removal	Repair	Encapsulate	Enclosure
Outside				construction debris (including NF tiles, blocks, bricks, etc.)		x			
Name of Registered Waste Hauler Century Waste Service		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 60 yd^3	Name of Registered Landfill Minerva Enterprise				
City, State Elizabeth, NJ		Disposal Date TBD		City, State Waynesburg, OH					
Completed by Andre Gosek		Title Project Manager		Signature 			Date 07/24/2026		

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 140 N Mountain Ave							
☒ 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 140 N Mountain Ave		Square Feet	# of Floors						
City (5) Montclair, NJ 07042		Bldg. Age							
County (6) Essex County	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 Asbestos						
Street Address		Street Address 2208B Hamilton Blvd							
City, State, Zip Code		City, State, Zip Code South Plainfield, NJ 07080							
Project Manager for Monitoring Firm		Telephone No. 732-289-7360	License No. 02010						
Start Date (10) 8/4/26	Scheduled Completion Date (11) 8/11/26	Name of OSHA Monitor Chris Weber							
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 2208B Hamilton Blvd							
		City, State, Zip Code South Plainfield, NJ 07080							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		Pipe Wrap	16LF	X			
		X				X			
		X							
		X							
Name of Registered Waste Hauler AAA Asbestos		NJDEP Waste Hauler ID No. 113709	Cubic Yards of Waste TBD	Name of Registered Landfill Grand Central Landfill					
City, State Newark, NJ		Disposal Date TBD		City, State Pen Argyl, PA					
Completed by Frank Formisano		Title Owner	Signature			Date 7/24/26			

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

CHK#1948

Date of Notification (1) 7/24/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 412 Liberty St.							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Boonton, NJ 07005							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4)							
Street Address 412 Liberty St.		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Boonton, NJ 07005		Square Feet 1,592	# of Floors 2						
County (6) Morris		County Code (7) (STATE USE ONLY) _____	Bldg. Age 1930						
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.	Telephone No. 908-906-4123						
Start Date (10) 8/2/2026		Scheduled Completion Date (11) 8/4/2026	License No. 01355						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor Iris Environmental Laboratories, Inc.							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 2333 Route 22 West							
		City, State, Zip Code Union, NJ 07083							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Pipe Insulation	100 LF	X			
Crawlspace			X	Pipe Insulation	25 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 Jeymy Donneys			Date 7/24/2026		

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

CHK #1946

Date of Notification (1) 7/23/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 602 Studio Rd.							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Ridgefield, NJ 07657 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 602 Studio Rd.		Square Feet 3,255	# of Floors 2						
City (5) Ridgefield, NJ 07657		Bldg. Age 1954							
County (6) Bergen	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) 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) 8/7/2026	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: OCCUPIED		Street Address 2333 Route 22 West							
		City, State, Zip Code Union, NJ 07083							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	VAT	550 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 7/23/2026		

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) 07/23/2026		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 2175 Lemoine Avenue, 6 th Floor		City, State, Zip Code Fort Lee, NJ 07020	
Name of Contact Scott Bendul		Telephone Number (201) 290-2190	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Fort Lee High School		Type of Facility (4) ☐ School (K-12) Subchapter 8 ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 3000 Lemoine Avenue		Sq. Feet: 40,000+ # of Floors: 2 Bldg. Age: 100+ Current Use (prior if being demolished):	
City (5) Fort Lee NJ 07020	County (6) Bergen	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner Karl Associates		Name of Contractor (9) BL Contracting Inc.	
PO Box 646		Street Address 5 Marguerite Lane	
Shillington PA 19678		City, State, Zip Code Towaco NJ 07082	
Project Manager for Monitoring Firm Ed Karl		Telephone Number 973-901-0153	License Number 01265
Scheduled Start Date (10) 08/1/2026		Scheduled Completion Date (11) 08/4/2026	
Name of OSHA Monitoring BL Contracting Inc		Street Address 5 Marguerite Lane	
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		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)
Girls Locker Room	☒	Asbestos Elbows	8 LF
Boys Locker Room	☒	Asbestos Elbows Asbestos Pipe Insulation	13 LF 20 LF
Abatement Type Remove Repair Encap Enclos			
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 <i>Nedo Vasilic</i>	Date 07/23/2026