

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

B & G Project # 2025-189

Check # 13773

Date of Notification (1) 07-02-2026		Name of Building Owner/Operator (2) Newark Public Schools							
Agencies Notified	Type Notification	Street Address 190 Muhammad Ali Avenue							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment #5 ☐ Emergency (including justification) ☐ Cancellation	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) Sussex Avenue 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 307 Sussex Avenue		Square Feet 50,000+	# of Floors 4						
City (5) Newark, NJ 07107		Bldg. Age 50+							
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 Environemntal, INC.		ASCM No. 0003	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 James Guillard		Telephone No. 609-314-1683	Telephone No. 973-696-6869						
License No. 00378									
Start Date (10) 06/24/2026	Scheduled Completion Date (11) 07/31/2026	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: UN-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) 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
Gymnasium / Cafetorium		X		tar like material under flooring	5,000 SF	X			
Kitchen 145, 146A, UN11, UN10, 146B, Food Storage, 147, 149, UN8, UN9, adj hallway 2nd floor above ceilings		X		pipe insulation	1,000 LF	X			
Room 120A storage room & adjacent storage rooms		X		duct insulation VAT & mastic	250 SF 700 SF	X			
Room 120A storage room & adjacent storage rooms		X		pipe insulation spray-on column insulation	200 LF 80 SF	X			
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 100	Name of Registered Landfill Grand Central Landfill					
City, State Butler, NJ		Disposal Date 06/23/26 - 07/31/26		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer	Signature <i>Gordana Luna</i>			Date 07-02-2026			

Re: Cont. sheet initial notification NJDOL, NJDOH, USEPA

Sussex Avenue School, 307 Sussex Avenue, Newark, NJ 07107

Notification Amendment #5 dated 07-02-2026

Location of asbestos-containing material to be abated in facility	Is location normally used solely by maintenance / custodial staff	Description of ACM	(LF or SF)	Removal
Room 307 Mechanical Room	YES	Pipe insulation	110 LF	X
Room 307 – Mechanical Room	YES	Breech Duct Insulation	600 SF	X

B & G Restoration, Inc.
1234 Route 23 North
Butler, NJ 07405
License # 00378

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

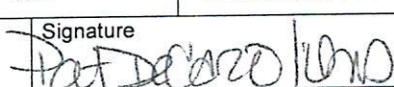
Check # 4668

Date of Notification (1) 6 / 19 / 26		Name of Building Owner/Operator (2) VERIZON COMMUNICATIONS		RECEIVED JUL - 7 2006							
Agencies Notified ☒ EPA ☒ DOLWD ☐ DHSS ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation									
Street Address 138 Washington Road		City, State, Zip Code Princeton NJ 08540		Telephone Number ASBESTOS CONTROL & LICENSING							
Name of Contact BRIAN KINGSBURY											
FACILITY INFORMATION											
Name of Facility Where Abatement is Taking Place (3) VERIZON				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 138 Washington Road											
City (5) Princeton		Square Feet 18200		# of Floors 2							
County (6) Mercer		County Code (7) (STATE USE ONLY)		Bldg. Age 90							
Current Use (Prior if being demolished) VERIZON COMMUNICATIONS											
Name of Monitoring Firm Hired by Building Owner (8) USA ENVIRONMENTAL		ASCM No.		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC							
Street Address 8436 ENTERPRISE AVENUE		Street Address 1123 BEAVER STREET									
City, State, Zip Code PHILADELPHIA PA 19153		City, State, Zip Code BRISTOL, PA 19007									
Project Manager for Monitoring Firm RICK REYNOLDS		Telephone No. 267)261-2837		License No. 01212							
Start Date (10) 7 / 6 / 26		Scheduled Completion Date (11) 7 / 28 / 26		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM 5PM-2AM				Street Address 1123 BEAVER STREET							
				City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)											
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF)		Abatement Type			
		Yes	No					N/A	Removal	Repair	Encapsulate
GROUND FL -CORNER MER		☒	☐	☐	VAT AND MASTIC		275SF	☒	☐	☐	☐
GROUND FL- STORAGE ROOM		☒	☐	☐	VAT AND MASTIC		225SF	☒	☐	☐	☐
GROUND FL-REAR VESTIBULE		☒	☐	☐	VAT AND MASTIC		155SF	☒	☐	☐	☐
GROUND FL- EAST WALL		☒	☐	☐	ROOF DRAINS		4LF	☒	☐	☐	☐
Name of Registered Waste Hauler Bristol Environmental LLC		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste TBD		Name of Registered Landfill Fairless Landfill					
City, State Bristol, PA		Disposal Date tbd		City, State Morrisville, PA							
Completed By (Print or Type) Patrick T DeCaro		Title Estimator		Signature <i>Patrick T DeCaro</i>				Date 6/19/26			

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

Pg. 2

Check # 4668

Date of Notification (1) 6 / 19 / 26			Name of Building Owner/Operator (2) VERIZON COMMUNICATIONS						
Agencies Notified ☒ EPA ☒ DOLWD ☐ DHSS ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 138 Washington Road City, State, Zip Code Princeton NJ 08540 Name of Contact BRIAN KINGSBURY		Telephone Number			
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) VERIZON				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 138 Washington Road				Square Feet # of Floors Bldg. Age 18200 2 90					
City (5) Princeton		County (6) Mercer		County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) VERIZON COMMUNICATIONS					
Name of Monitoring Firm Hired by Building Owner (8) USA ENVIRONMENTAL			ASCM No.		Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC				
Street Address 8436 ENTERPRISE AVENUE			Street Address 1123 BEAVER STREET						
City, State, Zip Code PHILADELPHIA PA 19153			City, State, Zip Code BRISTOL, PA 19007						
Project Manager for Monitoring Firm RICK REYNOLDS		Telephone No. 267)261-2837		Telephone No. 215-788-6040		License No. 02121			
Start Date (10) 7 / 6 / 26		Scheduled Completion Date (11) 7 / 28 / 26		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____AM-_____PM/5PM-2AM				Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007					
Scope of Work (Check all that apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) 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
HVAC AND BATTERY AREA		☒ ☐ ☐		VAT AND MASTIC	240SF	☒	☐	☐	☐
HVAC AND BATTERY AREA		☒ ☐ ☐		DRYWALL COMPOUND	32SF	☒	☐	☐	☐
		☒ ☐ ☐				☒	☐	☐	☐
		☒ ☐ ☐				☒	☐	☐	☐
Name of Registered Waste Hauler Bristol Environmental LLC			NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste TBD	Name of Registered Landfill Fairless Landfill			
City, State Bristol, PA			Disposal Date tbd		City, State Morrisville, PA				
Completed By (Print or Type) Patrick T DeCaro		Title Estimator		Signature 			Date 6/19/26		

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

B & G Project # 2026-100

Check # 13766

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) 777 West Park Avenue LLC							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	100 Woodbridge Center Drive, Suite 301 City, State, Zip Code Woodbridge, NJ 07095							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) residential structure		Type of Facility (4)							
Street Address 14 Kirkpatrick Street		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) New Brunswick, NJ 08901		Square Feet	# of Floors						
County (6) Middlesex		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) residential structure							
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9)							
Street Address		Street Address							
City, State, Zip Code		City, State, Zip Code							
Project Manager for Monitoring Firm		Telephone No.	License No.						
Start Date (10) 07/06/2026		Scheduled Completion Date (11) 07/17/2026							
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor B & G Restoration, Inc.							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 1234 Route 23							
Scope of Work (Check All That Apply)		City, State, Zip Code Butler, NJ 07405							
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition							
☒ Wrap and 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
Exterior sides & rear		X		Exterior Window Caulk	525 LF	X			
1st floor		X		baseboard mastic	2,000 LF	X			
1st Floor kitchen		X		Vat & mastic	250 SF	X			
Basement	X			VAT & mastic	320 SF	X			
Name of Registered Waste Hauler B & G Restoration Inc.		NJDEP Waste Hauler ID No. 19563		Cubic Yards of Waste 45	Name of Registered Landfill Grand Central Landfill				
City, State Butler, NJ		Disposal Date 07/06/26 - 07/17/26		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature <i>Gordana Luna</i>			Date 06/26/2026		

Re: Cont. sheet initial notification NJDOL, NJDOH, USEPA

14 Kirkpatrick Street
New Brunswick, NJ 08901

Start: July 6, 2026 @ 7:00 AM

Location of asbestos-containing material to be abated in facility	Is location normally used solely by maintenance / custodial staff	Description of ACM	(LF or SF)	Removal
Basement – Mechanical Room	YES	Transite ceiling tiles	64 SF	X
Basement – Mechanical Room	YES	Transite flue pipe	10 LF	X
Basement – Mechanical Room	YES	Pipe insulation	30 LF	X
1 st Floor Office	NO	12x12 Tan VAT	220 SF	X
1 st Floor Office	NO	9x9 VAT	200 SF	X
1 st Floor Office	NO	Bottom layer VAT	200 SF	X

B & G Restoration, Inc.
1234 Route 23 North
Butler, NJ 07405
License # 00378

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

CHK # 1938
RECEIVED

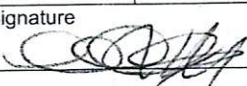
Date of Notification (1) 6/23/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 1 Wellington Place							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code New Brunswick, NJ 08901							
		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 1 Wellington Place		Square Feet 3,200	# of Floors 2						
City (5) New Brunswick, NJ 08901		Bldg. Age 1900							
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) 7/4/2026	Scheduled Completion Date (11) 7/7/2026	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	Pipe Insulation	170 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 6/23/2026			

1918

4349866

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

RECEIVED

Date of Notification (1) 07/07/2026		Name of Building Owner/Operator (2) Bella Contracting Services LLC							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation							
Street Address 276-280 Lyons Ave		City, State, Zip Code Newark NJ 07112							
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 276-280 Lyons Ave		Square Feet	# of Floors						
City (5) Newark		Bldg. Age							
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) E & V Services LLC						
Street Address		Street Address 711 Sip Street							
City, State, Zip Code		City, State, Zip Code Union City NJ 07087							
Project Manager for Monitoring Firm		Telephone No. 201-875-7290	License No. 02053						
Start Date (10) 07/18/2026	Scheduled Completion Date (11) 08/06/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <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		PLASTER	830 SF	x			
EXTERIOR		x		ROOF	730 SF	x			
Name of Registered Waste Hauler TRISTATE TRANSFER INC		NJDEP Waste Hauler ID No. 24-1129	Cubic Yards of Waste 2	Name of Registered Landfill MINERVA ENTERPRISES LLC					
City, State BRONX NY 10474		Disposal Date		City, State WAYNESBURG OH 44688					
Completed by Angel Penaherrera		Title Owner	Signature 			Date 07/07/2026			

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

B & G Project # 2026-93B

Check # 13765

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) Freehold Township School District							
Agencies Notified	Type Notification	Street Address							
☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	384 West Main Street City, State, Zip Code Freehold, NJ 07728 Name of Contact _____ Telephone Number _____							
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) 07/06/2026	Scheduled Completion Date (11) 07/11/2026		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 07/06/2026 - 07/11/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer	Signature <i>Gordana Luna</i>			Date 06/26/2026			

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

RECEIVED

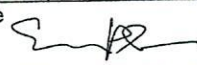
Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) 23 Illinois Ave							
Agencies Notified	Type Notification	Street Address 23 Illinois Ave							
☒ EPA ☐ DEP ☒ DOL	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Jackson, NJ 08527							
☒ DOH ☐ DCA		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 23 Illinois Ave		Square Feet	# of Floors						
City (5) Jackson		Bldg. Age							
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm		Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/06/2026		Scheduled Completion Date (11) 07/06/2026							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address 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)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior				Siding	1500sf	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/06/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 			Date 06/26/2026			

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

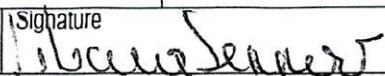
Date of Notification (1) 6 / 23 / 26		Name of Building Owner/Operator (2) 104 Fish Hawk Dr							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 104 Fish Hawk Dr City, State, Zip Code Middletown, NJ 07748 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 104 Fish Hawk 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) Middletown		Square Feet 2300	# of Floors 2 Bldg. Age 69						
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired by Building Owner (8) AZ Solution Consulting		ASCM No.	Name of Abatement Contractor (9) Brick Industries, Inc.						
Street Address 27 Susquehanna Ave		Street Address PO Box 915							
City, State, Zip Code Rochelle Park, NJ 07662		City, State, Zip Code Brick, NJ 08723							
Project Manager for Monitoring Firm Aleksander Zivanov		Telephone No. 347-612-1572	Telephone No. 7328997499 License No. 01196						
Start Date (10) 6 / 24 / 26	Scheduled Completion Date (11) 6 / 25 / 26	Name of OSHA Monitor AZ Solution Consulting							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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	750SF	☒	☐	☐	☐
Basement	☐	☐	☐	Mastic	750SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste 6	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 6/26/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 				Date 6/23/26	

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

RECEIVED

Date of Notification (1) 6 / 24 / 26		Name of Building Owner/Operator (2) JUL 13 2026							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 15 Willow Run Lane City, State, Zip Code Belle Mead, NJ 08502 Name of Contact Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 15 Willow Run Lane		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
City (5) Belle Mead	Square Feet 2100	# of Floors 1	Bldg. Age 62						
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) 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) 6 / 25 / 26		License No. 01196							
Scheduled Completion Date (11) 6 / 26 / 26		Name of OSHA Monitor AZ Solution Consulting							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☒ 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	☐	☐	☐	Floor tile	1000SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste 8	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 6/27/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 				Date 6/24/26	

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

Date of Notification (1) 6-25-2026		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	7 Morris Plain Avenue							
		City, State, Zip Code Morris Plain, NJ 07950							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4)							
Street Address 7 Morris Plain Avenue		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Morris Plain, NJ 07950		Square Feet 1397	# of Floors 2						
County (6) Morris		Bldg. Age 139+							
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) Green Environmental Services, LLC						
Street Address		Street Address 235 Virginia Avenue							
City, State, Zip Code		City, State, Zip Code Jersey City, NJ 07304							
Project Manager for Monitoring Firm		Telephone No. 201-333-8855	License No. 01174						
Start Date (10) 6-25-2026	Scheduled Completion Date (11) 6-25-2026	Name of OSHA Monitor Green Environmental Services, LLC							
Occupancy Status During Abatement (Check Only One)		Street Address 235 Virginia Avenue							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code Jersey City, NJ 07304							
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
Basement		X		Pipe Insulation	130 LF	X			
Name of Registered Waste Hauler Green Environmental Services, LLC		NJDEP Waste Hauler ID No. 0034889	Cubic Yards of Waste 1	Name of Registered Landfill Fairless Landfill					
City, State Jersey City, NJ		Disposal Date 6-25-2026		City, State Morrisville, PA					
Completed by Liliana Serrano		Title Office Assistant		Signature 			Date 6-25-2026		

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

Check 100012

Date of Notification (1) 7/8/26 Type Notification		Name of Building Owner / Operator (2) Main St LLC		
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Emergency Notification ☐ Initial Notification ☐ Amended Notification ☐ Cancellation	Street Address 16 Mt. Bethel Rd		
		City, State & Zip Code Warren, NJ 07059		
		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 224 Main Ave			Square Feet 2800	# of Floors 2
City (5) Stirling	County (6) Morris	County Code (7)	Bldg. Age 60	
Current Use (Prior if being demolished) Residential				
Name of Monitoring Firm Hired by Building Owner (8) Jonathan Gilbert		ASCM No.	Name of Abatement Contractor (9) Global Abatement Services, LLC	
Street Address 37 Sunset Drive			Street Address P.O. Box 7620	
City, State & Zip Code Voorhees, NJ 08043			City, State & Zip Code Monroe Township, NJ 08831	
Project Manager for Monitoring Firm Jonathan Gilbert		Telephone Number 856-625-2045	Telephone Number 732-605-9062	License Number 00714
Scheduled Start Date (10) 6/27/26	Scheduled Completion Date (11) 6/30/26		Name of OSHA Monitor Global Abatement Services, LLC	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: Area Isolated During Abatement Other - Describe:			Street Address P.O. Box 7620	
			City, State & Zip Code Monroe Township, NJ 08831	
Scope of Work (Check all that apply)				
☒ Demolition ☐ Renovation ☒ Large Project ☒ Quantity is ≥ 3 SF or ≥ 3 LF ACM ☐ Quantity is ≥ 160 SF or ≥ 260 LF ACM				
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Other: Non-friable				
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
Basement	N/A	Fleu debris cleanup	1SF	Removal
First floor	N/A	VAT	40SF	Removal
Name of Registered Waste Hauler Freehold Carting		NJDEP Waste Hauler ID # 18693	Cu. Yds. of Waste 2	Name of Registered Landfill Conestoga
City, State Freehold, NJ		Disposal Date 7/9/26/26	City, State Morgantown, PA	
Completed By (Print or Type) Dominick Tringali	Title Pres.	Signature <i>Dominick Tringali</i>		Date 7/8/26

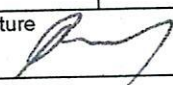
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 6 / 19 / 26		Name of Building Owner/Operator (2) PAID		RECEIVED JUL 13 2026						
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)		Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation		Street Address 26 Dark Leaf Dr City, State, Zip Code Hamilton, NJ 08610 Name of Contact Telephone Number						
FACILITY INFORMATION										
Name of Facility Where Abatement is Taking Place (3) 26 Dark Leaf 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) Hamilton		Square Feet 1824		# of Floors 2						
County (6) Mercer		County Code (7)(STATE USE ONLY)		Bldg. Age 62						
Name of Monitoring Firm Hired by Building Owner (8) AZ Solution Consulting		ASCM No.		Name of Abatement Contractor (9) Brick Industries, Inc.						
Street Address 27 Susquehanna Ave		Street Address PO Box 915								
City, State, Zip Code Rochelle Park, NJ 07662		City, State, Zip Code Brick, NJ 08723								
Project Manager for Monitoring Firm Aleksander Zivanov		Telephone No. 347-612-1572		Telephone No. 7328997499 License No. 01196						
Start Date (10) 6 / 22 / 26		Scheduled Completion Date (11) 6 / 23 / 26		Name of OSHA Monitor AZ Solution Consulting						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____ AM- ____ PM/ ____ PM- ____ AM				Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662						
Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure										
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
						Removal	Repair	Encapsulate	Enclosure	
Laundry room		☐	☐	☒	Floor	252.5SF	☒	☐	☐	☐
Laundry room		☐	☐	☒	Mastic	252.5SF	☒	☐	☐	☐
		☐	☐	☐			☐	☐	☐	☐
		☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602		Cubic Yards of Waste 4	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 6/24/26		City, State Morrisville, PA						
Completed By (Print or Type) Eric Plackis		Title President		Signature 				Date 6/19/26		

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

Date of Notification (1) 06/18/2026		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified	Type Notification	Street Address 118 Hamilton Ave							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Hasbrouck Heights, New Jersey 07604							
		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 118 Hamilton Ave		Square Feet	# of Floors						
City (5) Hasbrouck Heights		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) ILV Contracting LLC						
Street Address		Street Address 16 Hillcrest Ave							
City, State, Zip Code		City, State, Zip Code Clifton New Jersey 07013							
Project Manager for Monitoring Firm		Telephone No. 917-403-3160	License No. 02132						
Start Date (10) 06/20/2026	Scheduled Completion Date (11) 06/30/2026	Name of OSHA Monitor ILV 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 16 Hillcrest Ave							
		City, State, Zip Code Clifton New Jersey 07013							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
basement			NA	tiles and mastic	280	X		X	
basement			NA	pipe insulation	70	X		X	
Name of Registered Waste Hauler ILV Contracting LLC		NJDEP Waste Hauler ID No. 0042514	Cubic Yards of Waste	Name of Registered Landfill Grand Central Landfill					
City, State Clifton, New Jersey		Disposal Date TBD		City, State Pen Argyl, PA					
Completed by Ivana Velkov		Title President	Signature <i>I Velkov</i>			Date 06/18/2026			

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

Date of Notification (1) 06/30/2026			Name of Building Owner/Operator (2) RECEIVED						
Agencies Notified		Type Notification	Street Address						
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	6 Kenneth Road City, State, Zip Code Montclair, New Jersey 07043 Name of Contact _____ Telephone Number _____						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential				Type of Facility (4)					
Street Address 6 Kenneth Road				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Montclair				Square Feet	# of Floors				
County (6) Essex		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) ILV Contracting LLC					
Street Address			Street Address 16 Hillcrest Ave						
City, State, Zip Code			City, State, Zip Code Clifton New Jersey 07013						
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 917-403-3160		License No. 02132				
Start Date (10) 07/01/2026		Scheduled Completion Date (11) 07/10/2026		Name of OSHA Monitor ILV Contracting LLC					
Occupancy Status During Abatement (Check Only One)				Street Address 16 Hillcrest Ave					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code Clifton New Jersey 07013					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) 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			NA	tiles & mastic	600	x		x	
Name of Registered Waste Hauler ILV Contracting LLC			NJDEP Waste Hauler ID No. 0042514	Cubic Yards of Waste	Name of Registered Landfill Grand Central Landfill				
City, State Clifton, New Jersey			Disposal Date TBD		City, State Pen Argyl, PA				
Completed by Ivana Velkov			Title President		Signature 			Date 06/30/2026	

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

Date of Notification (1) 06/19/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 707 Seventh Street							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Lyndhurst, New Jersey , 07071							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4)							
Street Address 707 Seventh Street		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Lyndhurst		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)		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) 06/22/2026		Scheduled Completion Date (11) 06/30/2026							
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 16 Hillcrest Ave							
		City, State, Zip Code Clifton New Jersey 07013							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) 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
Stairs Second floor			NA	linoleum flooring	150	X		X	
Name of Registered Waste Hauler ILV Contracting LLC		NJDEP Waste Hauler ID No. 0042514	Cubic Yards of Waste	Name of Registered Landfill Grand Central Landfill					
City, State Clifton, New Jersey		Disposal Date TBD		City, State Pen Argyl, PA					
Completed by Ivana Velkov		Title President	Signature <i>I Velkov</i>				Date 06/19/2026		

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

RECEIVED

Date of Notification (1) 07/09/2026		Name of Building Owner/Operator (2) ILV Contracting LLC							
Agencies Notified	Type Notification	Street Address 510 East Hendricks Boulevard							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code South Plainfield, New Jersey 07080							
		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 510 East Hendricks Boulevard		Square Feet	# of Floors						
City (5) South Plainfield		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) ILV Contracting LLC						
Street Address		Street Address 16 Hillcrest Ave							
City, State, Zip Code		City, State, Zip Code Clifton, New Jersey							
Project Manager for Monitoring Firm		Telephone No. 917-403-3160	License No. 02132						
Start Date (10) 07/11/2026	Scheduled Completion Date (11) 07/21/2026	Name of OSHA Monitor ILV 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 16 Hillcrest Ave							
		City, State, Zip Code Clifton, New Jersey 07013							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 480	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			NA	Tiles & Mastic		X			X
Name of Registered Waste Hauler ILV Contracting LLC		NJDEP Waste Hauler ID No. 0042514	Cubic Yards of Waste	Name of Registered Landfill Grand Central Landfill					
City, State Clifton, New Jersey		Disposal Date TBD		City, State Pen Argyl, PA					
Completed by Ivana Velkov		Title President	Signature <i>I Velkov</i>				Date 07/09/2026		

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

RECEIVED

Date of Notification (1) 7 / 1 / 26		Name of Building Owner/Operator (2) JUL 14 2026							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 16 Trowbridge Rd City, State, Zip Code Morris Plains, NJ 07950 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Street Address 16 Trowbridge Rd City (5) Morris Plains County (6) Morris		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.) Square Feet 2600 # of Floors 2 Bldg. Age 65 County Code (7)(STATE USE ONLY) _____ Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired by Building Owner (8) AZ Solution Consulting		Name of Abatement Contractor (9) Brick Industries, Inc. Street Address PO Box 915 City, State, Zip Code Brick, NJ 08723 Telephone No. 7328997499 License No. 01196							
Project Manager for Monitoring Firm Aleksander Zivanov Start Date (10) 7 / 2 / 26		Telephone No. 347-612-1572 Name of OSHA Monitor AZ Solution Consulting Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662							
Scheduled Completion Date (11) 7 / 3 / 26 Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Name of OSHA Monitor 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 ☒ 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) 500SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement	☐	☐	☐	Floor tile		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602		Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Brick, NJ		Disposal Date 7/6/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 			Date 7/1/26		

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

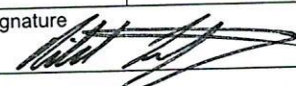
Date of Notification (1) 6 / 30 / 26		Name of Building Owner/Operator (2) DDK Concrete							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 3169 South Main Road City, State, Zip Code Vineland, NJ 08360 Name of Contact Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 609 Indian Ave		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
City (5) North Cape May		Square Feet 1049	# of Floors 1						
County (6) Cape May		Bldg. Age 73							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) Brick Industries, Inc.							
Street Address		Street Address PO Box 915							
City, State, Zip Code		City, State, Zip Code Brick, NJ 08723							
Project Manager for Monitoring Firm		Telephone No. 7328997499	License No. 01196						
Start Date (10) 7 / 1 / 26	Scheduled Completion Date (11) 7 / 2 / 26	Name of OSHA Monitor AZ Solution Consulting							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____ AM - ____ PM / ____ PM - ____ AM		Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662							
Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) 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) 1000SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior	☐	☐	☐	Siding		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Brick Industries, Inc.		NJDEP Waste Hauler ID No. 21602	Cubic Yards of Waste 4	Name of Registered Landfill Fairless Landfill					
City, State Brick, NJ		Disposal Date 7/3/26		City, State Morrisville, PA					
Completed By (Print or Type) Eric Plackis		Title President		Signature 			Date 6/30/26		

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

Date of Notification (1) 6 / 16 / 26		Name of Building Owner/Operator (2) RECEIVED							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # ☒ Emergency (including justification) ☐ Cancellation	Street Address 36 Olden Lane JUL 14 2026 City, State, Zip Code Princeton, NJ 08540 Name of Contact Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 36 Olden Lane		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
City (5) Princeton	Square Feet 1600	# of Floors 2	Bldg. Age 92						
County (6) Mercer	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	License No. 01196						
Start Date (10) 6 / 17 / 26	Scheduled Completion Date (11) 6 / 18 / 26		Name of OSHA Monitor AZ Solution Consulting						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 27 Susquehanna Ave City, State, Zip Code Rochelle Park, NJ 07662							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ 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) 10LF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Hallway	☐	☐	☐	Duct wrap		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
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 6/19/26	City, State Morrisville, PA						
Completed By (Print or Type) Eric Plackis		Title President	Signature 				Date 6/16/26		

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

RECEIVED

Date of Notification (1) 7/9/26		Name of Building Owner/Operator (2) JUL 14 2026							
Agencies Notified	Type Notification	Street Address 42 Sunset Pl.							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Bergenfield, NJ 07621							
		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 42 Sunset Pl.		Square Feet 2100	# of Floors 2						
City (5) Bergenfield		Bldg. Age 60 +/-							
County (6) Bergen	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Residential Home							
Name of Monitoring Firm Hired by Building Owner (8) Project Manager		ASCM No.	Name of Abatement Contractor (9) All Stages Abatement						
Street Address		Street Address 55 Cannonball Rd.							
City, State, Zip Code		City, State, Zip Code Pompton Lakes, NJ 07442							
Project Manager for Monitoring Firm		Telephone No. 201-600-3184	License No. 01305						
Start Date (10) 7/10/26	Scheduled Completion Date (11) 7/13/26	Name of OSHA Monitor Same As Above							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 8 A.M to 4 P.M		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		X		VAT	317 SF	X			
Name of Registered Waste Hauler All Stages Abatement		NJDEP Waste Hauler ID No. 0036592	Cubic Yards of Waste 4 YD	Name of Registered Landfill Chrin Brothers Sanitary Landfill					
City, State Pompton Lakes, NJ		Disposal Date TBD		City, State Easton, PA					
Completed by Richard Cristofol		Title President		Signature 			Date 7/9/26		

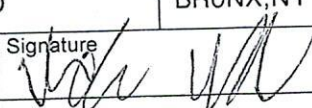
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

1942
 CLK# 1942

Date of Notification (1) 7/8/2026		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 Carol Rd.		City, State, Zip Code Middletown, NJ 07748						
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 45 Carol Rd.		Square Feet 2,081	# of Floors 2					
City (5) Middletown, NJ 07748		Bldg. Age 1955						
County (6) Monmouth	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) DANVIC CONTRACTING LLC						
Street Address		Street Address 240 South 5th St.						
City, State, Zip Code		City, State, Zip Code Elizabeth, NJ 07206						
Project Manager for Monitoring Firm		Telephone No. 908-906-4123	License No. 01355					
Start Date (10) 7/11/2026	Scheduled Completion Date (11) 7/17/2026	Name of OSHA Monitor Iris Environmental Laboratories, Inc.						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 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) 312 SF	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Ground Floor Family Room			X	Double Layer VAT/Black Mastic	X			
Name of Registered Waste Hauler Danvic Contracting LLC		NJDEP Waste Hauler ID No. 37574	Cubic Yards of Waste TBD	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth, NJ		Disposal Date TBD		City, State Morrisville, PA				
Completed by Jeymy Donneys		Title Owner	Signature <i>Jeymy Donneys</i>		Date 7/8/2026			

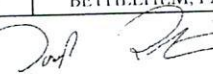
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 07/09/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 23 Marion Rd							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Montvale, NJ. 07645							
		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 23 Marion Rd		Square Feet N/A	# of Floors N/A						
City (5) Montvale		Bldg. Age N/A							
County (6) Bergen	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) PRIVATE HOUSE							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) EHW ABATEMENT LLC						
Street Address		Street Address 89 FRANKLIN STREET							
City, State, Zip Code		City, State, Zip Code PATERSON, NJ. 07524							
Project Manager for Monitoring Firm		Telephone No. 973-333-5144	License No. 01274						
Start Date (10) 07/13/2026	Scheduled Completion Date (11) 07/15/2026	Name of OSHA Monitor EHW ABATEMENT LLC							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: OCCUPIED		Street Address 89 FRANKLIN STREET							
		City, State, Zip Code PATERSON, NJ. 07524							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) In Facility (13)	Is Location Normally Used Solely by Maintenance/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	380 SF	X			
Name of Registered Waste Hauler EHW ABATEMENT LLC		NJDEP Waste Hauler ID No. 0037095		Cubic Yards of Waste TBD	Name of Registered Landfill TRI STATE TRANSFER				
City, State PATERSON, NJ		Disposal Date TBD		City, State BRONX, NY					
Completed by VICTOR ESPIRITU		Title project manager		Signature 		Date 07/08/2026			

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

RECEIVED

Date of Notification (1) 07/08/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 11 Little Lane							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Barrington NJ 08007							
		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 11 Little Lane		Square Feet	# of Floors						
City (5) Barrington		Bldg. Age							
County (6) Camden	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) AAA Lead Professionals						
Street Address		Street Address 6 White Dove Court							
City, State, Zip Code		City, State, Zip Code Lakewood, NJ, 08701							
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 732-719-5649	License No. 1200						
Start Date (10) 07/13/2026	Scheduled Completion Date (11) 07/13/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Interior				Floor Tile	25 SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 3	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/13/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 			Date 07/08/2026			

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

B & G Project # 2026-92

Check # 13764

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) Caldwell - West Caldwell Public Schools		RECEIVED					
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 104 Gray Street City, State, Zip Code West Caldwell, NJ 07006 Name of Contact Brian McCarthy					
				Telephone Number 973-378-9651					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Grover Cleveland Middle 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 36 Academy Road				Square Feet 50,000+					
City (5) Caldwell, NJ 07006				# of Floors 3					
County (6) Essex				Bldg. Age 100+					
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) educational - Sub 8							
Name of Monitoring Firm Hired by Building Owner (8) Westchester Environmental, LLC.		ASCM No. 00127		Name of Abatement Contractor (9) B & G Restoration, Inc.					
Street Address 1248 Wrights Lane		Street Address 1234 Route 23							
City, State, Zip Code West Chester, PA 19380		City, State, Zip Code Butler, NJ 07405							
Project Manager for Monitoring Firm Philip Conteh		Telephone No. 610-431-7345		Telephone No. 973-696-6869					
License No. 00378									
Start Date (10) 07/06/2026		Scheduled Completion Date (11) 07/13/2026		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: _____				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
basement	X			pipe and pipe fitting insulation	40 LF	X			
basement boiler room	X			pipe fitting	5 fittings	X			
basement tunnel entrance	X			pipe fitting insulation	10 LF	X			
1st floor stairwell behind stage			X	pipe fitting insulation	12 LF	X			
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 07/06/2026-07/13/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature Gordana Luna		Date 06/26/2026			

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

Date of Notification (1) 7 / 6 / 26		Name of Building Owner/Operator (2) Transcontinental Gas Pipe Line		Job # 2607-6595 Check #18044					
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 #35220				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 15 Atlantic Avenue				Square Feet					
City (5) Lawnside				# of Floors					
County (6) Camden				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.		Telephone No. 609-265-2107					
Start Date (10) 7 / 15 / 26		Scheduled Completion Date (11) 7 / 16 / 26		License No. 00529					
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 IATL Analytical					
				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	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Dig #35220	☐	☐	☒	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 7/16/26		City, State Morrisville, PA 19067					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature <i>gmt</i>			Date 7-4-26		

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

Date of Notification (1) 6 / 25 / 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 irvington 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 9 Coit Street		Square Feet	# of Floors 3
City (5) Irvington		Bldg. Age +75	
County (6) Essex	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Verizon	
Name of Monitoring Firm Hired by Building Owner (8) RBS Environmental		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC
Street Address 24 Veterans Square		Street Address 1123 BEAVER STREET	
City, State, Zip Code Media, PA 19063		City, State, Zip Code BRISTOL, PA 19007	
Project Manager for Monitoring Firm Mike Stocku		Telephone No. 609-304-3969	Telephone No. 215-788-6040
License No. 02121		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC	
Start Date (10) 7 / 13 / 26	Scheduled Completion Date (11) 7 / 30 / 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 5PM-1AM	
Street Address 1123 BEAVER STREET		City, State, Zip Code BRISTOL, PA 19007	
Scope of Work (Check all that apply)			
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
Basement Future Tank Room	☐	☐	☒
Basement Future Tank Room	☐	☐	☒
Basement Hallway	☐	☐	☒
	☐	☐	☐
Amount (Specify SF or LF) 350 LF		Abatement Type	
		Removal	Repair
		Encapsulate	Enclosure
Basement Future Tank Room		☒	☐
Basement Future Tank Room		☒	☐
Basement Hallway		☐	☒
		☐	☐
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste
City, State Freehold NJ		Disposal Date TBD	Name of Registered Landfill Conestoga Landfill
City, State Morgantown, PA		Signature <i>Dellon DeCaro</i>	
Completed By (Print or Type) Dillan DeCaro		Title Estimator	Date 6/25/26

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

Check # 4671

Date of Notification (1) 6 / 25 / 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 # _____ ☐ 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) 7 / 29 / 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: <u>7AM-330PM</u> / ____ PM - ____ AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
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 6/25/26			

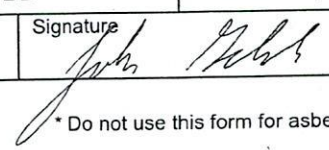
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 06/26/26		Name of Building Owner/Operator (2) St Henrys church		JUL - 7 2026					
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☒ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 625 Avenue C City, State, Zip Code Bayonne NJ 07002 Name of Contact Reverend Raul Gaviola Telephone Number 2014360857					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Busy Bees Pre K School				Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 625 Avenue C				Square Feet 88500	# of Floors 3				
City (5) Bayonne				Bldg. Age 130					
County (6) Hudson		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Educational Day care					
Name of Monitoring Firm Hired by Building Owner (8) McCabe Environmental Services LLC		ASCM No. 00118		Name of Abatement Contractor (9) JCR Management Specialist LLC					
Street Address 464 Valley Brook Avenue				Street Address 306 Victor PI					
City, State, Zip Code Lyndhurst NJ 07071				City, State, Zip Code Neptune NJ 07753					
Project Manager for Monitoring Firm Gary Clare		Telephone No. 2018356902		Telephone No. 7327591871	License No. 02087				
Start Date (10) 07/06/26		Scheduled Completion Date (11) 07/24/26		Name of OSHA Monitor JCR Management Specialist 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: M-sat 0700 -2400hrs as needed				Street Address 306 Victor PI					
				City, State, Zip Code Neptune NJ 07753					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <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			xx	Plaster Ceiling	150sf	xx			
2nd floor classrooms			xx	Plaster Ceilings	4500sf	xx			
Name of Registered Waste Hauler Century Waste		NJDEP Waste Hauler ID No. 482653		Cubic Yards of Waste 80	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth NJ				Disposal Date 07/25/26	City, State Morrisville Pa				
Completed by John C Riley			Title Owner	Signature <i>John Riley</i>			Date 06/26/26		

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

RECEIVED

Date of Notification (1) 7/2/2026		Name of Building Owner/Operator (2) Oakland Board of Education									
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation									
Street Address 315 Ramapo Valley Road		City, State, Zip Code Oakland, NJ 07436									
Name of Contact Joe Tumminia		Telephone Number 973-390-7433									
FACILITY INFORMATION											
Name of Facility Where Abatement is Taking Place (3) Manito 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 111 Manito Avenue		Square Feet									
City (5) Oakland		# 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) Karl Environmental Group		ASCM No.									
Name of Abatement Contractor (9) Academy Construction Inc		Street Address 7 East Garden Place									
Street Address 20 Lauk Road		City, State, Zip Code Pompton Plains, NJ 07444									
City, State, Zip Code Mohnton, PA 19540		Telephone No. 973 832 4244									
Project Manager for Monitoring Firm Angela Meas		License No. 01379									
Telephone No. 610-856-7700		Name of OSHA Monitor Same as above									
Start Date (10) 7/6/26		Scheduled Completion Date (11) 7/10/26									
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		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			
								Removal	Repair	Encapsulate	Enclosure
Boys and Girl Bathroom Chase		X		TSI		9lf		X			
Name of Registered Waste Hauler Academy Construction Inc		NJDEP Waste Hauler ID No. 0034422		Cubic Yards of Waste 1 cuyd		Name of Registered Landfill Fairless Landfill					
City, State Pompton Plains, NJ		Disposal Date TBD		City, State Morrisville, PA							
Completed by John Geleski		Title Supervisor		Signature 				Date 7/2/26			

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

Date of Notification (1) 7/6/26		Name of Building Owner / Operator (2) Pitman School District		RECEIVED	
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☒ Emergency ☐ Cancellation		Street Address 320 Grant Ave City, State & Zip Code Pitman, NJ 08071 Name of Contact Christopher DeStratis Telephone Number 856-589-2145	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Pitman ES Street Address 138 E Holly Ave City (5) Pitman County (6) Gloucester County Code (7)			Type of Facility (4) ☒ School (K-12) NON SUBCHAPTER 8 ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.) Square Feet 150,000 # of Floors 1 Bldg. Age 40+ Current Use (Prior if being demolished) School		
Name of Monitoring Firm Hired by Building Owner (8) Epic Environmental Services, LLC Street Address 80 Fork Bridge Road City, State & Zip Code Pittsgrove, NJ 08318 Project Manager for Monitoring Firm Jim Eberts Telephone Number 856-889-1736		ASCM No.		Name of Abatement Contractor (9) Bristol Environmental, Inc. Street Address 1123 Beaver Street City, State & Zip Code Bristol, PA 19007 Telephone Number (215)788-6040 License Number 02121	
Scheduled Start Date (10) 7/6/26		Scheduled Completion Date (11) 7/10/26		Name of OSHA Monitor Bristol Environmental LLC Street Address 1123 Beaver Street City, State & Zip Code Bristol, PA 19007	
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Hours - 7am to 3pm Describe: 4:00 PM to 1:00 AM ☐ Facility Occupied During Abatement					
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) 205 Hallway, 103 Hallway, Low Level Hallway, Rms 2B, 3A, 3B and 4		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) Debris cleanup of surfaces Amount (Specify SF or LF) 6000 SF	
		☐ ☐ ☐		☒ ☐ ☐ ☐	
		☐ ☐ ☐		☐ ☐ ☐ ☐	
		☐ ☐ ☐		☐ ☐ ☐ ☐	
		☐ ☐ ☐		☐ ☐ ☐ ☐	
		☐ ☐ ☐		☐ ☐ ☐ ☐	
Name of Registered Waste Hauler Freehold Cartage City, State Freehold, NJ		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 8 Cu Yd Disposal Date 7/10/26	
Completed By (Print or Type) Gino Pizzigoni		Title Project Manager		Name of Registered Landfill Conestoga Landfill City, State Morgantown, PA Signature <i>Gino Pizzigoni</i> Date 7/6/26	

6126098

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

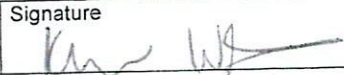
Date of Notification (1) 7/08/2026		Name of Building Owner/Operator Fort Lee BOE	
Agencies Notified ☒ EPA ☐ DCA ☒ DOL ☐ DEP ☒ DOH	Notification Type ☐ Initial Notification ☐ Amended #1 ☒ Emergency notification (including justification) ☐ Cancelled		Street Address 231 Maine Street
			City, State, Zip Code Fort Lee NJ 07024
		Name of Contact David Cabrera	Telephone Number 551-204-0437
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) SCHOOL # 1		Type of Facility (4)x ☐ School (K-12) Subchapter 8 ☒ Subchapter 8 (other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Approximately 57,800 # of Floors: 2 Bldg. Age: 1951 Current Use (prior if being demolished): School	
Street Address 250 Hoym Street			
City (5) Fort Lee NJ 07024	County (6) Bergen	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner Karl & Associates LLC		ASCM No.	Name of Contractor (9) BL Contracting Inc.
Street address PO Box 646		Street Address 5 Marguerite Lane	
City State & zip code Shillington PA 19670		City State, Zip Code Towaco NJ 07082	
Project Manager for Monitoring Firm Ed Karl	601-698-3308	Telephone Number 973-901-0153	License Number 01265
Scheduled Start Date (10) 7/10/2026	Scheduled Completion Date 7/14/2026	Name of OSHA Monitoring BL Contracting Inc	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Facility occupied During Abatement ☒ Other - Describe: Monday - Saturday 7 am - 4pm		Street Address 5 Marguerite Lane	
		City, State, Zip Code Towaco NJ 07082	
Source of Work (Check all that apply) ☒ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Wrap & Cut Procedure ☐ Full Containment ☐ Tent & 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)
Wood Shop Basement Room 7	☒	Removal Floor Tile & Mastic	800 SF
Basement Room 8	☒	Removal Floor Tile & Mastic	800 SF
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 7/30/2026	City, State Tully town, PA
Completed by (Print or Type) Nedo Vasilic	Title Project Manager	Signature <i>Nedo Vasilic</i>	Date 7/08/2026

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

add'l
checks

Date of Notification (1) 6 / 5 / 26		Name of Building Owner/Operator (2) East Windsor Regional School District Job #2512-6521 Check #18006							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 25 A Leshin Lane City, State, Zip Code Hightstown, NJ 08520 Name of Contact Business Administration Telephone Number 609-443-7717							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Walter Black ES		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 371 Stockton Street		Square Feet							
City (5) Hightstown		# of Floors							
County (6) Mercer		Bldg. Age							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Horizon Environmental Group		ASC No.							
Street Address PO Box 316		Name of Abatement Contractor (9) AbateTech, Inc.							
City, State, Zip Code Thorofare, NJ 08086		Street Address 30 Maple Ave. PO Box 25							
Project Manager for Monitoring Firm Steve Flanigan		City, State, Zip Code Lumberton, NJ 08048							
Telephone No. 856-848-0800		Telephone No. 609-265-2107							
License No. 00529		Name of OSHA Monitor IATL							
Start Date (10) 6 / 29 / 26		Scheduled Completion Date (11) 7 / 17 / 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
Room 207, 209-213	☐	☒	☐	Floor tile & Mastic	4,500 SF	☒	☐	☐	☐
Hallway	☐	☒	☐	Pipe Insulation	250 LF	☒	☐	☐	☐
Throughout	☐	☒	☐	Ceiling/Door transite panels	625 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750		Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill				
City, State Lumberton, NJ		Disposal Date 7/17/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.		Signature			Date		

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

Date of Notification (1) 7 / 8 / 26		Name of Building Owner/Operator (2) JCP&L/FirstEnergy Company / Job #2607-6596 Check #18047							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address JCP&L Operations							
		City, State, Zip Code Central NJ Regions							
		Name of Contact Michael Romano	Telephone Number 856-206-7302						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) JCPL Hyson Substation		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address Cpl. Luigi Marcianite Jr. Memorial Dr.		Square Feet	# of Floors						
City (5) Jackson Twp, NJ 08527		Bldg. Age							
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Substation							
Name of Monitoring Firm Hired by Building Owner (8) Colden Corporation		ASCM No.	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address 630 Sentry Parkway, Suite 110		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Bluebell, PA 19422		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Brian Hovendon		Telephone No. 732-539-7942	License No. 00529						
Start Date (10) 7 / 09 / 26	Scheduled Completion Date (11) 7 / 10 / 26	Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 9000 Commerce Parkway 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) 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
Electrical Cabinet	☒	☐	☐	Asbestos Putty	6 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 4	Name of Registered Landfill Fairless Landfill					
City, State Lumberton, NJ		Disposal Date 7/10/26		City, State Morrisville, PA					
Completed By (Print or Type) Keri White		Title Controller		Signature 			Date 7/8/26		

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

B & G Project # 2026-107

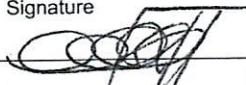
Check #

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RECEIVED

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

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

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Date of Notification (1) 06/22/2026		Name of Building Owner/Operator (2) TTL SERVICES LLC		JUL - 7 2026	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☒ Cancellation		Street Address 733 9th st	
		City, State, Zip Code Carlstadt NJ 07072		ASBESTOS CONTROL & LICENSING	
		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 733 9th st			Square Feet		
City (5) Carlstadt			# 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) E & V Services LLC	
Street Address		Street Address 711 Sip Street			
City, State, Zip Code		City, State, Zip Code Union City NJ 07087			
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201-875-7290	
Start Date (10) 06/26/2026		Scheduled Completion Date (11) 07/15/2026		License No. 02053	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:			Name of OSHA Monitor		
			Street Address		
			City, State, Zip Code		
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf					
		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	
EXTERIOR		X		TRANSITE	
				820 SF	
				X	
Name of Registered Waste Hauler TRISTATE TRANSFER INC		NJDEP Waste Hauler ID No. 24-1129		Cubic Yards of Waste 2	
City, State BRONX NY 10474		Disposal Date		Name of Registered Landfill MINERVA ENTERPRISES LLC	
Completed by Angel Penaherrera		Title Owner		Signature 	
				Date 06/15/2026	

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

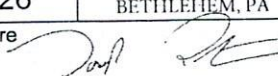
RECEIVED

Date of Notification (1) 06/23/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	8 Parker Road, City, State, Zip Code Morristown, NJ 07960							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) residential		Type of Facility (4)							
Street Address 8 Parker Road,		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Morristown	Square Feet 3,000	# of Floors 2	Bldg. Age 73						
County (6) Morris	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) 06/24/2026		Scheduled Completion Date (11) 06/24/2026							
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)		Name of OSHA Monitor							
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Porch		✓		ACM paint/Sheetrock	125 SF	✓			
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill					
Acme Professional Services Corp		0038176	.5	Fairless Landfill					
City, State Kinnelon, NJ		Disposal Date 06/24/2026		City, State Morrisville, PA					
Completed by Samantha Zamora		Title Project Coordinator	Signature Samantha Zamora			Date 06/23/2026			

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

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JUL - 7 2026

Date of Notification (1) 06/24/2026		Name of Building Owner/Operator (2)	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	
Street Address 383 Brighton Ave		City, State, Zip Code Long Branch NJ 07740	
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 383 Brighton Ave		Square Feet	
City (5) Long Branch		# of Floors	
County (6) Monmouth		Bldg. Age	
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	
Street Address		Name of Abatement Contractor (9) AAA Lead Professionals	
City, State, Zip Code		Street Address 6 White Dove Court	
Project Manager for Monitoring Firm		City, State, Zip Code Lakewood, NJ, 08701	
Telephone No.		Telephone No. 732-719-5649	
License No. 1200		Start Date (10) 07/03/2026	
Scheduled Completion Date (11) 07/06/2026		Name of OSHA Monitor AAA Lead Professionals	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe:		Street Address 6 White Dove Court	
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code Lakewood, NJ, 08701	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	
Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF)	
Abatement Type Removal Repair Encapsulate Enclosure		Interior	
Pipe Insulation		180LF	
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No 35103	
Cubic Yards of Waste 2		Name of Registered Landfill IESI	
City, State Lakewood, NJ		Disposal Date 07/06/2026	
City, State BETHLEHEM, PA		Completed by JOSEPH PERLSTEIN	
Title OWNER		Signature 	
Date 06/24/2026			

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

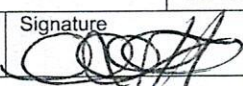
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Date of Notification (1) <u>6/21/2026</u>		Name of Building Owner/Operator (2) <u>JUL 7 2026</u>							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address <u>510 Grandview</u> City, State, Zip Code <u>Pitman, NJ 08071</u> Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) <u>Residence</u>		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private 8 commercial buildings, homes, etc.)							
Street Address <u>510 Grandview</u>		Square Feet <u>1900sf</u>	# of Floors <u>2</u>						
City (s) <u>Pitman, NJ 08071</u>		Bldg. Age <u>45 yrs</u>							
County (6) <u>Gloucester</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)		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) <u>7/1/26</u>		Scheduled Completion Date (11) <u>7/12/26</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: _____		Name of OSHA Monitor <u>AEI2, LLC</u>							
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	Encapsulation	Enclosure
Attic			X	Duct	40 LF	X			
Name of Registered Waste Hauler <u>TBD</u>		NJDEP Waste Hauler ID No. <u>TBD</u>	Cubic Yards of Waste <u>5</u>	Name of Registered Landfill <u>TBD</u>					
City, State <u>TBD, NJ</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>6/21/26</u>			

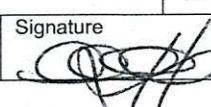
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 06/30/2026		Name of Building Owner/Operator (2) 1915 Bergenline LLC							
Agencies Notified	Type Notification	Street Address 1915 Bergenline Ave							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Union City NJ 07087							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
Street Address 1915 Bergenline Ave		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Union City		Square Feet	# of Floors						
County (6) Hudson		County Code (7) (STATE USE ONLY) _____	Bldg. Age						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) E & V Services LLC						
Street Address		Street Address 711 Sip Street							
City, State, Zip Code		City, State, Zip Code Union City NJ 07087							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 201-875-7290						
			License No. 02053						
Start Date (10) 07/14/2026	Scheduled Completion Date (11) 07/25/2026		Name of OSHA Monitor						
Occupancy Status During Abatement (Check Only One)			Street Address						
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other – Describe: _____			City, State, Zip Code						
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☒ Renovation ☐ Demolition									
☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
INTERIOR		X		PIPE INSULATION	15 IF	X			
Name of Registered Waste Hauler TRISTATE TRANSFER INC		NJDEP Waste Hauler ID No. 24-1129	Cubic Yards of Waste 2	Name of Registered Landfill MINERVA ENTERPRISES LLC					
City, State BRONX NY 10474		Disposal Date		City, State WAYNESBURG OH 44688					
Completed by Angel Penaherrera		Title Owner	Signature 			Date 06/30/2026			

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

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Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2)			
Agencies Notified		Type Notification		Street Address	
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		133 Mountain Rd City, State, Zip Code Jersey City NJ 07307 Name of Contact _____ Telephone Number _____	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3)				Type of Facility (4)	
Street Address 133 Mountain Rd				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
City (5) Jersey City				Square Feet	# of Floors
County (6) Hudson				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				E & V Services LLC	
City, State, Zip Code				Street Address 711 Sip Street	
Project Manager for Monitoring Firm		Telephone No.		City, State, Zip Code Union City NJ 07087	
Start Date (10) 07/10/2026		Scheduled Completion Date (11) 07/16/2026		Telephone No. 201-875-7290	
Occupancy Status During Abatement (Check Only One)				License No. 02053	
☐ 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)
	Yes	No	N/A		
INTERIOR		X		FLOOR TILE	30 SF
Name of Registered Waste Hauler TRISTATE TRANSFER INC		NJDEP Waste Hauler ID No. 24-1129		Cubic Yards of Waste 2	Name of Registered Landfill MINERVA ENTERPRISES LLC
City, State BRONX NY 10474		Disposal Date		City, State WAYNESBURG OH 44688	
Completed by Angel Penaherrera		Title Owner		Signature 	Date 06/26/2026

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 / 01 / 26		Name of Building Owner/Operator (2) Jacobs Environmental Services						
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 516 Manasquan Court						
		City, State, Zip Code Brick, NJ 08724						
		Name of Contact _____ Telephone Number _____						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)						
Street Address 1809 Atlantic Avenue		Square Feet 2400						
City (5) Manasquan		# of Floors 1	Bldg. Age 80					
County (6) Monmouth		County Code (7)(STATE USE ONLY) Residence						
Name of Monitoring Firm Hired by Building Owner (8) Guardian Contracting, Inc.		Name of Abatement Contractor (9) Guardian Contracting, Inc.						
Street Address 1889 Route 9, Unit 61		Street Address 1889 Route 9, Unit 61						
City, State, Zip Code Toms River, New Jersey 08755		City, State, Zip Code Toms River, New Jersey 08755						
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone No. 732-349-9932	License No. 00624					
Start Date (10) 07 / 23 / 26	Scheduled Completion Date (11) 07 / 31 / 26		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) 4800 sf	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
interior	☐	☒	☐	asbestos containing sheetrock	☒	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 60	Name of Registered Landfill Fairless Landfill				
City, State Toms River, New Jersey		Disposal Date 07/31/26		City, State Morrisville, Pennsylvania				
Completed By (Print or Type) Nicholas Fernicola	Title Project Manager		Signature 		Date 7/1/26			

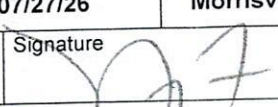
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

4367329
RECEIVED
50438
JUL - 6 2026

Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) Mattia Building Contracting							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 515 Fischer Blvd.							
		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 113 Jaynes Avenue		Square Feet 2000	# of Floors 2						
City (5) Island Heights		Bldg. Age 70							
County (6) Ocean	County Code (7)(STATE USE ONLY)		Current Use (Prior if being demolished) Residence						
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) Guardian Contracting, Inc.						
Street Address		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm		Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 08 / 17 / 26	Scheduled Completion Date (11) 08 / 21 / 26	Name of OSHA Monitor E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 1056 Stelton							
		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) 3000 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 08/21/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/1/26		

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

4367328
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Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) Mattia Building Contracting						
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 515 Fischer Blvd.						
		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 2524 Matso Drive		Square Feet 1200	# of Floors 1					
City (5) Toms River		Bldg. Age 70						
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Residence						
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) Guardian Contracting, Inc.					
Street Address		Street Address 1889 Route 9, Unit 61						
City, State, Zip Code		City, State, Zip Code Toms River, New Jersey 08755						
Project Manager for Monitoring Firm		Telephone No. 732-349-9932	License No. 00624					
Start Date (10) 07 / 24 / 26	Scheduled Completion Date (11) 07 / 27 / 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) 1200 sf	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
exterior	☐	☒	☐	asbestos siding	☒	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill				
City, State Toms River, New Jersey		Disposal Date 07/27/26	City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager	Signature 			Date 7/1/26		

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

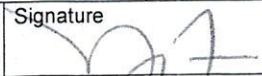
B & G Project # 2026-100C

Check #

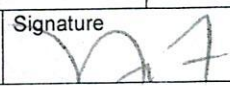
Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) 777 West Park Avenue LLC	
Agencies Notified	Type Notification	Street Address 100 Woodbridge Center Drive, Suite 301	
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Woodbridge, NJ 07095	
		Name of Contact	Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) residential structure		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 24 Kirkpatrick Street		Square Feet	# of Floors
City (5) New Brunswick, NJ 08901		Bldg. Age	
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) residential structure	
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9)	
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Project Manager for Monitoring Firm		Telephone No.	License No.
Start Date (10) 07/16/2026		Scheduled Completion Date (11) 07/24/2026	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 1234 Route 23	
		City, State, Zip Code Butler, NJ 07405	
Scope of Work (Check All That Apply)		☐ Wrap and Cut ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
Exterior		X	Window Caulking & roofing
1st floor kitchen / storage room		X	VAT & mastic
2nd floor & 3rd Floor		X	Vat & mastic
Basement & boiler room	X		VAT & mastic & flue packing
Name of Registered Waste Hauler B & G Restoration Inc.	NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 45	Name of Registered Landfill Grand Central Landfill
City, State Butler, NJ		Disposal Date 07/16/26 - 07/24/26	City, State Pen Argyl, PA
Completed by Gordana Luna	Title Secretary / Treasurer	Signature <i>Gordana Luna</i>	Date 07/02/2026

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

4367326

Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) CMM Construction							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 1551 Highway 138, Suite 1		City, State, Zip Code Wall Twp., NJ 07719							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence rear garage		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 1114 5th Avenue		Square Feet 1000	# of Floors 2						
City (5) Asbury Park		Bldg. Age 125							
County (6) Monmouth	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Residence							
Name of Monitoring Firm Hired by Building Owner (8) Guardian Contracting, Inc.		Name of Abatement Contractor (9) Guardian Contracting, Inc.							
Street Address 1889 Route 9, Unit 61		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code Toms River, New Jersey 08755		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Nicholas Fernicola	Telephone No. 732-349-9932	Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 07 / 17 / 26	Scheduled Completion Date (11) 07 / 31 / 26	Name of OSHA Monitor E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____AM-_____PM/_____PM-_____AM		Street Address 1056 Stelton							
		City, State, Zip Code Piscataway, New Jersey 08854							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 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	☐	☒	☐	asbestos floor tile	250 sf	☒	☐	☐	☐
under stairs	☐	☒	☐	wrap lining	50 sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 1	Name of Registered Landfill Fairless Landfill					
City, State Toms River, New Jersey		Disposal Date 07/31/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 			Date 7/1/26		

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

Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) CMM Construction		RECEIVED 50934 JUL - 6 2025					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 1551 Highway 138, Suite 1 City, State, Zip Code Wall Twp., NJ 07719 Name of Contact _____ Telephone Number _____					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence Front House				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 1114 5th Avenue				Square Feet 4000 # of Floors 3 Bldg. Age 125					
City (5) Asbury Park		County (6) Monmouth		County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Residence					
Name of Monitoring Firm Hired by Building Owner (8) Guardian Contracting, Inc.		ASCM No. _____		Name of Abatement Contractor (9) Guardian Contracting, Inc.					
Street Address 1889 Route 9, Unit 61		Street Address 1889 Route 9, Unit 61							
City, State, Zip Code Toms River, New Jersey 08755		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone No. 732-349-9932		Telephone No. 732-349-9932 License No. 00624					
Start Date (10) 07 / 17 / 26		Scheduled Completion Date (11) 07 / 31 / 26		Name of OSHA Monitor E.M.S.L. Analytical					
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM - _____ PM / _____ PM - _____ AM				Street Address 1056 Stelton City, State, Zip Code Piscataway, New Jersey 08854					
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 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 & 3rd floor	☐	☒	☐	asbestos containing plaster	5000 sf	☒	☐	☐	☐
back foyer	☐	☒	☐	asbestos floor tile	150 sf	☒	☐	☐	☐
3rd floor kitchen	☐	☒	☐	linoleum	60 sf	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Hauler ID No. 20223		Cubic Yards of Waste 60	Name of Registered Landfill Fairless Landfill				
City, State Toms River, New Jersey		Disposal Date 07/31/26		City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager		Signature 		Date 7/1/26			

Split
7/10/83

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

Date of Notification (1) JUNE 30 - 24		Name of Building Owner/Operator (2) Mid Atlantic Holding Corp.							
Agencies Notified	Type Notification	Street Address PO B 25							
☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Somerville MA 02143							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
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 204 N Sacramento Ave		Square Feet 1800	# of Floors 2						
City (5) Ventnor		Blgd. Age 70							
County (6) Atlantic		County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Resident						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) Ans. Joe Abatement Construction LLC						
Street Address		Street Address 1212 Burlington Ave							
City, State, Zip Code		City, State, Zip Code Asheboro NJ 07805							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 609-346-5916						
		License No. 01070							
Start Date (10) 7-10-24	Scheduled Completion Date (11) 7-30-24	Name of OSHA Monitor Self							
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)									
☐ < 50 sf or < 15 ft ☒ ≥ 160 sf or ≥ 250 ft		☐ 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	NA			Removal	Repair	Encapsulation	Enclosure
Outside			☒	ACM Sealing	2000 SF				
10 of Registered Waste Hauler Can Man		NJDEP Waste Permit No.	Cubic Yards of Waste	Name of Registered Landfill					
State Egg Harbor Twp. NJ		Disposal Date 7/30	City, State						
Signed by [Signature]		Signature [Signature]		Date					

* Do not use this form for asbestos licensure exempted activities

split
1083

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

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Date of Notification (1) 6-30-26		Name of Building 7133 Vandike St							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # ☐ Emergency (including justification) ☐ Cancellation	7133 Vandike St City, State, Zip Code Phillips PA 19135							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Resident		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 203 N. Sacramento Ave		Square Feet 1800	# of Floors 2						
City (5) Ventnor		Blade Age 70							
County (6) Atlantic	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Resident							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) Am. Ice Abatement Restoration LLC						
Street Address		Street Address 1212 Burlington Ave							
City, State, Zip Code		City, State, Zip Code Asheboro NJ 28605							
Project Manager for Monitoring Firm		Telephone No. 657-346-1916	License No. 01070						
Start Date (10) 7-9-26	Scheduled Completion Date (11) 7-30-26	Name of OSHA Monitor Se. J. F.							
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)									
☐ 25 sf or 25 lf ☒ ≥160 sf or ≥250 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/Construction 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	Encapsulation	Enclosure
Outside			✓	ACM Siding	2000 SF ✓				
Name of Registered Waste Hauler Can Man		NJDEP Waste (Permit - if) No. 130	Cubic Yards of Waste	Name of Registered Landfill Atlantic County					
State Egg Harbor Twp NJ		Disposal Date 130	City, State Atlantic NJ						
Signed for T. Hill		Date 6-30-26	Signature [Signature]						

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5038



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4/36/187

RECEIVED Print Form

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

HMD 25-227 JUL - 6 2026

Date of Notification (1) 7/3/2026		Name of Building Owner/Operator (2) West New York Board of Education Ck#5038							
Agencies Notified	Type Notification	Street Address 6028 Broadway							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code West New York, NJ 07093							
		Name of Contact Israel Fuentes	Telephone Number 201-553-4000						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Public School #4 Annex		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 317 66th Street		Square Feet 85,000+	# of Floors 3						
City (5) West New York		Bldg. Age 65+							
County (6) Hudson	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) McCabe Environmental Services, L.L.C.		ASCM No.	Name of Abatement Contractor (9) Hazmat Diagnostic, LLC						
Street Address 464 Valley Brook Ave.		Street Address 16 Glenwild Ave							
City, State, Zip Code Lyndhurst, NJ 07071		City, State, Zip Code Bloomingdale, NJ 07403							
Project Manager for Monitoring Firm John H. Chiaviello		Telephone No. (800) 423-0766	Telephone No. 973-928-3995						
License No. 01181									
Start Date (10) 7/14/2026	Scheduled Completion Date (11) 8/30/2026	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: Occupied: 7:00 AM - 3:30 PM / 24 HRS if necessary		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 ☒ 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
Room 201			X	Two-Coat Wall and Ceiling Plaster	60 SF	x			
Room 202			X	Two-Coat Wall and Ceiling Plaster	120 SF	x			
Storage Room adjacent to Room 202, Girls Restroom, and Hallway adjacent to Room 202			X	Two-Coat Wall and Ceiling Plaster	75 SF	x			
Room 203			X	Two-Coat Wall and Ceiling Plaster	60 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 Deni Naumovski			Date 7/3/2026			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
Continuation Sheet

[illegible]

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) June 29, 2026		Name of Building Owner/Operator (2) Rutgers, The State University of New Jersey	
Agencies Notified EPA DCA x DOL DEP x DOH		Notification Type ☐ Initial Notification ☒ Amended Notification #4 - New Completion Date and Work Areas (plus 2 more over ~160SF) and Quantities ☐ Emergency (including justification) ☐ Cancelled	
Street Address REHS 74 St 1603		City, State, Zip Code Piscataway NJ 08854	
Name of Contact Michael F. Smith		Telephone Number 848.445.2550	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) # 7257- Medical Science Bldg.		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Unknown # of Floors: 8 Bldg. Age: 80 plus years	
Street Address RBHS Newark Campus		Current Use (prior if being demolished):	
City (5) Newark	County (6) Essex	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner (8) Atlas Tech Services		ASCM No. 0098	
Street Address 3 Terri Lane		Street Address 511 MAIN STREET	
City, State, Zip Code Burlington NJ 08016		City, State, Zip Code Butler, NJ 07405	
Project Manager for Monitoring Firm John Lutz	Telephone Number 609-386-8800	Telephone Number 973-492-0477	License Number 00840
Scheduled Start Date (10) 5/8/2026	Scheduled Completion Date (11) 8/3/2026	Name of OSHA Monitor EMSL inc.	
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement x Abatement Performed Outside of Normal Facility Hours - Describe Other - Describe: 4pm-5am (24 Hours & weekends as needed)		Street Address 1056 Stelton Road	
Source of Work (Check all that apply) > 3 sf or > 3 lf ☒ > 160 sf or > 260 ☒ Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure x Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code Piscataway, NJ 08854	
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)	Amount (Specify SF or LF)
B518, B520, B525 Suite, B544, B546, C632 Suite, F676 Suite, C600C23 Hall Ramp, C600C23 Hall, C636 Suite, B521, B523, B521A, E585, E587, E579, E543, E526 Suite, F501, F503, F505, F507, F509, F570/570A, C556, C557, C559, C561, C514 - C518 & C520, C534, C535, C538, C540, & C543	YES	VAT Benchtops Sinks	30,000 sf 4,000 sf 60 sf
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 280 CYD
Hauler #1) Greenwood Abatement Consultants, Inc. Butler, NJ 07405 NJ DEP # 12561		Disposal Date 8/3/26	Name of Registered Landfill Fairless Landfill/ Grand Central Landfill
Hauler #2) Century Waste Services, LLC, 623 Dowd Avenue, Elizabeth NJ 07201 NJDEP# NJ-860		City, State FL-1000 New Ford Rd, Morrisville, PA 19067 Permit#18072 GCL-1963 Pen Argyle Rd, Pen Argyle, PA 18072 Permit # 100265	
Completed by (Print or Type) Raymond Pedalino	Title Sr. Project Manager	Signature Raymond Pedalino	Date June 29, 2026

GAC # 2026-060

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

RECEIVED
Check # 4672

Date of Notification (1) 6 / 29 / 26		Name of Building Owner/Operator (2) Princeton University Facilities Operations							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address MavMillan Bldg 200 Elm Dr							
		City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Eric Emery	Telephone Number 609-258-3432						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton University-Henry Hall		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 66 University Place		Square Feet	# of Floors						
City (5) Princeton		Bidg. Age							
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Dynamic Earth LLC		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC						
Street Address 826 Newtown Yardley Rd		Street Address 1123 BEAVER STREET							
City, State, Zip Code Newtown, PA 18940		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Julian Fernandez-Obregon		Telephone No. 267-685-0276	Telephone No. 215-788-6040						
License No. 02121		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC.							
Start Date (10) 7 / 9 / 26	Scheduled Completion Date (11) 7 / 10 / 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: 10am-3:00PM / ____ PM- ____ AM							
Street Address 1123 BEAVER STREET		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Room 151	☐	☒	☐	Plaster	11 SF	☒	☐	☐	☐
	☐	☒	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Freehold Cartage Inc		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Freehold, NJ		Disposal Date	City, State MORRISVILLE, PA 19067						
Completed By (Print or Type) Brian Scafiro	Title Estimator	Signature <i>Brian Scafiro</i>					Date 10/29/26		

ASB-41
MAY 11 **BS260072**

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

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

CnBCEH14073

Date of Notification (1) 6 / 30 / 26		Name of Building Owner/Operator (2) Princeton University Facilities Operations							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address MavMillan Bldg 200 Elm Dr							
		City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Eric Emery	Telephone Number 609-258-3432						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton University Gas Dynamics Bldg		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 600 Forrestal Rd									
City (5) Princeton		Square Feet	# of Floors						
		Bldg. Age							
County (6) MERCER	County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner (8) Indoor Environmental Concepts, LLC		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, LLC						
Street Address 117 N Black Horse Pike		Street Address 1123 BEAVER STREET							
City, State, Zip Code Runnemede, NJ 08078		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Michael Menz		Telephone No. 856-628-6020	Telephone No. 215-788-6040						
		License No. 02121							
Start Date (10) 6 / 30 / 26	Scheduled Completion Date (11) 7 / 6 / 26		Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:00PM / ____ PM - ____ AM		Street Address 1123 BEAVER STREET							
		City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☐ >3 sf or >3 lf ☒ >160 sf or >260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Room 137	☐	☒	☐	Transite pegboard	430 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Bristol Environmental, LLC		NJDEP Waste Hauler ID No. 18706		Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Bristol, PA				Disposal Date	City, State MORRISVILLE, PA 19067				
Completed By (Print or Type) Brian Scafiro		Title Estimator		Signature <i>Brian Scafiro</i>			Date 6/30/26		

ASB-41
MAY 11 **BS26007**

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

13769

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

B & G Project # 2026-93A

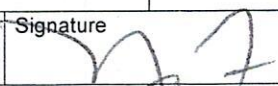
Check #

13769
RECEIVED

Date of Notification (1) 06/30/2026		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 # 2 ☐ 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) 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 217 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	Telephone No. 973-696-6869						
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: un-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		☐ 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	24,150 SF	X			
exterior entrance above class doors			X	transite panels	21 panels	X			
exterior Main entrance			X	soffit transite facia	120 LF	X			
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 400 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 <i>Gordana Luna</i>			Date 06/30/2026		

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

RECEIVED

Date of Notification (1) 06 / 25 / 26		Name of Building Owner/Operator (2) Tricon							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 31 North Bridge Street							
		City, State, Zip Code Somerville, NJ 08876							
		Name of Contact Vince Opalewski	Telephone Number 908-482-1396						
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 606 Main Street									
City (5) Belmar	Square Feet 3000	# of Floors 2	Bldg. Age 100						
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) Guardian Contracting		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		City, State, Zip Code Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone No. 732-349-9932	License No. 00624						
Start Date (10) 07 / 10 / 26	Scheduled Completion Date (11) 07 / 14 / 26	Name of OSHA Monitor E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 1056 Stelton							
		City, State, Zip Code Piscataway, New Jersey 08854							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ 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
crawlspace	☐	☒	☐	asbestos pipe insulation	100 lf	☒	☐	☐	☐
1 st floor	☐	☒	☐	asbestos floor tile	150 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 07/14/26	City, State Morrisville, Pennsylvania					
Completed By (Print or Type) Nicholas Fernicola		Title Project Manager	Signature 			Date 6/25/26			

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

GAC Project # 060-26

Date of Notification (1) July 1, 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) STANLEY BERGEN, BLDG# 7252		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: 16 Bldg. Age: 100+ years		
Street Address RBHS NEWARK CAMPUS		Current Use (prior if being demolished): ACADEMIC		
City (5) NEWARK	County (6) ESSEX	County Code (7) (State Use Only)		
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) 07/13/2026	Scheduled Completion Date (11) 07/20/26	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: 4PM 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)	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)	Amount (Specify SF or LF)	
GA04 & GA05	☒	Drywall Wall	1000 SF	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 25 CY	
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJDEP # 12561		Name of Registered Landfill Fairless Landfill / Grand Central Landfill		
Hauler #2) Century Waste Services LLC, Elizabeth, NJ 07201 NJ DEP # NJ-860		Disposal Date 07/20/2026	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 1, 2026	

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 # 10348
RECEIVED 3/9/88/57

GAC Project # 060-26

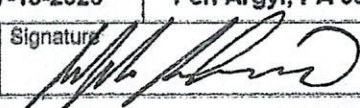
Date of Notification (1) July 1, 2026		Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ	
Agencies Notified ☐ EPA ☐ DCA ☒ DOL ☒ DEP- No Longer REQUIRED ☒ DOH	Notification Type ☒ Initial Notification ☐ Amended Notification # ☐ Emergency (including justification) ☐ Cancelled	Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS	
		City, State, Zip Code PISCATAWAY, NJ 08854 ASBESTOS CONTROL & LICENSING	
		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) UNIVERSITY BEHAVIORAL HEALTH CTR, BLDG#3690		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: 2 Bldg. Age: 80+ years	
Street Address RBHS BUSCH CAMPUS		Current Use (prior if being demolished): ACADEMIC	
City (5) PISCATAWAY	County (6) MIDDLESEX	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner (8) ATLAS		ASCM No. 00098	
Street Address 3 TERRI LANE		Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.	
City, State, Zip Code BURLINGTON, NJ 08016		Street Address 511 MAIN STREET	
Project Manager for Monitoring Firm JOHN LUTZ		Telephone Number 609-386-8800	License Number 00840
Scheduled Start Date (10) 07/17/2026		Scheduled Completion Date (11) 07/18/2026	
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 FRI- 5AM DAILY (24 HRS. & WEEKENDS AS NEEDED)		Name of OSHA Monitor ENVIROVISION, INC.	
		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) A233	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, o r other miscell.) VAT	Amount (Specify SF or LF) 110 SF
		Abatement Type Remove Repair Encap Enclose	
		☒ ☐ ☐ ☐	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 5 CY Name of Registered Landfill Fairless Landfill / Grand Central Landfill
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJDEP # 12561		Disposal Date 07/18/2026	
Hauler #2) Century Waste Services LLC, Elizabeth, NJ 07201 NJ DEP # NJ-860		City, State FL - 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700 GCL- 1963 Pen Argy! Rd. Pan Argy!, Pa 18072	
Completed by (Print or Type) RAYMOND C. PEDALINO		Title SENIOR PROJECT MANAGER	Signature <i>Raymond C. Pedalino</i>
		Date July 1, 2026	

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

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

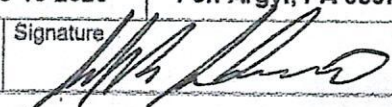
✓ #2109

1193593

Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) Max Fluss, Inc.		RECEIVED					
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 1000 Teaneck Road							
		City, State, Zip Code Teaneck, NJ 07666							
		Name of Contact Terri Martinelli		Telephone Number & LICENSING 201-836-8745 Ext. 104					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Union Manor Associates, LLC				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 270 Union Avenue									
City (5) Rutherford, NJ 07070				Square Feet 25000	# of Floors 6				
				Bldg. Age 50+					
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) A. Mac Contracting Inc.					
Street Address		Street Address 176 Saddle River Avenue							
City, State, Zip Code		City, State, Zip Code South Hackensack, NJ 07606							
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201-262-5841	License No. 00156				
Start Date (10) 07 / 10 / 26		Scheduled Completion Date (11) 07 / 11 / 26		Name of OSHA Monitor Asbestos Analytical Labs					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:00 AM - 4:30 PM				Street Address 51 Gage Road					
				City, State, Zip Code East Brunswick, NJ 08816					
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Basement - Boiler Room	☐	☒	☐	Pipe Insulation	65 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 2 Yards	Name of Registered Landfill Grand Central Sanitary Landfill				
City, State Elizabeth, NJ		Disposal Date 07-15-2026		City, State Pen Argyl, PA 08072					
Completed By (Print or Type) Ralph Barnhardt		Title Sr. Project Manager		Signature 		Date 07-01-2026			

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

4367151
✓ # 2108

Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) TD Bank							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 500 North Main Street							
		City, State, Zip Code Barnegat, NJ 08005							
		Name of Contact Dave Petty	Telephone Number 908-884-1371						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) TD Bank		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 500 North Main Street									
City (5) Barnegat, NJ 08005		Square Feet 25000	# of Floors 1						
County (6) Ocean		Bldg. Age 50+							
County Code (7)(STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Terracon		Name of Abatement Contractor (9) A. Mac Contracting Inc.							
Street Address 27 Worlds Fair Drive		Street Address 176 Saddle River Avenue							
City, State, Zip Code Somerset, NJ 08873		City, State, Zip Code South Hackensack, NJ 07606							
Project Manager for Monitoring Firm Megan E. Starace		Telephone No. 908-868-1345	License No. 00156						
Start Date (10) 07 / 25 / 26	Scheduled Completion Date (11) 07 / 26 / 26	Name of OSHA Monitor Asbestos Analytical Labs							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:00 AM-4:30 PM		Street Address 51 Gage Road							
		City, State, Zip Code East Brunswick, NJ 08816							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☒ 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
Ground Floor-Employee Break Room	☐	☒	☐	Floor Tile & Mastic	155 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 2 Yards	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 08-15-2026		City, State Pen Argyl, PA 08072					
Completed By (Print or Type) Ralph Barnhardt		Title Sr. Project Manager		Signature 		Date 07-01-2026			

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

B & G Project # 2026-93A

Check # **ON HOLD**

RECEIVED

Date of Notification (1) 06/26/2026		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 # ON hold ☐ 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) 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 217 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) ON HOLD ***	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: un-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							
		☐ 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
throughout the building			X	ceiling tiles	24,150 SF	X			
exterior entrance above class doors			X	transite panels	21 panels	X			
exterior Main entrance			X	soffit transite facia	120 LF	X			
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 400 cy	Name of Registered Landfill Grand Central Landfill					
City, State Butler, NJ		Disposal Date ON HOLD - 08/31/2026		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature <i>Gordana Luna</i>			Date 06/26/2026		

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

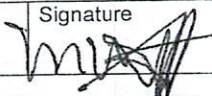
B & G Project # 2025-189

Check # **N/A**

RECEIVED
JUL - 7 2026

Date of Notification (1) 06/25/2026		Name of Building Owner/Operator (2) Newark Public Schools	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☒ Amended Amendment # 4 ☐ Emergency (including justification) ☐ Cancellation		Street Address 190 Muhammad Ali Avenue 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) Sussex Avenue School - Sub 8 Street Address 307 Sussex Avenue City (5) Newark, NJ 07107		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.) Square Feet 50,000+ # of Floors 4 Bldg. Age 50+	
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 Environemntal, INC. Street Address 1253 North Church Street City, State, Zip Code Moorestown, NJ 08057		Name of Abatement Contractor (9) B & G Restoration, Inc. Street Address 1234 Route 23 City, State, Zip Code Butler, NJ 07405	
Project Manager for Monitoring Firm James Guillard		Telephone No. 609-314-1683	
Start Date (10) 06/24/2026		Scheduled Completion Date (11) 07/31/2026	
Name of OSHA Monitor B & G Restoration, Inc.		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: UN-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) 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)
Gymnasium / Cafetorium	X		tar like material under flooring
Kitchen 145, 146A, UN11, UN10, 146B, Food Storage, 147, 149, UN8, UN9, adj hallway 2nd floor above ceilings	X		pipe insulation
Room 120A storage room & adjacent storage rooms	X		duct insulation VAT & mastic
Room 120A storage room & adjacent storage rooms	X		pipe insulation spray-on column insulation
Amount (Specify SF or LF) 5,000 SF		Abatement Type Removal Repair Encapsulate Enclosure X	
Name of Registered Waste Hauler B&G Restoration Inc. City, State Butler, NJ		NJDEP Waste Hauler ID No. 19563 Disposal Date 06/23/26 - 07/31/26	
Name of Registered Landfill Grand Central Landfill City, State Pen Argyl, PA		Signature Gordana Luna	
Completed by Gordana Luna		Title Secretary / Treasurer	
Date 06/25/2026			

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

Date of Notification (1) 6 / 18 / 26		Name of Building Owner/Operator (2) Doan Academy		RECEIVED			
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment #1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 350 Riverbank					
		City, State, Zip Code Burlington, NJ 08016					
		Name of Contact Alex Trosko		Telephone Number 609-386-3500			
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Boudinot 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 213 W Pearl St							
City (5) Burlington, NJ 08016				Square Feet 11000	# of Floors 1		
				Bldg. Age 63			
County (6) Burlington		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Vacant			
Name of Monitoring Firm Hired by Building Owner (8) Vertex		ASCM No.		Name of Abatement Contractor (9) Alliance Environmental Systems			
Street Address 2501 Seaport Drive				Street Address 550 East Union St.			
City, State, Zip Code Chester, PA 19013				City, State, Zip Code West Chester, PA 19382			
Project Manager for Monitoring Firm Dave Turotsy		Telephone No. 610-558-8902		Telephone No. 610-701-9000	License No. 00508		
Start Date (10) 6 / 15 / 26		Scheduled Completion Date (11) 7 / 10 / 26		Name of OSHA Monitor Vertex			
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> PM- <u> </u> AM				Street Address 2501 Seaport Drive			
				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			
				Removal	Repair	Encapsulate	Enclosure
Throughout	☐ Yes ☐ No ☒ N/A	Floor Tile / Mastic	9100 SF	☒	☐	☐	☐
Boiler Room	☐ Yes ☐ No ☒ N/A	Boiler Doors	30 SF	☒	☐	☐	☐
Exterior Windows	☐ Yes ☐ No ☒ N/A	Caulk	60 EA	☒	☐	☐	☐
	☐ Yes ☐ No ☒ N/A			☒	☐	☐	☐
Name of Registered Waste Hauler Mazza Recycling		NJDEP Waste Hauler ID No.	Cubic Yards of Waste 30	Name of Registered Landfill Conestoga			
City, State Tinton Falls, NJ		Disposal Date TBD		City, State Morgantown, PA			
Completed By (Print or Type) Mark Griffin		Title PM	Signature 		Date 6/18/26		

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

B & G Project # 2026-93B

Check # ON HOLD

RECEIVED

JUL - 6 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) Freehold Township School District							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☒ Amended ☐ Amendment # <u>on hold</u> ☐ Emergency (including justification) ☐ Cancellation	Street Address 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) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 47 Jeanne Brennan Drive		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						
Start Date (10) ON HOLD *****		Scheduled Completion Date (11) 07/31/2026 *****	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: <u>occupied</u>		Name of OSHA Monitor B & G Restoration, Inc. 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
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 ON HOLD		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature <i>Gordana Luna</i>			Date 07/02/2026		

2146



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

RECEIVED

JUL - 8 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) 53 Grandview Pl, Montclair, NJ 07006	
Agencies Notified	Type Notification	Street Address	
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☒ Amendment # ☒ Emergency (including justification) ☐ Cancellation	53 Grandview Pl, Montclair, NJ 07006	
		Name of Contact	Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) residential		Type of Facility (4)	
Street Address 53 Grandview Pl, Montclair		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
County (6) Essex	County Code (7) (STATE USE ONLY)	Square Feet 2,665	# of Floors 2
		Bldg. Age 99	
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9)	
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Project Manager for Monitoring Firm		Telephone No.	License No.
Start Date (10) 07/03/2026		Scheduled Completion Date (11) 07/07/2026	
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor Arsenije Adamov	
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address 170 Kinnelon Rd, Suite 32	
		City, State, Zip Code Kinnelon, NJ 07405	
Scope of Work (Check All That Apply)			
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
Kitchen		✓	ACM plaster
Name of Registered Waste Hauler Acme Professional Services Corp		NJDEP Waste Hauler ID No. 0038176	Cubic Yards of Waste .5
City, State Kinnelon, NJ		Name of Registered Landfill Fairless Landfill	
		Disposal Date 07/07/2026	City, State Morrisville, PA
Completed by Samantha Zamora	Title Project Coordinator	Signature <i>Samantha Zamora</i>	Date 07/02/2026

2148

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



PAID

RECEIVED

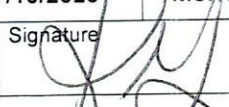
JUL - 8 2026

ASBESTOS

Date of Notification (1) 07/03/2026		Name of Building Owner/Operator (2)						
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation						
Street Address 389 Walnut Ave, City, State, Zip Code Cranford, NJ 07016		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 389 Walnut Ave, City (5) Cranford		Square Feet 7,840	# of Floors 2					
County (6) Union		County Code (7) (STATE USE ONLY)	Bldg. Age 71					
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) Acme Professional Services Corp						
Street Address		Street Address 170 Kinnelon Rd, Suite 32						
City, State, Zip Code		City, State, Zip Code Kinnelon, NJ 07405						
Project Manager for Monitoring Firm		Telephone No. 973-938-5266	License No. 02003					
Start Date (10) 07/06/2026	Scheduled Completion Date (11) 07/07/2026		Name of OSHA Monitor Arsenije Adamov					
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 170 Kinnelon Rd, Suite 32 City, State, Zip Code Kinnelon, NJ 07405						
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure								
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Basement		✓	ACM Tile and mastic	440 SF	✓			
Name of Registered Waste Hauler Acme Professional Services Corp		NJDEP Waste Hauler ID No. 0038176	Cubic Yards of Waste 1	Name of Registered Landfill Fairless Landfill				
City, State Kinnelon, NJ		Disposal Date 07/07/2026		City, State Morrisville, PA				
Completed by Samantha Zamora		Title Project Coordinator	Signature <i>Samantha Zamora</i>		Date 07/03/2026			

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

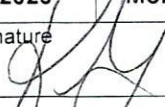
4367154-
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Date of Notification (1) 06 / 26 / 26		Name of Building Owner/Operator (2) JUL - 6 2026							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 288 Regina Avenue City, State, Zip Code Hamilton Township NJ 08619 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 288 Regina Avenue		Square Feet 1531							
City (5) Hamilton Twp		# of Floors 2	Bldg. Age 1956						
County (6) Mercer		County Code (7) (STATE USE ONLY) Residential							
Name of Monitoring Firm Hired by Building Owner (8) Finog Environmental		Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.							
Street Address 617 Stokes Road #4-318		Street Address 70 Stacy Haines Road Suite 4							
City, State, Zip Code Medford NJ 08055		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994	License No. 00862						
Start Date (10) 07 / 08 / 26		Scheduled Completion Date (11) 07 / 10 / 26							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Name of OSHA Monitor EMSL Analytical, Inc.							
Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Full Containment with Negative Pressure Enclosure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Main Basement Areas	☐	☐	☒	Floor tile and mastic	675 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680		Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills				
City, State Lumberton, NJ		Disposal Date 07/10/2026		City, State Morrisville, PA					
Completed By (Print or Type) Kaysi Gruner		Title Admin		Signature 			Date 6/26/26		

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

4367153

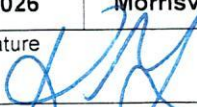
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Date of Notification (1) 06 / 26 / 26		Name of Building Owner/Operator (2)					
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5.23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 449 Hesters Avenue City, State, Zip Code Deptford NJ 08096 Name of Contact _____ Telephone Number _____					
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)					
Street Address 449 Hesters Avenue		Square Feet 1683	# of Floors 2				
City (5) Deptford		Bldg. Age 1951					
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) Finog Environmental		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.				
Street Address 617 Stokes Road #4-318		Street Address 70 Stacy Haines Road Suite 4					
City, State, Zip Code Medford NJ 08055		City, State, Zip Code Lumberton NJ 08048					
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994	Telephone No. 609-702-0400				
License No. 00862							
Start Date (10) 07 / 07 / 26	Scheduled Completion Date (11) 07 / 10 / 26	Name of OSHA Monitor EMSL Analytical, Inc.					
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 200 U.S. Route 130 North City, State, Zip Code Cinnaminson, NJ 08077					
Scope of Work (Check all that apply)							
☐ >3 sf or >3 lf ☒ >160 sf or >260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) 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) 784 SF	Abatement Type			
				Removal	Repair	Encapsulate	Enclosure
Throughout	☐ ☐ ☒	Floor tile and mastic		☒	☐	☐	☐
	☐ ☐ ☐			☐	☐	☐	☐
	☐ ☐ ☐			☐	☐	☐	☐
	☐ ☐ ☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills			
City, State Lumberton, NJ		Disposal Date 07/10/2026	City, State Morrisville, PA				
Completed By (Print or Type) Kaysi Gruner		Title Admin	Signature 		Date 6/26/20		

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

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Date of Notification (1) 07 / 01 / 26		Name of Building Owner/Operator (2) JUL - 6 2026						
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 156 A Gramercy Court City, State, Zip Code Lakewood NJ 08701 Name of Contact _____ Telephone Number _____						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Residential Property		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)						
Street Address 156A Gramercy Court		Square Feet 950	# of Floors 1					
City (5) Lakewood		Bldg. Age 1967						
County (6) Ocean	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Residential						
Name of Monitoring Firm Hired by Building Owner (8) Finog Environmental		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.					
Street Address 617 Stokes Road #4-318		Street Address 70 Stacy Haines Road Suite 4						
City, State, Zip Code Medford NJ 08055		City, State, Zip Code Lumberton NJ 08048						
Project Manager for Monitoring Firm Rebecca Rubnitz		Telephone No. 856-596-9994	Telephone No. 609-702-0400					
Start Date (10) 07 / 02 / 26		Scheduled Completion Date (11) 07 / 02 / 26	License No. 00862					
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____AM-_____PM/_____PM-_____AM		Name of OSHA Monitor EMSL Analytical, Inc.						
Scope of Work (Check all that apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		Street Address 200 U.S. Route 130 North City, State, Zip Code Cinnaminson, NJ 08077						
☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure Enclosure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF) 32 SF	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
Hall Closet	☐	☐	☒	Floor tile and mastic	☒	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐		☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 80	Name of Registered Landfill Fairless Hills				
City, State Lumberton, NJ		Disposal Date 07/02/2026		City, State Morrisville, PA				
Completed By (Print or Type) Kaysi Gruner		Title Admin	Signature 		Date 7/1/24			

RECEIVED

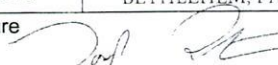
ASB-41

Do not use this form for asbestos licensure exempted activities.

8814

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

4367170

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) MCEF Construction		RECEIVED				
Agencies Notified		Type Notification		Street Address				
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		496 East County Line Rd City, State, Zip Code Lakewood, NJ 08701 Name of Contact _____ Telephone Number _____				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Residence				Type of Facility (4)				
Street Address 114 Arlington Ave				☐ 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 Lakewood, NJ, 08701				
City, State, Zip Code		Telephone No. 732-719-5649		License No. 1200				
Project Manager for Monitoring Firm		Telephone No.		Name of OSHA Monitor AAA Lead Professionals				
Start Date (10) 07/15/2026		Scheduled Completion Date (11) 07/15/2026		Street Address 6 White Dove Court				
Occupancy Status During Abatement (Check Only One)				City, State, Zip Code Lakewood, NJ, 08701				
☐ 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
Exterior			Siding	1500SF	☒			
Interior			Floor Tile	40SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No 35103	Cubic Yards of Waste 6	Name of Registered Landfill IESI				
City, State Lakewood, NJ		Disposal Date 07/15/2026		City, State BETHLEHEM, PA				
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 		Date 07/02/2026			

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

4367168
RECEIVED
JUL - 6 2026

Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 84 Myrtle Avenue							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code North Plainfield, NJ 07060							
		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 84 Myrtle Avenue		Square Feet	# of Floors						
City (5) North Plainfield		Bldg. Age							
County (6) Somerset	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) A. Seine Lighthouse Solutions		ASCM No.	Name of Abatement Contractor (9) All Pro Management, LLC						
Street Address PO Box 354		Street Address 27 Outwater Lane							
City, State, Zip Code South Orange, NJ 07079		City, State, Zip Code Garfield, NJ 07026							
Project Manager for Monitoring Firm Sarah Calandra		Telephone No. 201-394-2666	License No. 1188						
Start Date (10) 07/11/2026	Scheduled Completion Date (11) 07/31/2026	Name of OSHA Monitor A. Seine Lighthouse Solutions							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address PO Box 354							
		City, State, Zip Code South Orange, NJ 07079							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Floor tile	230 SF	X			
Basement			X	Pipes and elbows	180 LF	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 Jacqueline Anello			Date 07/01/2026			

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

4367173

#592

92

Date of Notification (1) 06/24/2026		Name of Building Owner/Operator (2) PAID		RECEIVED	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 831 Main St City, State, Zip Code Belleville NJ 07109 Name of Contact Telephone Number	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Street Address 512 8th Street			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)		
City (5) Union City		Square Feet 1586		# of Floors 2	
County (6) Hudson County		County Code (7) (STATE USE ONLY)		Bldg. Age 1893	
Current Use (Prior if being demolished) N/A					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9) ABATED LLC	
Street Address		Street Address 100-128 Union St, Suite 65			
City, State, Zip Code		City, State, Zip Code Elizabeth NJ 07202			
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 908-372-8375 License No. 02019	
Start Date (10) 07/05/2026		Scheduled Completion Date (11) 07/15/2026		Name of OSHA Monitor Ryan J Passos	
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: _____				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)
	Yes	No	N/A		
Interior			X	Asbestos transite siding	500 SF
Name of Registered Waste Hauler ABATED LLC		NJDEP Waste Hauler ID No. 0038720		Cubic Yards of Waste 5	
City, State Elizabeth NJ		Disposal Date 07/15/2026		Name of Registered Landfill Fairless Hills (W-M)	
Completed by Ryan J Passos		Title President		City, State Normansville PA Date 06/24/2026	

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

Print Form

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Date of Notification (1) JULY 2, 2026		Name of Building Owner/Operator (2)	
Agencies Notified	Type Notification	Street Address 52 MELROSE AVENUE	
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code HADDON TOWNSHIP, NJ 08108	
		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 52 MELROSE AVENUE		Square Feet	# of Floors 2
City (5) HADDON TOWNSHIP		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. NA	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 08533		City, State, Zip Code NEW EGYPT, NJ 08533	
Project Manager for Monitoring Firm STEVE SCHENKER		Telephone No. 609-744-6384	License No. 00394
Start Date (10) JULY 13, 2026	Scheduled Completion Date (11) JULY 14, 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) 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)
	Yes	No	
FAMILY DEN AREA		XXX	9X9 FLOOR TILES
Name of Registered Waste Hauler EPC TECHNOLOGIES, INC		NJDEP Waste Hauler ID No. 17000	Cubic Yards of Waste 2
City, State NEW EGYPT, NJ		Name of Registered Landfill FAIRLESS LANDFILL	
		Disposal Date 07/14/26	City, State MORRISVILLE, PA
Completed by STEVE SCHENKER	Title PRESIDENT	Signature <i>Steve Schenker</i>	Date JULY 2, 2026

1317

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

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Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) PAID							
Agencies Notified	Type Notification	Street Address							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	15 Roosevelt Street City, State, Zip Code North Arlington, NJ 07031 Name of Contact							
Telephone Number & LICENSING									
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private house		Type of Facility (4)							
Street Address 15 Roosevelt Street		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) North Arlington, NJ 07031		Square Feet	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)						
Street Address		Gr Tech LLC							
City, State, Zip Code		Street Address 576 Valley Road#283							
Project Manager for Monitoring Firm		Telephone No.	License No.						
Start Date (10) 07/11/2026		Scheduled Completion Date (11) 07/12/2026	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							
Scope of Work (Check All That Apply)		City, State, Zip Code Fair Lawn, NJ 07410							
☒ ≥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	40 LF	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 Wayne, NJ 07470		Disposal Date TBD		City, State Tullytown, PA					
Completed by G.Ristanovic		Title Owner	Signature Gradimir Ristanovic			Date 07/02/2026			

3735

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Print Form

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

PAID

JUL - 9 2016

Date of Notification (1) 06/29/26		Name of Building Owner/Operator (2) <u>354 Elm Ln</u>	
Agencies Notified	Type Notification	Street Address 354 Elm Ln	
☐ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Brick, NJ 08723	
		Name of Contact	Telephone Number
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) single fam residence		Type of Facility (4)	
Street Address 354 Elm Ln		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
City (5) Brick	Square Feet 1128	# of Floors 2	Bldg. Age 73
County (6) Ocean	Code (7) USE ONLY	Current Use (Prior if being demolished) n/a	
Name of Monitoring Firm hired by Building Owner (8) Iris Environmental Labs		Name of Abatement Contractor (9) JCR Management Specialist LLC	
Street Address 2333 US 22		Street Address 306 Victor PI	
City, State, Zip Code Union NJ 07083		City, State, Zip Code Neptune NJ 07753	
Project Manager for Monitoring Firm Rick Eustaquio		Phone No. 43762	License No. 02087
Start Date (10) 07/09/26	Scheduled Completion Date (11) 07/13/26	Name of OSHA Monitor JCR Management Specialist LLC	
Occupancy Status During Abatement (Check Only One)		Street Address 306 Victor PI	
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: occupant will be out during removal		City, State, Zip Code Neptune NJ 07753	
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	
Is Location Normally Used Solely for Maintenance or Custodial Purposes (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	
Yes No Basement Floors XX		Amount (Specify SF or LF) 600sf	
		Abatement Type	
		Removal Repair Encapsulate Enclosure XX	
Name of Registered Waste Handler Century waste		Waste ID No. 482653	Name of Registered Landfill Fairless Landfill
City, State Elizabeth NJ		Cubic Yards of Waste 20	Disposal Date
Conducted by John C Riley		Signature John Riley	Date 06/29/26

ASBESTOS CONTROL & LICENSING

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

1788

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UL - 7 2026

Date of Notification (1) 6-27-26

Name of Building Owner/Operator (2) 37 Rockland Dr

Agencies Notified

☐ EPA
☐ DEP
☐ DOL
☐ DOH
☐ DCA

Type Notification

☒ Initial
☐ Amended
☐ Amendment #
☐ Emergency (including justification)
☐ Cancellation

Street Address
37 Rockland Dr
 City, State, Zip Code
WILLIAMSBORO NJ 08046

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
RESIDENTIAL

Street Address
37 ROCKLAND DR
 City (5)
WILLIAMSBORO

County (6)
BURLINGTON

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
1200

of Floors
2

Bldg. Age
NA

Current Use (Prior if being demolished)
RESIDENTIAL

Name of Monitoring Firm Hired by Building Owner (8)
ATLAS ENV. INSPECT

Street Address
PO BOX 11645
 City, State, Zip Code
PHILA PA 19116

Project Manager for Monitoring Firm
JASON DUA

Telephone No.
267-784-4693

ASCM No.

Name of Abatement Contractor (9)
FRYMAR CONSTRUCTION

Street Address
103 PRESERVE LN.
 City, State, Zip Code
N. WALES PA 19454

Telephone No.
267-784-4684

License No.
01276

Start Date (10)
7-17-26

Scheduled Completion Date (11)
7-18-26

Name of OSHA Monitor
JASON DUA

Street Address
PO BOX 11645
 City, State, Zip Code
PHILA PA 19116

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
<u>ATTIC</u>			☒	<u>VERMICULITE INS</u>	<u>600 SF</u>	☒			

Name of Registered Waste Hauler
FRYMAR CONSTRUCTION

City, State
N. WALES, PA

NJDEP Waste Hauler ID No.
0036759

Cubic Yards of Waste
NA

Disposal Date
NA

Name of Registered Landfill
WESTERN BERKS CL

City, State
BYREBORO PA

Completed by
ETRAIM DUA

Title
VP

Signature
[Signature]

Date
6-27-26

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

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Print Form

Date of Notification (1) 06-26-26		Name of Building Owner/Operator (2) JUL - 7 2026							
Agencies Notified ☐ EPA ☐ DEP ☐ DOL ☐ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 831 Raritan Rd. City, State, Zip Code Scotch Plains, NJ 07076 Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Home		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 140 Ocean Ave.		Square Feet _____ # of Floors 1 Bldg. Age _____							
City (5) Middletown		Current Use (Prior if being demolished) _____							
County (6) Monmouth		County Code (7) (STATE USE ONLY) _____							
Name of Monitoring Firm Hired by Building Owner (8) N/A		Name of Abatement Contractor (9) Delfa Contracting LLC.							
Street Address _____		Street Address 1119 East Grand St.							
City, State, Zip Code _____		City, State, Zip Code Elizabeth, NJ 07201							
Project Manager for Monitoring Firm _____		Telephone No. 908 576-7646 License No. 01206							
Start Date (10) 07-06-26		Scheduled Completion Date (11) 07-09-26							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Other - Describe: _____		Name of OSHA Monitor Delfa Contracting LLC							
Street Address 1119 East Grand		City, State, Zip Code Elizabeth, NJ 07201							
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
Entire Property		x		Wet Demolition Asbestos Debris		x			
				Damage Compromise Structure					
				Waste Will be Disposed as ACM					
Name of Registered Waste Hauler Galbraight Excavation and Demolition		NJDEP Waste Hauler ID No. 036397		Cubic Yards of Waste 120	Name of Registered Landfill Waste Management of Pennsylvania				
City, State Scotch Plains, NJ				Disposal Date 07-07-26	City, State Fairless, PA				
Completed by Jaime Delgado		Title Proj. Manager.		Signature Jaime Delgado			Date 06-26-26		

13771

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

B & G Project # 2026-100B

Check # 13771
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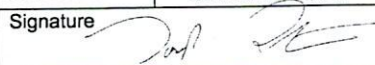
JUL - 6 2026

ASBESTOS CONTROL & LITIGATION

Date of Notification (1) 07/02/2026		Name of Building Owner/Operator (2) 777 West Park Avenue LLC					
Agencies Notified	Type Notification	Street Address					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	100 Woodbridge Center Drive, Suite 301					
		City, State, Zip Code Woodbridge, NJ 07095					
		Name of Contact Telephone Number					
FACILITY INFORMATION							
Name of Facility Where Abatement is Taking Place (3) residential structure		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 22 Kirkpatrick Street							
City (5) New Brunswick, NJ 08901		Square Feet	# of Floors				
		Bldg. Age					
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) residential structure					
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) B & G Restoration, Inc.				
Street Address		Street Address 1234 Route 23					
City, State, Zip Code		City, State, Zip Code Butler, NJ 07405					
Project Manager for Monitoring Firm		Telephone No. 973-696-6869	License No. 00378				
Start Date (10) 07/14/2026		Scheduled Completion Date (11) 07/17/2026					
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 B & G Restoration, Inc.					
		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 and 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			
				Removal	Repair	Encapsulate	Enclosure
Exterior Front	X	Exterior building caulk	30 LF	X			
lower rear roof	X	flashing	300 LF	X			
2nd & 3rd floor	X	fire doors	2 doors	X			
Basement	X	VAT & mastic	225 SF	X			
Name of Registered Waste Hauler B & G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 20	Name of Registered Landfill Grand Central Landfill			
City, State Butler, NJ		Disposal Date 07/14/26 - 07/17/26		City, State Pen Argyl, PA			
Completed by Gordana Luna		Title Secretary / Treasurer	Signature Gordana Luna		Date 07/02/2026		

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

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Date of Notification (1) 06/30/2026		Name of Building Owner/Operator (2) JUL - 9 2026							
Agencies Notified	Type Notification	Street Address 103 Brookside Road ASBESTOS CONTROL & LICENSING							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Millstone NJ 08510							
		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 103 Brookside Road		Square Feet	# of Floors						
City (5) Millstone Township		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. 732-719-5649	License No. 1200						
Start Date (10) 07/09/2026	Scheduled Completion Date (11) 07/09/2026	Name of OSHA Monitor AAA Lead Professionals							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address 6 White Dove Court							
		City, State, Zip Code Lakewood, NJ, 08701							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior				Siding	1500SF	☒			
Name of Registered Waste Hauler Lead Professionals Inc		NJDEP Waste Hauler ID No. 35103	Cubic Yards of Waste 5	Name of Registered Landfill IESI					
City, State Lakewood, NJ		Disposal Date 07/09/2026		City, State BETHLEHEM, PA					
Completed by JOSEPH PERLSTEIN		Title OWNER	Signature 			Date 06/30/2026			

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

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Date of Notification (1) 7 / 1 / 26		Name of Building Owner/Operator (2) Verizon							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 15 East Montgomery Place, Lower Level							
		City, State, Zip Code Pittsburgh, PA 15212							
		Name of Contact Pete Lesniak Telephone Number 215-640-2520							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Verizon Trenton CO		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 243 E State St		Square Feet 51075	# of Floors 5						
City (5) Trenton		Bldg. Age 50+							
County (6) Mercer	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Office							
Name of Monitoring Firm Hired by Building Owner (8) USA Environmental Management		ASCM No.	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC.						
Street Address 344 State St		Street Address 1123 BEAVER STREET							
City, State, Zip Code Trenton, NJ 08618		City, State, Zip Code BRISTOL, PA 19007							
Project Manager for Monitoring Firm Richard Reynolds		Telephone No. 609.656.8101	Telephone No. 215-788-6040 License No. 02121						
Start Date (10) 8 / 3 / 26	Scheduled Completion Date (11) 8 / 5 / 26	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC.							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/5:00PM-1:30AM		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) 40 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Throughout 1 st Floor	☐	☒	☐	Floor tile		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Bristol Environmental LLC		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Bristol, PA		Disposal Date		City, State Morrisville, PA					
Completed By (Print or Type) Brian Scafiro		Title Estimator		Signature <i>Brian Scafiro</i>			Date 7/1/26		

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

3937692
CHECK# 4677

Date of Notification (1) 7 / 2 / 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 Peter Lesniak (Owners Rep) Telephone Number 267-634-1010							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Verizon Lakewood 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 216 Lexington Avenue		Square Feet	# of Floors 3 Bldg. Age +75						
City (5) Lakewood	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 EMI		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. 215-847-4715	Telephone No. 215-788-6040 License No. 02121						
Start Date (10) 7 / 20 / 26	Scheduled Completion Date (11) 7 / 23 / 26	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, LLC							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/5PM-1AM		Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <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 Staircase Landing	☐	☐	☒	VAT & mastic	64 SF	☒	☐	☐	☐
Basement Mechanical Room	☐	☐	☒	Duct Insulation	2 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 Berks PA					
Completed By (Print or Type) Dillan DeCaro		Title Estimator		Signature <i>Dellon DeCaro</i>			Date 7/2/26		

4675

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

1204587
RECEIVED
check # 4675

Date of Notification (1) 7/2/26		Name of Building Owner / Operator (2) Bank of America	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Emergency ☐ Cancellation	Street Address 100 North Tryon Street City, State & Zip Code Charlotte, NC 28255 Name of Contact Anne Finucane Telephone Number 800-432-1002	

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Bank of America			Type of Facility (4) ☐ School (K-12) University ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 307 Bergen Blvd			Square Feet 3000	# of Floors 2	Bldg. Age 40+
City (5) Fairview	County (6) Bergen	County Code (7)	Current Use (Prior if being demolished) Banking		
Name of Monitoring Firm Hired by Building Owner (8) Arcadis		ASCM No.	Name of Abatement Contractor (9) Bristol Environmental, LLC		
Street Address One Lincoln Center, Suite 300		Street Address 1123 Beaver Street			
City, State & Zip Code Syracuse, NY 13202		City, State & Zip Code Bristol, PA 19007			
Project Manager for Monitoring Firm Tom Ashman		Telephone Number 607-624-9548	Telephone Number (215)788-6040	License Number 02121	
Scheduled Start Date (10) 7/25/26		Scheduled Completion Date (11) 7/25/26		Name of OSHA Monitor Bristol Environmental LLC	
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: 7AM – 7 PM weekend ☐ Facility Occupied During Abatement			Street Address 1123 Beaver Street City, State & Zip Code Bristol, PA 19007		

Scope of Work (Check all that apply)

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

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Clean Up	Enclosure
Restroom	☐	☒	☐	Ceramic tile mortar on wall	140 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐

Name of Registered Waste Hauler Freehold Cartage	NJDEP Waste Hauler ID No.	Cubic Yards of Waste 1 yds	Name of Registered Landfill WM Morrisville
City, State Freehold, NJ	Disposal Date 7/25/26	City, State Morrisville, PA	
Completed By (Print or Type) Gino Pizzigoni	Title Project Manager	Signature <i>Gino Pizzigoni</i>	Date 7/2/26

6126102

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

✓ # 2107

4367151

RECEIVED

Date of Notification (1) 06 / 29 / 26		Name of Building Owner/Operator (2) TD Bank							
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 500 North Main Street City, State, Zip Code Barnegat, NJ 08005 Name of Contact Dave Petty Telephone Number 908-884-1371							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) TD Bank		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 500 North Main Street		Square Feet 5000							
City (5) Barnegat, NJ 08005		# of Floors 2	Bldg. Age 50+						
County (6) Ocean	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) A. Mac Contracting Inc.						
Street Address		Street Address 176 Saddle River Avenue							
City, State, Zip Code		City, State, Zip Code South Hackensack, NJ 07606							
Project Manager for Monitoring Firm		Telephone No. 201-262-5841	License No. 00156						
Start Date (10) 07 / 09 / 26	Scheduled Completion Date (11) 07 / 25 / 26	Name of OSHA Monitor Asbestos Analytical Labs							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-PM 5:00 PM-1:30AM		Street Address 51 Gage Road City, State, Zip Code East Brunswick, NJ 08816							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Ground Floor - Maintenance Room	☐	☒	☐	Floor Tile & Mastic	75 SF	☒	☐	☐	☐
Ground Floor - Break Room	☐	☒	☐	Floor Tile & Mastic	175 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 2 Yards	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 07-15-2026		City, State Pen Argyl, PA 08072					
Completed By (Print or Type) Ralph Barnhardt		Title Sr. Project Manager		Signature			Date		

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

B & G Project # 2026-93A

Check # 13759

4367155

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JUL - 6 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 06/19/2026		Name of Building Owner/Operator (2) Freehold Township School District	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 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) 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 217 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 TTI Environmental Inc	Hired by Building Owner (8) 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) 06/29/2026	Scheduled Completion Date (11) 07/31/2026	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		☒ 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)
	Yes	No	
throughout the building		X	ceiling tiles
exterior entrance above class doors		X	transite panels
exterior Main entrance		X	soffit transite facia
Amount (Specify SF or LF)		Abatement Type	
		Removal	Repair
		Encapsulate	Enclosure
24,150 SF		X	
21 panels		X	
120 LF		X	
Name of Registered Waste Hauler B&G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 400 cy
City, State Butler, NJ		Name of Registered Landfill Grand Central Landfill	
Disposal Date 06/29/2026 - 07/31/2026		City, State Pen Argyl, PA	
Completed by Gordana Luna	Title Secretary / Treasurer	Signature <i>Gordana Luna</i>	Date 06/19/2026

Fedex

13767
B & G Project # 2026-102RAID
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Check #

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13767 VED
JUL - 6 2026
ASBESTOS CONTROL & LICENSING

Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) New Brunswick Development Corporation							
Agencies Notified	Type Notification	Street Address 120 Albany Street, 7th Floor, Tower 1							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code New Brunswick, NJ 08901							
		Name of Contact John Ruddy / GC	Telephone Number 732-940-1923						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) H-3 at The Helix		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 55 Paterson Street		Square Feet	# of Floors						
City (5) New Brunswick, NJ 07901		Bldg. Age							
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) residential							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) B & G Restoration, Inc.						
Street Address		Street Address 1234 Route 23							
City, State, Zip Code		City, State, Zip Code Butler, NJ 07405							
Project Manager for Monitoring Firm		Telephone No. 973-696-6869	License No. 00378						
Start Date (10) 07/08/2026	Scheduled Completion Date (11) 07/17/2026		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: _____		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 and 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
exterior			X	siding / roofing - flashing	3,000 SF / 1,070 SF	X			
4th floor bathroom			X	linoleum	150 SF	X			
basement restroom			X	mirror mastic dubs	30 SF	X			
kitchen			X	hood duct material	10 SF	X			
Name of Registered Waste Hauler B & G Restoration Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 80	Name of Registered Landfill Grand Central Landfill					
City, State Butler, NJ		Disposal Date 07/08/26 - 07/17/26		City, State Pen Argyl, PA					
Completed by Gordana Luna		Title Secretary / Treasurer		Signature Gordana Luna			Date 06/26/2026		

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

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Date of Notification (1) 7-1-2026		Name of Building Owner/Operator (2) Paulsboro Refining Company							
Agencies Notified	Type Notification	Street Address 800 Bliings Port Rd							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Paulsboro NJ 08066							
		Name of Contact Ravi Jarecha	Telephone Number 732-567-8659						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Paulsboro Refining Company		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 800 Bliings Port Rd		Square Feet	# of Floors						
City (5) Paulsboro NJ 08066		Bldg. Age							
County (6) Gloucester	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Pennoni Associates		ASCM No. n/a	Name of Abatement Contractor (9) BrandSafway						
Street Address 515 Grove St Suite 1B		Street Address 10 Industrial HWY							
City, State, Zip Code Haddon Heights NJ		City, State, Zip Code Lester PA 19029							
Project Manager for Monitoring Firm Richard G Egner		Telephone No. 856-547-0505	Telephone No. 856-693-3752						
		License No. 01009							
Start Date (10) 7/20/2026	Scheduled Completion Date (11) 12/4/2026	Name of OSHA Monitor Total Enviromental Solutions							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 1005 Saint Georges Lane							
		City, State, Zip Code Landenberg PA 19350							
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
07-T-1		X		Thermal Insulation	75 SqFt	X			
07-T-2		X		Thermal Insulation	15 SqFt	X			
07-T-7		X		Thermal Insulation	30 SqFt	X			
Various piping jobs		X		Thermal Pipe Insulation	225 LF	X			
Name of Registered Waste Hauler Waste Masters		NJDEP Waste Hauler ID No. 0234246		Cubic Yards of Waste <10	Name of Registered Landfill Fairless Landfill				
City, State New Castle DE				Disposal Date	City, State Morrisville PA				
Completed by Michael Lucidi		Title Site Superintendent		Signature		Date 7/1/2026			

11989

Check #11989

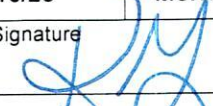
Print Form

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

RECEIVED 4367172

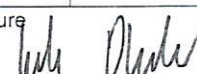
Date of Notification (1) JULY 3, 2026		Name of Building Owner/Operator (2) LIBERTY STREET CHURCH OF CHRIST						
Agencies Notified	Type Notification	Street Address 2331 LIBERTY STREET						
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code TRENTON, NJ 08629						
		Name of Contact REYNOLDS NAUGUSTIN	Telephone Number 609-658-9438					
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) CHURCH		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 2331 LIBERTY STREET		Square Feet	# of Floors 1					
City (5) TRENTON, NJ 08629		Bldg. Age 80+-						
County (6) MERCER	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. NA	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 08533		City, State, Zip Code NEW EGYPT, NJ 08533						
Project Manager for Monitoring Firm STEVE SCHENKER		Telephone No. 609-744-6384	License No. 00394					
Start Date (10) JULY 15, 2026	Scheduled Completion Date (11) JULY 17, 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
BASEMENT AREA		XXX	9X9 FLOOR TILES	1000 SF	XXX			
Name of Registered Waste Hauler EPC TECHNOLOGIES, INC		NJDEP Waste Hauler ID No. 17000	Cubic Yards of Waste 5	Name of Registered Landfill FAIRLESS LANDFILL				
City, State NEW EGYPT, NJ		Disposal Date JULY 17, 2026	City, State MORRISVILLE, PA					
Completed by STEVE SCHENKER		Title PRESIDENT	Signature <i>Steve Schenker</i>			Date JULY 3, 2026		

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

Date of Notification (1) 07 / 02 / 26		Name of Building Owner/Operator (2) New Providence BOE #2606-3569 check# 4224							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 356 Elkwood Avenue City, State, Zip Code New Providence NJ 07974 Name of Contact Eli Leader Telephone Number 908-464-9042							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) New Providence 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 Pioneer Drive		Square Feet TBD							
City (5) New Providence		# of Floors TBD	Bldg. Age TBD						
County (6) Union	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) Garden State Environmental Inc		ASCM No.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.						
Street Address 555 S Board Street Suite K		Street Address 70 Stacy Haines Road Suite 4							
City, State, Zip Code Glen Rock NJ 07452		City, State, Zip Code Lumberton NJ 08048							
Project Manager for Monitoring Firm Jane Boogaert		Telephone No. 201-652-1119	Telephone No. 609-702-0400						
Start Date (10) 07 / 13 / 26		Scheduled Completion Date (11) 07 / 16 / 26	License No. 00862						
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Name of OSHA Monitor EMSL Analytical, Inc.							
Scope of Work (Check all that apply) ☒ >3 sf or >3 lf ☐ >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
Attic Space	☐	☐	☒	Elbows/Fittings with Asb Insulation	8 each	☒	☐	☐	☐
Attic Space	☐	☐	☒	Elbows/Fittings with Asb Insulation	4 each	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Asbestos and Mold Services Corp		NJDEP Waste Hauler ID No. 0035680	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Hills					
City, State Lumberton, NJ		Disposal Date 07/16/26		City, State Morrisville, PA					
Completed By (Print or Type) Kaysi Gruner		Title Office Admin		Signature 				Date 7/2/26	

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

CHECK # 1086
4367175
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Date of Notification (1) 062626		Name of Building Owner/Operator (2) New Jersey Institute of Technology							
Agencies Notified ☒ EPA ☒ DOLWID ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 323 Martin Luther King Jr Blvd City, State, Zip Code Newark, NJ 07102 Name of Contact Alexandra Carreras Telephone Number 973-596-5356							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) NJIT - Tiernan Hall, Lecture Hall #2		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 161 Warren Street		Square Feet 156,000	# of Floors 4						
City (5) Newark		Bldg. Age 30 +							
County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Tiernan Hall - NJIT							
Name of Monitoring Firm Hired by Building Owner (8) OMEGA Environmental Services		ASCM No.	Name of Abatement Contractor (9) East Coast Haz Mat Removal, Inc.						
Street Address 280 Huyler St., South Hackensack		Street Address 494 East 41st Street							
City, State, Zip Code South Hackensack, NJ 07606		City, State, Zip Code Paterson, NJ 07504							
Project Manager for Monitoring Firm Rich - Project Manager		Telephone No. 862-368-2399	Telephone No. 973-345-0022 License No. 00507						
Start Date (10) 07 / 08 / 26	Scheduled Completion Date (11) 07 / 22 / 24		Name of OSHA Monitor Same as above						
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 07AM-3:30PM/ PM-____AM		Street Address City, State, Zip Code							
Scope of Work (Check all that apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ 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
Lecture Hall # 2	☐	☒	☐	Popcorn Ceiling	900 SF	☒	☐	☐	☐
Lecture Hall # 2/Prep Room	☐	☒	☐	VAT/mastic	2140 SF	☒	☐	☐	☐
Lecture Hall # 2/Prep Room	☐	☒	☐	Lab Contertop	64 SF	☒	☐	☐	☐
Lecture Hall # 2/Pre Room	☐	☒	☐	Transite Lab Hood	480 SF	☒	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services, LLC.		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 30	Name of Registered Landfill Waste Mgmt. - Fairless Hills					
City, State Elizabeth, NJ 07201		Disposal Date 07-22-2026		City, State Morrisville, PA					
Completed By (Print or Type) Leslie Olszewski		Title Sr. Project Mgr.		Signature 		Date 06-26-2026			

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

1178 975

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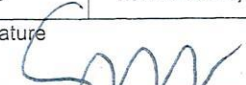
JUN - 6 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 6/30/26		Name of Building Owner/Operator (2) Jersey City Public Schools Job #2601-6527 Check #18040							
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) 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 # of Floors Bldg. Age							
City (5) Jersey City		County Code (7) (STATE USE ONLY)							
County (6) Hudson		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) 7 / 1 / 26	Scheduled Completion Date (11) 7 / 31 / 26	Name of OSHA Monitor IATL							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 9000 Commerce Parkway							
		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		☐ 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 7/31/26		City, State Morrisville, PA					
Completed By (Print or Type) Gwen Trumbetti		Title Operations Coord.		Signature 		Date 6-30-26			

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

4367180
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JUL - 6 2026

Date of Notification (1) 6 / 30 / 26		Name of Building Owner/Operator (2) Transcontinental Gas Pipe Line Job # 2606-6593 Check #18401							
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 #950		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 255 Penn Lawrenceville Road									
City (5) Hopewell Twp.	Square Feet	# of Floors	Bldg. Age						
County (6) Mercer	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.	Telephone No. 609-265-2107	License No. 00529						
Start Date (10) 7 / 11 / 26	Scheduled Completion Date (11) 7 / 13 / 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) 6 LF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior #950	☐	☐	☒	Coal Tar Wrap- 24" 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 6/30/26		City, State Morrisville, PA 19067					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 			Date 6-30-26		

4367169
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* Do not use this form for asbestos licensure exempted activities.

3762

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

Check 3762

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Date of Notification (1) 06/10/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 14 Nottingham Rd							
		City, State, Zip Code Short Hills, NJ 07078							
		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 14 Nottingham Rd									
City (5) Short Hills, NJ 07078		Square Feet 3,470	# of Floors 2						
County (6) Essex		Bldg. Age 1926							
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.							
Street Address		Name of Abatement Contractor (9) VEL Construction, LLC							
City, State, Zip Code		Street Address 75 Voorhis Place							
Project Manager for Monitoring Firm		City, State, Zip Code Ringwood NJ 07456							
Telephone No.		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 06/11/2026	Scheduled Completion Date (11) 06/18/2026		Name of OSHA Monitor						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address						
			City, State, Zip Code						
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ 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
First Floor		x		Ceiling plaster	8 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 06/18/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez				Date 06/10/2026	

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

Check 3761
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Date of Notification (1) 06/10/2026		Name of Building Owner/Operator (2) JUN 15 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation		Street Address 334 South Pkwy City, State, Zip Code Clifton, NJ 07014 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 334 South Pkwy		Square Feet 2,100	# of Floors 1						
City (5) Clifton, NJ 07014		Bldg. Age 1940							
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.	Telephone No. 201-466-0166						
			License No. 02126						
Start Date (10) 06/12/2026	Scheduled Completion Date (11) 06/19/2026		Name of OSHA Monitor						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address City, State, Zip Code						
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☒ Renovation ☐ ≥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
Basement		X		pipe insulation	11 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 06/19/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 06/10/2026		

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

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Date of Notification (1) 06/06/2026		Name of Building Owner/Operator (2) JUN 15 2026							
Agencies Notified	Type Notification	Street Address 1211 Turf Dr							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Oceanport, NJ 07757							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4)							
Street Address 1211 Turf Dr		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Oceanport, NJ 07757		Square Feet 1,886	# of Floors 1						
County (6) Monmouth		County Code (7) (STATE USE ONLY) _____	Bldg. Age 1962						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 06/15/2026	Scheduled Completion Date (11) 06/22/2026	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 ☒ Renovation ☒ Full Containment with Negative Pressure ☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Mini-Enclosure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <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 Bedroom		X		Floor tile & mastic	118 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 06/22/2026	City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature <i>Lubica Perez</i>			Date 06/06/2026			

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

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Date of Notification (1) 06/08/2026		Name of Building Owner/Operator (2) JUN 15 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 823 Liberty Dr City, State, Zip Code Somerdale, NJ 08083 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 823 Liberty Dr		Square Feet 2,106	# of Floors 2						
City (5) Somerdale, NJ 08083		Bldg. Age 1960							
County (6) Camden	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 06/17/2026	Scheduled Completion Date (11) 06/24/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement den		x		carpet, pad, tile & mastic	300 SF	x			
Basement office		x		carpet, pad, tile & mastic	156 SF	x			
Basement hall closet under stairs		x		carpet, pad, tile & mastic	43 SF	x			
Basement bedroom		x		carpet, pad, tile & mastic	158 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 06/24/2026	City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 06/08/2026			

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

Check 3759

JUN 15 2026

Date of Notification (1) 06/08/2026		Name of Building Owner/Operator (2)							
Agencies Notified	Type Notification	Street Address 35 Westbrook Rd							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Howell Township, NJ 07731							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4)							
Street Address 35 Westbrook Rd		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Howell Township, NJ 07731		Square Feet 1,642	# of Floors 2						
County (6) Monmouth		Bldg. Age 1966							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 06/11/2026	Scheduled Completion Date (11) 06/18/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1st floor various rooms		x		Floor tile & mastic	426 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 06/18/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature Lubica Perez			Date 06/08/2026			

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

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Check 3752

Date of Notification (1) 06/08/2026		Name of Building Owner/Operator (2) JUN 15 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 64 Blue Mill Rd ASBESTOS CONTROL & LICENSING							
		City, State, Zip Code Morristown, NJ 07960							
		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 64 Blue Mill Rd		Square Feet 5,206	# of Floors 2						
City (5) Morristown, NJ 07960		Bldg. Age 1929							
County (6) Morris	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201-466-0166	License No. 02126						
Start Date (10) 06/09/2026	Scheduled Completion Date (11) 06/16/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		x		pipe insulation	85 SF	x			
Basement		x		pipe fittings	20	x			
Crawlspace		x		pipe insulation	25 SF	x			
Crawlspace		x		pipe fittings	15	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Elizabeth, NJ		Disposal Date 06/16/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez		Date 06/08/2026			

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

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Check 3760

Date of Notification (1) 06/08/2026		Name of Building Owner/Operator (2) JUN 15 2026							
Agencies Notified	Type Notification	Street Address 261 Metape Cir N							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Bound Brook, NJ 08805							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential House		Type of Facility (4)							
Street Address 261 Metape Cir N		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Bound Brook, NJ 08805		Square Feet 1,708	# of Floors 2						
County (6) Somerset		County Code (7) (STATE USE ONLY) _____	Bldg. Age 1957						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 201-466-0166						
			License No. 02126						
Start Date (10) 06/18/2026	Scheduled Completion Date (11) 06/25/2026		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 ☒ Renovation ☒ Full Containment with Negative Pressure ☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Mini-Enclosure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Bathroom		X		Floor tile	70 SF	X			
Closet		X		Floor tile	5 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 06/25/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature <i>Lubica Perez</i>			Date 06/08/2026		

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

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Date of Notification (1) 06/08/2026		Name of Building Owner/Operator (2) Church of Saint Gregory the Great		JUN 11 2026	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 4620 Nottingham Way		
			City, State, Zip Code Hamilton Square, NJ 08690		
		Name of Contact Jason Bonifazi		Telephone Number 609-587-4877	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Church of Saint Gregory the Great			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 4620 Nottingham Way			Square Feet 50,000	# of Floors 2	Bldg. Age 90
City (5) Hamilton Square					
County (6) Mercer		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Church	
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) 06/20/2026		Scheduled Completion Date (11) 06/25/2026		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)
	Yes	No	N/A		
Classroom 218		X		Ebonite Windowsills	30 LF
Faculty Lounge		X		Ebonite Windowsills	15 LF
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 06/25/2026		City, State Morgantown, PA	
Completed by Shannon Thomson		Title Operations Manager		Signature <i>Shannon Thomson</i>	Date 06/08/2026

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

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Date of Notification (1) 06/08/2026		Name of Building Owner/Operator (2)							
Agencies Notified		Type Notification		Street Address					
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		335 Stratford Avenue City, State, Zip Code Haddon Township, NJ 08108 Name of Contact _____ Telephone Number _____					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) O'Donnell Residence				Type of Facility (4)					
Street Address 335 Stratford Avenue				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Haddon Township		Square Feet 1,871		# of Floors 2	Bldg. Age 87				
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) 06/17/2026		Scheduled Completion Date (11) 06/22/2026		Name of OSHA Monitor EMSL Analytical, 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: _____				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	330 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 06/22/2026		City, State Morgantown, PA				
Completed by Samantha Brown			Title Operations Coordinator			Signature 		Date 06/08/2026	

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* 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) 06/08/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 451 3rd Avenue							
		City, State, Zip Code Lyndhurst, New Jersey 07071							
		Name of Contact _____ Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Home		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 451 3rd Avenue		Square Feet 775 SF	# of Floors 1						
City (5) Lyndhurst		Bldg. Age 77 years							
County (6) Bergen County		County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Home						
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No. _____	Name of Abatement Contractor (9) True Star Contracting						
Street Address		Street Address 54 Hedden Terrace							
City, State, Zip Code		City, State, Zip Code North Arlington, New Jersey 07031							
Project Manager for Monitoring Firm		Telephone No. _____	Telephone No. (201) 790-4530						
			License No. 02047						
Start Date (10) 06/17/2026	Scheduled Completion Date (11) 06/19/2026		Name of OSHA Monitor						
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address						
			City, State, Zip Code						
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ Renovation ☒ ≥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
1st Floor Kitchen			X	Asbestos VAT	144 SF	X			
Basement			X	Asbestos VAT	775 SF	X			
Name of Registered Waste Hauler True Star Contracting		NJDEP Waste Hauler ID No. 0041405	Cubic Yards of Waste 3	Name of Registered Landfill Chrin Bro Landfill					
City, State North Arlington, New Jersey			Disposal Date TBD	City, State Easton, PA					
Completed by Nestor M. Alvez		Title Project Manager		Signature 		Date 06/08/2026			

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ASB-41 (R-06-08)

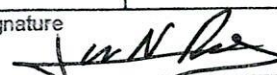
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

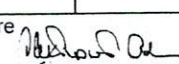
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Date of Notification (1) 05/26/2026		Name of Building Owner/Operator (2)							
Agencies Notified		Type Notification							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☐ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☒ Cancellation							
Street Address 47 Troy Drive		City, State, Zip Code Springfield NJ 07081							
Name of Contact		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential Home		Type of Facility (4)							
Street Address 47 Troy Drive		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Springfield		Square Feet	# of Floors 2						
County (6) Union		County Code (7) (STATE USE ONLY) _____	Bldg. Age +50						
Name of Monitoring Firm Hired by Building Owner (8)		Name of Abatement Contractor (9) United Demo LLC							
Street Address		Street Address 143 Acme St							
City, State, Zip Code		City, State, Zip Code Elizabeth NJ 07202							
Project Manager for Monitoring Firm		Telephone No. 862-218-3930	License No. 02045						
Start Date (10) 06/05/2026	Scheduled Completion Date (11) 06/05/2026		Name of OSHA Monitor United Demo LLC						
Occupancy Status During Abatement (Check Only One)		Street Address 143 Acme St							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code Elizabeth NJ 07202							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☒ 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
Garage			X	Pipe Insulation	30 LF	X			
Name of Registered Waste Hauler United Demo LLC		NJDEP Waste Hauler ID No. 0040986		Cubic Yards of Waste As Needed	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth NJ 07202				Disposal Date TBD	City, State Morrisville PA				
Completed by Jose N Rosas		Title Project Manager		Signature 		Date 05/26/2026			

4049

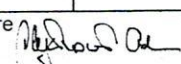
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
 (Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 03/27/2026		Name of Building Owner/Operator (2) JUN 24 2026 Check 4049							
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 134 Huber Street City, State, Zip Code Secaucus, NJ 07094						
			Name of Contact _____						
			Telephone Number _____						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
Street Address 134 Huber Street		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Secaucus, NJ 07094		Square Feet 2500	# of Floors 2 Bldg. Age 50+						
County (6) Sussex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Private Residence							
Name of Monitoring Firm Hired by Building Owner (8) LIS CONSULTING SERVICES, LLC		ASCM No.	Name of Abatement Contractor (9) Lilich Corporation						
Street Address 3 B Cottage Court		Street Address 246 Union Boulevard							
City, State, Zip Code Whiting, New Jersey		City, State, Zip Code Totowa, New Jersey 07512							
Project Manager for Monitoring Firm Barbara Lis		Telephone No. (732) 940-6207	Telephone No. 973-225-8400 License No. 01104						
Start Date (10) 04/06/2026	Scheduled Completion Date (11) 04/07/2026	Name of OSHA Monitor Iris Environmental Laboratories, LLC							
Occupancy Status During Abatement (Check Only One)		Street Address 2333 Route 22 West							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code Union, NJ 07083							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ 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	Enclosure
Basement			X	Pipe Insulation	30 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 2	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ		Disposal Date April/2026		City, State Morrisville, PA					
Completed by Adriana Olejarova		Title President		Signature 			Date 03/27/2026		

4049

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

Date of Notification (1) 03/27/2026		Name of Building Owner/Operator (2) APR 6 2026 Check 4049							
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 134 Huber Street						
			City, State, Zip Code Secaucus, NJ 07094						
			Name of Contact						
			Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
Street Address 134 Huber Street		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Secaucus, NJ 07094		Square Feet 2500	# of Floors 2 Bldg. Age 50+						
County (6) Sussex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Private Residence							
Name of Monitoring Firm Hired by Building Owner (8) LIS CONSULTING SERVICES, LLC		ASCM No.	Name of Abatement Contractor (9) Lilich Corporation						
Street Address 3 B Cottage Court		Street Address 246 Union Boulevard							
City, State, Zip Code Whiting, New Jersey		City, State, Zip Code Totowa, New Jersey 07512							
Project Manager for Monitoring Firm Barbara Lis		Telephone No. (732) 940-6207	Telephone No. 973-225-8400 License No. 01104						
Start Date (10) 09/29/2023	Scheduled Completion Date (11) 10/03/2023	Name of OSHA Monitor Iris Environmental Laboratories, LLC							
Occupancy Status During Abatement (Check Only One)		Street Address 2333 Route 22 West							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other – Describe: _____		City, State, Zip Code Union, NJ 07083							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glove Bag Procedure / Limited Containment & Tent ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Pipe Insulation	30 LF	X			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste 2	Name of Registered Landfill Fairless Landfill					
City, State Elizabeth, NJ			Disposal Date April/2026	City, State Morrisville, PA					
Completed by Adriana Olejarova		Title President	Signature 			Date 03/27/2026			

37250

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

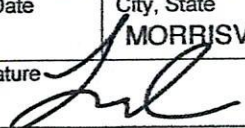
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JUN 22 2026

Date of Notification (1) 6/15/26		Name of Building Owner/Operator (2)	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	
Street Address 139 Mountain Avenue		ASBESTOS CONTROL & LICENSING	
City, State, Zip Code Springfield, NJ 07081		Telephone Number	
Name of Contact			
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Jonathan Dayton Hig School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 139 Mountain Avenue		Square Feet n/a	
City (5) Springfield		# of Floors 2	
County (6) Union		Bldg. Age unknown	
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) Envirovision		ASCM No.	
Street Address 20-21 Wagaraw Rd		Name of Abatement Contractor (9) Panoramic Window & Door Systems, Inc.	
City, State, Zip Code Fair Lawn, NJ 07410		Street Address 712 Sergeantsville Rd	
Project Manager for Monitoring Firm Fred Larson		City, State, Zip Code Stockton, NJ 08559	
Telephone No. 973-636-9145		Telephone No. 732-926-0900	
Start Date (10) 6/25/26		License No. 01237	
Scheduled Completion Date (11) 6/29/26		Name of OSHA Monitor Panoramic Window & Door Systems, Inc.	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address 712 Sergeantsville Rd	
7am-3pm		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) TO BE ABATED In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)	
		Yes No N/A	
Gym Windows		X	
Gym Windows		X	
Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF)	
perimeter caulk		270 lf	
transite panels & glazing		640 sf	
Abatement Type			
Removal Repair Encapsulate Enclosure			
x			
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 Chrln Bros Sanitary Landfill	
City, State Stockton, NJ		Disposal Date TBD	
City, State Easton, PA			
Completed by Paul Nagy		Title VP	
Signature		Date 6/15/26	

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

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Date of Notification (1) 06/17/2026		Name of Building Owner/Operator (2) Jennifer Gomes							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 20 COMMERCE DRIVE							
		City, State, Zip Code CRANFORD, NJ 07016							
		Name of Contact JOEL RUBIN	Telephone Number 646-296-7478						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) OFFICE BUILDING		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1655 VALLEY RD		Square Feet 30,000	# of Floors 5						
City (5) WAYNE		Bldg. Age +50							
County (6) PASSAIC	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) COMMERCIAL PROPERTY							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) MALCO ENVIRONMENTAL LLC						
Street Address		Street Address 24 LINCOLN AVE W							
City, State, Zip Code		City, State, Zip Code CRANFORD, NJ 07016							
Project Manager for Monitoring Firm		Telephone No. 732	Telephone No. 5133487						
			License No. 02113						
Start Date (10) 06/27/2026	Scheduled Completion Date (11) 06/29/2026	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
BOILER ROOM		X		FLOOR TILES	65SF	X			
UTILITY CLOSET		X		FLOOR TILES	10SF	X			
Name of Registered Waste Hauler CENTURY WASTE		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill United States					
City, State 623 DOWD AVE ELIZABETH, NJ 07201			Disposal Date	City, State MORRISVILLE, PA					
Completed by JENNIFER GOMES		Title PRESIDENT	Signature 			Date 06/16/2026			

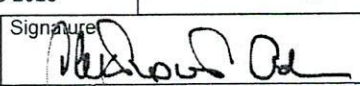
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Date of Notification (1) 06-12-2026		Name of Building Owner / Operator (2) GROVE ASSOCIATES, LLC		JUN 22 2026							
Agencies Notified ☒ EPA ☐ DEP ☐ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☒ Emergency ☐ Cancellation		Street Address 300 New Road City, State & Zip Code Parsippany, New Jersey 07054 Name of Contact Shawn O'Malley Telephone Number 973-449-2968							
FACILITY INFORMATION											
Name of Facility Where Abatement is Taking Place (3) CEDAR GROVE APARTMENTS – Unit 50A, GARAGE #81 Street Address 50A HIGHLAND RD City (5) CEDAR GROVE			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.) Square Feet 5,376 # of Floors 2 Bldg. Age 63 yrs Current Use (Prior if being demolished) Apartment Unit Garage								
County (6) Essex		County Code (7)		Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services, LLC Street Address PO BOX 365 Berlin, NJ 08009							
Project Manager for Monitoring Firm Mr. Jim Proctor		Telephone Number 856-452-1311		Name of Abatement Contractor (9) Resource Management Group, LLC Street Address 2115 Hamilton Ave, Ste 202 City, State & Zip Code Trenton, NJ 08619							
Scheduled Start Date (10) 06-16-2026		Scheduled Completion Date (11) 06-19-2026		Telephone Number 609-977-6159 License Number 01185							
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Describe: ☐ Facility Occupied During Abatement			Name of OSHA Monitor J&S Environmental Laboratories Inc 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) Pipe Insulation		Amount (Specify SF or LF) 90 LF		Abatement Type			
								Removal	Repair	Encapsulate	Enclose
Garage #81, Unit 50A		☐ Yes ☐ No ☒ N/A						☒	☐	☐	☐
								☐	☐	☐	☐
								☐	☐	☐	☐
								☐	☐	☐	☐
								☐	☐	☐	☐
								☐	☐	☐	☐
								☐	☐	☐	☐
								☐	☐	☐	☐
Name of Registered Waste Hauler Resource Management Group, LLC		NJDEP Waste Hauler ID No. 0035218		Cubic Yards of Waste TBD		Name of Registered Landfill Grows Landfill					
City, State Trenton, NJ 08619				Disposal Date TBD		City, State Morrisville, PA					
Completed By (Print or Type) Mr. Brian Haney				Title President		Signature <i>Brian Haney</i>				Date 06-12-2026	

4110

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

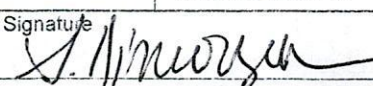
RECEIVED

Date of Notification (1) 06 / 09 / 26		Name of Building Owner/Operator (2) Somerville BOE		Check #4110					
Agencies Notified ☐ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 5:23-8) ☒ DEP		Type Notification ☒ Initial ☐ Amended Amendment # ☐ Emergency (including justification) ☐ Cancellation		Street Address 51 Union Ave City, State, Zip Code Somerville, NJ 08876 Telephone Number 973-981-4850					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Somerville 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 222 Davenport Street				Square Feet 60,000					
City (5) Somerville, NJ 08876				# of Floors 3					
County (6) Sumerset County				Bldg. Age 50+					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Education							
Name of Monitoring Firm Hired by Building Owner (8) New Wave Engineering LLC		ASCM No.		Name of Abatement Contractor (9) Lilich Corporation					
Street Address 33-00 Broadway		Street Address 246 Union Boulevard		City, State, Zip Code Totowa, NJ 07512					
City, State, Zip Code Fair Lawn, New Jersey 07410		Telephone No. 973-225-8400		License No. 01104					
Project Manager for Monitoring Firm Nadine Bello		Telephone No.		Name of OSHA Monitor LIS CONSULTING SERVICES, LLC.					
Start Date (10) 06 / 19 / 26		Scheduled Completion Date (11) 06 / 23 / 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 3 B Cottage Court		City, State, Zip Code Whiting, New Jersey 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 ☐ 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
Electrical/Storage Closet	☒	☐	☐	Pipe insulation	9 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 1		Name of Registered Landfill Grand Central Sanitary Landfill			
City, State Elizabeth, New Jersey		Disposal Date June 2026		City, State 1963 Pen Argyl Rd, Pen Argyl, PA 18027					
Completed By (Print or Type) Adriana Olejarova		Title President		Signature 		Date 06/09/26			

1112

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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) 6/15/2026		Name of Building Owner/Operator (2) West New York Board of Education							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 8028 Broadway		City, State, Zip Code West New York, NJ 07093							
Name of Contact Isreal Fuentes		Telephone Number 201-286-6163							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) PS4 Annex Building		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 317 66th Street		Square Feet	# of Floors						
City (5) West New York		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) McCabe Environmental Services LLC		ASCM No.	Name of Abatement Contractor (9) NorthEast Management LLC						
Street Address 129 Sea Girt Avenue		Street Address 41 Madison Avenue							
City, State, Zip Code Manasquan, NJ 08736		City, State, Zip Code Rochelle Park, NJ 07662							
Project Manager for Monitoring Firm Jarred Panecki		Telephone No. 732- 552-9615	Telephone No. 201-577-1381						
Start Date (10) 6/25/2026		Scheduled Completion Date (11) 8/31/2026	License No. 02008						
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		Street Address 41 Madison Avenue							
City, State, Zip Code Rochelle Park, NJ 07662		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	Window Caulking	1,800LF	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 6/15/2026			

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

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Date of Notification (1) 06 / 15 / 26		Name of Building Owner/Operator (2) Rowan University							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 201 Mullica Hill Road							
		City, State, Zip Code Glassboro NJ. 08028							
		Name of Contact Tom Gallia	Telephone Number 856-256-4142						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Wilson Hall - Green Room		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 201 Mullica Hill Road		Square Feet 100,000	# of Floors 3						
City (5) Glassboro		Bldg. Age +/- 50							
County (6) Gloucester	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Vacant							
Name of Monitoring Firm Hired by Building Owner (8) Dynamic Earth LLC	ASCM No.	Name of Abatement Contractor (9) USA Environmental Management, Inc.							
Street Address 826 Newtown Yardley Road Suite 201		Street Address 8436 Enterprise Avenue							
City, State, Zip Code Newtown, PA 18940		City, State, Zip Code Philadelphia, PA 19153							
Project Manager for Monitoring Firm Rafael Torres	Telephone No. 609-890-7277	Telephone No. 215-365-5810	License No. 1156						
Start Date (10) 06 / 30 / 26	Scheduled Completion Date (11) 07 / 03 / 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 ☐ ≥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) 700 SF	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Green Room	☐	☐	☒	Floor Tile & Mastic		☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler USA Environmental Management, Inc.		NJDEP Waste Hauler ID No. 32610	Cubic Yards of Waste 01	Name of Registered Landfill Western Berks Landfill					
City, State Philadelphia, PA			Disposal Date 07/30/2026	City, State Birdsboro, PA					
Completed By (Print or Type) Tracy Smith		Title President	Signature <i>For T. Smith</i>			Date 6-15-26			

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

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Date of Notification (1) 05/26/2026		Name of Building Owner/Operator (2) JUN 18 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 177 Navesink River Rd						
			City, State, Zip Code Red Bank, NJ 07701						
		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 177 Navesink River Rd				Square Feet 1,360					
City (5) Red Bank, NJ 07701				# of Floors 1					
County (6) Monmouth				Bldg. Age 1947					
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9) VEL Construction, LLC					
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201- 466-0166					
				License No. 02126					
Start Date (10) 06/04/2026		Scheduled Completion Date (11) 06/11/2026		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
Crawlspace		x		pipe insulation	8 LF	x			
Utility Room		x		pipe insulation	6 LF	x			
Utility Room		x		pipe fittings	10	x			
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill				
City, State Elizabeth, NJ				Disposal Date 06/11/2026	City, State Pen Argyl, PA				
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 05/26/2026		

3720

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

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Check 3720

Date of Notification (1) 05/26/2026		Name of Building Owner/Operator (2) JUN 18 2026							
Agencies Notified	Type Notification	Street Address 9 Cornell Ave							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Neptune, NJ 07753							
		ASBESTOS CONTROL & LICENSING							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4)							
Street Address 9 Cornell Ave		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Neptune, NJ 07753		Square Feet 1,141	# of Floors 1						
		Bldg. Age 1972							
County (6) Monmouth	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201- 466-0166	License No. 02126						
Start Date (10) 05/27/2026	Scheduled Completion Date (11) 06/03/2026	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
Basement bedroom		X		floor tile & mastic	152 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 06/03/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature <i>Lubica Perez</i>			Date 05/26/2026			

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

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Check 3722

Date of Notification (1) 05/28/2026		Name of Building Owner/Operator (2) JUN 18 2026							
Agencies Notified	Type Notification	Street Address 19 Lorelei Rd							
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code West Orange, NJ 07052							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4)							
Street Address 19 Lorelei Rd		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) West Orange, NJ 07052		Square Feet 1,103	# of Floors 1						
		Bldg. Age 1957							
County (6) Essex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 201- 466-0166	License No. 02126						
Start Date (10) 06/09/2026	Scheduled Completion Date (11) 06/16/2026	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
Basement laundry room		x		floor tile	121 SF	x			
Basement family room		x		floor tile	329 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 06/16/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner	Signature <i>Lubica Perez</i>			Date 05/28/2026			

3754

RECEIVED
Check 3754

ASB-41 (R-06-08)

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

3753

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

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Check 3753

Date of Notification (1) 05/29/2026		Name of Building Owner/Operator (2) JUN 18 2026							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 55 Willow Ave ASBESTOS CONTROL & LICENSING							
		City, State, Zip Code Garwood, NJ 07027							
		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 55 Willow Ave		Square Feet 1,440	# of Floors 1						
City (5) Garwood, NJ 07027		Bldg. Age 1957							
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC						
Street Address		Street Address 75 Voorhis Place							
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456							
Project Manager for Monitoring Firm		Telephone No. 201- 466-0166	License No. 02126						
Start Date (10) 06/01/2026	Scheduled Completion Date (11) 06/08/2026	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☒ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement		x		floor tile & mastic	371 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 06/08/2026		City, State Pen Argyl, PA					
Completed by Lubica Perez		Title Owner		Signature Lubica Perez			Date 05/29/2026		

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

RECEIVED
 Check 3723

Date of Notification (1) 05/29/2026		Name of Building Owner/Operator (2) Gary Ruth		JUN 18 2026				
Agencies Notified		Type Notification		Street Address				
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☐ Initial ☒ Amended Amendment # <u>4</u> ☐ Emergency (including justification) ☐ Cancellation		388 South Livingston Avenue				
				City, State, Zip Code Livingston, NJ 07039				
		Name of Contact Gary Ruth		Telephone Number (917) 459-2175				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Aquinas Academy				Type of Facility (4)				
Street Address 388 South Livingston Avenue				☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)				
City (5) Livingston, NJ 07039				Square Feet TBD	# of Floors 1			
				Bldg. Age TBD				
County (6) Essex		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)				
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.		Name of Abatement Contractor (9) VEL Construction, LLC				
Street Address				Street Address 75 Voorhis Place				
City, State, Zip Code				City, State, Zip Code Ringwood NJ 07456				
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201- 466-0166	License No. 02126			
Start Date (10) 04/09/2026		Scheduled Completion Date (11) 08/10/2026		Name of OSHA Monitor				
Occupancy Status During Abatement (Check Only One)				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
Please see attached								
Name of Registered Waste Hauler Century Waste Services		NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 30	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 05/29/2026		

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

3724

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

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Print Form

JUN 1 8 2026 **Check 3724**

Date of Notification (1) 05/29/2026		Name of Building Owner/Operator (2) ASBESTOS CONTROL & LICENSING	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 174 Clairmont Terrace City, State, Zip Code Orange, NJ 07050
			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 174 Clairmont Terrace		Square Feet 2,267	# of Floors 2
City (5) Orange, NJ 07050		Bldg. Age 1926	
County (6) Essex	County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) VEL Construction, LLC
Street Address		Street Address 75 Voorhis Place	
City, State, Zip Code		City, State, Zip Code Ringwood NJ 07456	
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 201- 466-0166
License No. 02126			
Start Date (10) 06/02/2026	Scheduled Completion Date (11) 06/09/2026		Name of OSHA Monitor
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____			Street Address City, State, Zip Code
Scope of Work (Check All That Apply) ☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			
☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
Amount (Specify SF or LF) 78 SF	Abatement Type Removal Repair Encapsulate Enclosure		Amount (Specify SF or LF) 78 SF
Foyer	Yes No N/A x	ceiling plaster	Removal Repair Encapsulate Enclosure 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		Disposal Date 06/09/2026	
City, State Elizabeth, NJ		City, State Pen Argyl, PA	
Completed by Lubica Perez		Title Owner	Signature Lubica Perez
		Date 05/29/2026	

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

RECEIVED
Check 3755

Date of Notification (1) 05/29/2026		Name of Building Owner/Operator (2) JUN 18 2026	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 47 Troy Dr City, State, Zip Code Springfield, NJ 07081	
		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 47 Troy Dr		Square Feet 1,848	
City (5) Springfield, NJ 07081		# of Floors 2	
County (6) Union		Bldg. Age 1958	
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) _____		ASCM No. _____	
Street Address _____		Name of Abatement Contractor (9) VEL Construction, LLC	
City, State, Zip Code _____		Street Address 75 Voorhis Place	
Project Manager for Monitoring Firm _____		City, State, Zip Code Ringwood NJ 07456	
Telephone No. _____		Telephone No. 201- 466-0166	
License No. 02126		Name of OSHA Monitor _____	
Start Date (10) 06/09/2026		Scheduled Completion Date (11) 06/16/2026	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		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) Garage	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A x		
	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) pipe insulation		
Amount (Specify SF or LF) 20 LF			Abatement Type Removal Repair Encapsulate Enclosure x
Name of Registered Waste Hauler Century Waste Services			
NJDEP Waste Hauler ID No. 32797		Cubic Yards of Waste 5	Name of Registered Landfill Grand Central Sanitary Landfill
City, State Elizabeth, NJ		Disposal Date 06/16/2026	City, State Pen Argyl, PA
Completed by Lubica Perez		Title Owner	Signature Lubica Perez
Date 05/29/2026		_____	

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

4351574

MAR 30 2026

Date of Notification (1) 03/27/2026		Name of Building Owner/Operator (2) Madison Public School	
Agencies Notified	Type Notification	Street Address	
☒ EPA	☐ Initial	359 Woodland Road	
☐ DEP	☐ Amended	City, State, Zip Code	
☒ DOL	Amendment # _____	Madison, NJ 07940	
☒ DOH	☐ Emergency (including justification)	Name of Contact	Telephone Number
☒ DCA	☒ Cancellation	John Eschmann	973.593.3157 x 7189

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Torey J Sabatini		Type of Facility (4) ☒ School (K-12) Non Sub-8 ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & Commercial buildings, homes, etc.)	
Street Address 1 Glenwild Circle			
City (5) Madison, NJ 07940	Square Feet: 120,000	# of Floors 2	55+
County (6) Morris	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Maintenance	
Name of Monitoring Firm Hired by Building Owner (8) AERO Environmental Services		ASCM No.	Name of Abatement Contractor (9) Unicorn Contracting Corp.
Street Address 275 State Rte 10 E Ste 220		Street Address 14 Willow street	
City, State, Zip Code Succasunna, NJ 07876		City, State, Zip Code Bloomfield, NJ 07003	
Project Manager for Monitoring Firm Michael Berta		Telephone No. 973.920.9061	Telephone No. 973-333-9176
			License No. 01331
Start Date (10) 03/30/26		Scheduled Completion Date (11) 04/04/26	
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: On March 30th at 2:30p-10:30p, begins 31st 7am - 3:30 pm.		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		☒ 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
1st Fl. Hallway		x		Door transom panels	474 SF	x			
2nd Fl. Hallway		x		Door transom panels	308 SF	x			

Name of Registered Waste Hauler Unicorn Contracting Corp.		NJDEP Waste Hauler ID No. 0035844	Cubic Yards of Waste 2	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: 03/27/2026

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

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Date of Notification (1) 6/12/2026		Name of Building Owner/Operator (2) Ashland Chemical							
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☒ Amended Amendment #1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 1979 Atlas Street							
		City, State, Zip Code Columbus, Ohio 43228							
		Name of Contact Trey Richardson	Telephone Number 614-981-3990						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Ashland Chemical, Building 2600		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 50 Hercules Veterans Way		Square Feet 39,000	# of Floors 5						
City (5) Parlin		Bldg. Age 75							
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Manufacturing / Vacant							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection, Inc.		ASCN No. 0030	Name of Abatement Contractor (9) Precision Environmental Company						
Street Address 120 North Warren St.		Street Address 5500 Old Brecksville Road							
City, State, Zip Code Trenton, NJ 08608		City, State, Zip Code Independence, Ohio, 44131							
Project Manager for Monitoring Firm Rollie Jones		Telephone No. 609-392-4200	License No. 01212						
Start Date (10) 04/21/2026	Scheduled Completion Date (11) 09/30/2026	Name of OSHA Monitor Precision Environmental Company							
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 5500 Old Brecksville Road							
		City, State, Zip Code Independence, Ohio, 44131							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Please see attached									
Name of Registered Waste Hauler Champion Disposal Services		NJDEP Waste Hauler ID No. 32707	Cubic Yards of Waste 85	Name of Registered Landfill Waste Management Fairless Hills					
City, State Haines Port, New Jersey		Disposal Date 7/17/26		City, State Morrisville, PA 19067					
Completed by Tyler Jasinski		Title EH&S Director		Signature 		Date 6/12/2026			

- Building 2600

Location of Asbestos-Containing Materials (ACM)	Description of Asbestos-Containing Materials (ACM)	Amount	Abatement Type
Exterior Roof	Roof Material - 2" Built-up over Fiberboard	7,800 SF	Removal
Exterior Roof	Roof Flashing	760 LF	Removal
Exterior Roof	Mechanical Flashing	160 LF	Removal
7th Floor East Wall	Pipe Insulation	16 LF total	Removal

1 Exterior Work Area

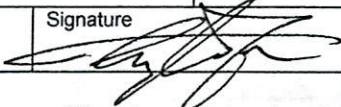
1 Seventh Floor Work Area <160sf -260lf

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

RECEIVED

JUN 18 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) 6/12/2026		Name of Building Owner/Operator (2) Ashland Chemical							
Agencies Notified ☐ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☒ Amended Amendment #1 ☐ Emergency (including justification) ☐ Cancellation	Street Address 1979 Atlas Street							
		City, State, Zip Code Columbus, Ohio 43228							
		Name of Contact Trey Richardson	Telephone Number 614-981-3990						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Ashland Chemical, Building 9319		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 50 Hercules Veterans Way		Square Feet 20,000	# of Floors 1						
City (5) Parlin		Bldg. Age 75							
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Manufacturing / Vacant							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection, Inc.		ASCM No. 0030	Name of Abatement Contractor (9) Precision Environmental Company						
Street Address 120 North Warren St.		Street Address 5500 Old Brecksville Road							
City, State, Zip Code Trenton, NJ 08608		City, State, Zip Code Independence, Ohio, 44131							
Project Manager for Monitoring Firm Rollie Jones		Telephone No. 609-392-4200	Telephone No. 2166426040						
		License No. 01212							
Start Date (10) 04/21/2026		Scheduled Completion Date (11) 09/30/2026							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Name of OSHA Monitor Precision Environmental Company							
		Street Address 5500 Old Brecksville Road							
		City, State, Zip Code Independence, Ohio, 44131							
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf									
☐ Renovation ☒ Demolition									
☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Please see attached									
Name of Registered Waste Hauler Champion Disposal Services		NJDEP Waste Hauler ID No. 32707	Cubic Yards of Waste 220	Name of Registered Landfill Waste Management Fairless Hills					
City, State Haines Port, New Jersey			Disposal Date 7/17/26	City, State Morrisville, PA 19067					
Completed by Tyler Jasinski		Title EH&S Director	Signature 			Date 06/12/2026			

- Building 9319

Location of Asbestos-Containing Materials (ACM)	Description of Asbestos-Containing Materials (ACM)	Amount	Abatement Type
Exterior - Roof 1	Roof Flashing - Silver	80 LF	Removal
	Roof Material - Rubber		
Exterior - Roof 2	Roof over 2" Built-up	20,000 SF	Removal
Exterior - Roof 2	Roof Flashing - Black	1,000 SF	Removal
Exterior - Roof 2	Roof Flashing - Silver	1,000 SF	Removal
Exterior - Roof 2	Overhang Caulk	18 LF	Removal

1 Exterior Work Area

27362

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

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Print Form

JUL 6 2026

Date of Notification (1) 06/29/2026		Name of Building Owner/Operator (2) L'OREAL							
Agencies Notified	Type Notification	Street Address 159 TERMINAL AVENUE							
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code CLARK, NJ							
		Name of Contact CINDY M ROQUE	Telephone Number 646-793-1402						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) L'OREAL		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 159 TERMINAL AVENUE		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) 07/11/2026	Scheduled Completion Date (11) 08/13/2026	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: Unoccupied		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
MENS RESTROOM		X		PIPE INSULATION	120 LF				
				(WRAP & CUT ONLY)					
DOORS		X		CAULKING	72 LF	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 08/13/2026	City, State MORRISVILLE, PA					
Completed by ELIZABETH MLADENOVIC		Title VP OF OPERATIONS		Signature <i>Elizabeth Mladenovic</i>			Date 06/29/2026		

2967

D&S Proj. #: 26-104

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

RECEIVED

Date of Notification (1) 10/16/13 10/12/16		Name of Building Owner/Operator (2) -	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended Amendment #: _____ ☒ Emergency (including justification) ☐ Cancellation	
Street Address 16 Haines Dr		City, State, Zip Code Bloomfield, NJ 07003	
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 16 Haines Dr			Square Feet 1,100 SF		
City (5) Bloomfield, NJ 07003			# of Floors 02		
County (6) Essex			Bldg. Age 80		
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) KLOMAX, LLC	
Street Address				Street Address 144 US Highway 46	
City, State, Zip Code				City, State, Zip Code Budd Lake, NJ 07828	
Project Manager for Monitoring Firm		Phone Number		Telephone Number 833-455-6629	
Start Date (10) 07/01/2026		Sched. Completion Date (11) 07/02/2026		License Number 02007	
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 KLOMAX, LLC	
				Street Address 144 US Highway 46	
				City, State, Zip Code Budd Lake, NJ 07828	

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)	Remove	Repair	Encap	Encl
	Yes	No	N/A						
BASEMENT		X		Pipe Insulation	68 LF	X			

Registered Waste Hauler KLOMAX, LLC	NJDEP Hauler ID# 0038241	Cubic Yards of Waste 1 CYD.	Name of Registered Landfill TULLYTOWN, RESOURCE RECOVERY
City, State Budd Lake, NJ 07828	Disposal Date TBD	City, State TULLYTOWN, PA	
Completed by (Print or Type) Gordana Stojanovska	Title Secretary	Signature Gordana S	Date 06/30/2026

4331

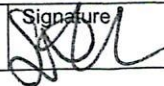
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED
W. Eric
JUN 27 2026

Date of Notification (1) 5/26/26		Name of Building Owner/Operator (2) Loop Properties LLC							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation							
Street Address 1450 St Georges Ave		City, State, Zip Code Avenel NJ							
Name of Contact Loop Properties LLC		Telephone Number 201-755-8717							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) 1450 Buliding		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1450 St Geroges Ave		Square Feet	# of Floors						
City (5) Avenel		Bldg. Age							
County (6) Woodbridge	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) 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. 201-500-9896	License No. 02004						
Start Date (10) 6/22/26	Scheduled Completion Date (11) 6/30/26	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 ☐ ≥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
Entire Commercial Building			x	Assisted Demo of Building	8,000 SF				
Name of Registered Waste Hauler LEM CONSTRUCTION LLC		NJDEP Waste Hauler ID No. 02004	Cubic Yards of Waste TBD	Name of Registered Landfill TBD					
City, State TBD			Disposal Date TBD	City, State TBD					
Completed by Michael Urbizagasetgui		Title Owner	Signature 			Date 6/12/26			

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

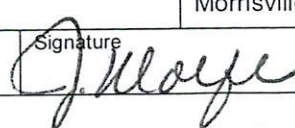
RECEIVED

Date of Notification (1) 06/03/2026		Name of Building Owner/Operator (2) The Catholic Diocese of Trenton							
Agencies Notified	Type Notification	Street Address 701 Lawrenceville Road							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA	☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Trenton, NJ 08648							
		Name of Contact Brian Malloy	Telephone Number 609-882-7900 x 147						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Notre Dame 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 601 Lawrence Road		Square Feet 48,000	# of Floors 2						
City (5) Lawrenceville		Bldg. Age 70							
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) USA Environmental Management, Inc.		ASCM No. 112	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address 344 West State Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Trenton, NJ 08618		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm John Duggan		Telephone No. 609-656-8101	License No. 00842						
Start Date (10) 06/22/2026	Scheduled Completion Date (11) 07/17/2026		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: Subchapter 8 Occupied Procedures		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 108 (Classroom)		X		Acoustical Ceiling Plaster	816 SF	X			
Room 110 (Office)		X		Black Mastic (Under Carpet)	124 SF	X			
Room 110A (Office)		X		Acoustical Ceiling Plaster	124 SF	X			
Room 110A (Office)		X		Black Mastic (Under Carpet)	124 SF	X			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 40	Name of Registered Landfill Fairless Landfill					
City, State Freehold, NJ			Disposal Date 07/17/2026	City, State Morrisville, PA					
Completed by Samantha Brown		Title Operations Coordinator		Signature 		Date 06/03/2026			

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Is Location Normally Used Solely by Maintenance/Custodial			Description of Asbestos Containing Material (ACM)	Amount (Specify SF or LF)	Removal	Repair
	Yes	No	N/A				
Room 110B (Office)		X		Black Mastic (Under Carpet)	120 SF	X	
Room 111 (Library)		X		Acoustical Ceiling Plaster	3,580 SF	X	
Room 111 (Library)		X		9"x9" Floor Tile & Mastic	2,070 SF	X	
Room 111 (Library)		X		9"x9" Floor Tile & Mastic (Under Carpet)	1,510 SF	X	
Room 111A (IT)		X		Acoustical Ceiling Plaster	118 SF	X	
Room 111A (IT)		X		9"x9" Floor Tile & Mastic (Under Carpet)	118 SF	X	
Room 111A (IT)		X		Fitting Insulation	1 LF	X	
Room 111 (Library)		X		Pipe & Fitting/Joint Insulation	8 LF	X	

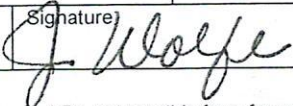
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 6/24/2026		Name of Building Owner/Operator (2) BASF CORPORATION		JUL 6 2026					
Agencies Notified		Type Notification		Street Address					
☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA		☐ Initial ☒ Amended Amendment # <u>2</u> ☐ Emergency (including justification) ☐ Cancellation		25 MIDDLESEX ESSEX TPKE					
		City, State, Zip Code ISLEIN NJ 08830		ASBESTOS CONTROL & LICENSING					
		Name of Contact Felix J. Spittler		Telephone Number 614-593-6647					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) BASF CORPORATION - HIGH HAZARD BLDG				Type of Facility (4)					
Street Address 25 MIDDLESEX TPKE				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) ISELIN		Square Feet 5,000		# of Floors 1	Bldg. Age 50+				
County (6) MIDDLESEX		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) COMMERCIAL					
Name of Monitoring Firm Hired by Building Owner (8) Atlas Technical Consultants		ASCM No.		Name of Abatement Contractor (9) PRISM Response					
Street Address 3 Terri Lane, Suite 4		Street Address 300 Penn Center Boulevard, Suite 701							
City, State, Zip Code Burlington, NJ 08016		City, State, Zip Code Pittsburgh, PA 15235							
Project Manager for Monitoring Firm John Lutz		Telephone No. 609.571.7522		Telephone No. 570-708-7776	License No. 01121				
Start Date (10) 04/27/2026		Scheduled Completion Date (11) 09/30/2026		Name of OSHA Monitor PRISM Response					
Occupancy Status During Abatement (Check Only One)				Street Address 300 Penn Center Boulevard, Suite 701					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code Pittsburgh, PA 15235					
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition		☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
See attached asbestos survey			X	See attached asbestos survey		X			
			X			X			
			X			X			
			X			X			
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. 17273		Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Central New Jersey				Disposal Date	City, State Morrisville, Pennsylvania				
Completed by Jessica Wolfe		Title Administrative Support			Signature 		Date 6/24/2026		

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

RECEIVED

Date of Notification (1) 6/24/2026		Name of Building Owner/Operator (2) BASF CORPORATION		JUL 6 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended Amendment # <u>2</u> ☐ Emergency (including justification) ☐ Cancellation		Street Address 25 MIDDLESEX ESSEX TPKE City, State, Zip Code ISLEIN NJ 08830 Name of Contact Felix J. Spittler Telephone Number 614-593-6647					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) BASF CORPORATION - CONNECTOR BLDG				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 25 MIDDLESEX TPKE				Square Feet 5,000 # of Floors 1 Bldg. Age 50+					
City (5) ISELIN				County Code (7) (STATE USE ONLY) _____ Current Use (Prior if being demolished) COMMERCIAL					
County (6) MIDDLESEX		Name of Monitoring Firm Hired by Building Owner (8) Atlas Technical Consultants		Name of Abatement Contractor (9) PRISM Response					
Street Address 3 Terri Lane, Suite 4		Street Address 300 Penn Center Boulevard, Suite 701		City, State, Zip Code Pittsburgh, PA 15235					
City, State, Zip Code Burlington, NJ 08016		Telephone No. 609.571.7522		Telephone No. 570-708-7776					
Project Manager for Monitoring Firm Johh Lutz		License No. 01121		Name of OSHA Monitor PRISM Response					
Start Date (10) 04/27/2026		Scheduled Completion Date (11) 09/30/2026		Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____					
Street Address 300 Penn Center Boulevard, Suite 701		City, State, Zip Code Pittsburgh, PA 15235							
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 asbestos survey			X	See attached asbestos survey	X				
			X		X				
			X		X				
			X		X				
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. 17273		Cubic Yards of Waste		Name of Registered Landfill Fairless Landfill			
City, State Central New Jersey		Disposal Date		City, State Morrisville, Pennsylvania					
Completed by Jessica Wolfe		Title Administrative Support		Signature 		Date 6/24/2026			

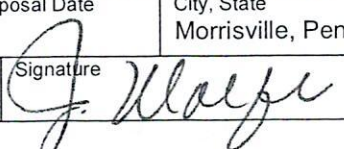
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 6/24/2026		Name of Building Owner/Operator (2) BASF CORPORATION		JUL 6 2026	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended Amendment # <u>2</u> ☐ Emergency (including justification) ☐ Cancellation		Street Address 25 MIDDLESEX ESSEX TPKE	
		City, State, Zip Code ISLEIN NJ 08830		Telephone Number 614-593-6647	
		Name of Contact Felix J. Spittler			
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) BASF CORPORATION - 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 25 MIDDLESEX TPKE				Square Feet 20,000	
City (5) ISELIN				# of Floors 1	
County (6) MIDDLESEX				Bldg. Age 60+	
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) COMMERCIAL			
Name of Monitoring Firm Hired by Building Owner (8) Atlas Technical Consultants		ASCM No.		Name of Abatement Contractor (9) PRISM Response	
Street Address 3 Terri Lane, Suite 4		Street Address 300 Penn Center Boulevard, Suite 701			
City, State, Zip Code Burlington, NJ 08016		City, State, Zip Code Pittsburgh, PA 15235			
Project Manager for Monitoring Firm John Lutz		Telephone No. 609.571.7522		License No. 01121	
Start Date (10) 04/27/2026		Scheduled Completion Date (11) 09/30/2026		Name of OSHA Monitor PRISM Response	
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 300 Penn Center Boulevard, Suite 701	
				City, State, Zip Code Pittsburgh, PA 15235	
Scope of Work (Check All That Apply)					
☐ ≥3 sf or ≥3 lf		☐ Renovation		☒ Full Containment with Negative Pressure	
☒ ≥160 sf or ≥260 lf		☒ Demolition		☒ Mini-Enclosure	
				☒ Glovebag Procedure	
				☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)
		Yes	No		
See attached asbestos survey				X	See attached asbestos survey
				X	
				X	
				X	
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. 17273		Cubic Yards of Waste	
City, State Central New Jersey		Disposal Date		Name of Registered Landfill Fairless Landfill	
Completed by Jessica Wolfe		Title Administrative Support		Signature <i>J. Wolfe</i>	
				Date 6/24/2026	

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

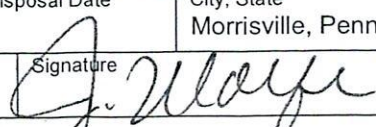
RECEIVED

Date of Notification (1) 6/24/2026		Name of Building Owner/Operator (2) BASF CORPORATION		JUL 6 2026					
Agencies Notified		Type Notification		Street Address					
☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA		☐ Initial ☒ Amended Amendment # <u>2</u> ☐ Emergency (including justification) ☐ Cancellation		25 MIDDLESEX ESSEX TPKE					
				City, State, Zip Code ISLEIN NJ 08830					
		Name of Contact Felix J. Spittler		Telephone Number 614-593-6647					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) BASF CORPORATION - 3 STORY R&D BLDG				Type of Facility (4)					
Street Address 25 MIDDLESEX TPKE				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) ISELIN				Square Feet 50,000	# of Floors 3				
County (6) MIDDLESEX				Current Use (Prior if being demolished) COMMERCIAL					
Name of Monitoring Firm Hired by Building Owner (8) Atlas Technical Consultants			ASCM No.	Name of Abatement Contractor (9) PRISM Response					
Street Address 3 Terri Lane, Suite 4			Street Address 300 Penn Center Boulevard, Suite 701						
City, State, Zip Code Burlington, NJ 08016			City, State, Zip Code Pittsburgh, PA 15235						
Project Manager for Monitoring Firm John Lutz			Telephone No. 609.571.7522	Telephone No. 570-708-7776	License No. 01121				
Start Date (10) 04/27/2026		Scheduled Completion Date (11) 09/30/2026		Name of OSHA Monitor PRISM Response					
Occupancy Status During Abatement (Check Only One)				Street Address 300 Penn Center Boulevard, Suite 701					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code Pittsburgh, PA 15235					
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 asbestos survey			X	See attached asbestos survey		X			
			X			X			
			X			X			
			X			X			
Name of Registered Waste Hauler Waste Management			NJDEP Waste Hauler ID No. 17273	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Central New Jersey				Disposal Date	City, State Morrisville, Pennsylvania				
Completed by Jessica Wolfe			Title Administrative Support	Signature 	Date 6/24/2026				

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

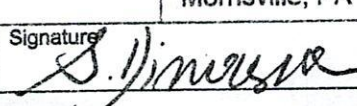
RECEIVED

JUL 6 2026

Date of Notification (1) 6/24/2026		Name of Building Owner/Operator (2) BASF CORPORATION							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☐ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended <u>2</u> ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation							
Street Address 25 MIDDLESEX ESSEX TPKE		City, State, Zip Code ISLEIN NJ 08830							
Name of Contact Felix J. Spittler		Telephone Number 614-593-6647							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) BASF CORPORATION - 1STORY R&D BLDG		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 25 MIDDLESEX TPKE		Square Feet 20,000							
City (5) ISELIN		# of Floors 1	Bldg. Age 50+						
County (6) MIDDLESEX		County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) COMMERCIAL						
Name of Monitoring Firm Hired by Building Owner (8) Atlas Technical Consultants		ASCM No.	Name of Abatement Contractor (9) PRISM Response						
Street Address 3 Terri Lane, Suite 4		Street Address 300 Penn Center Boulevard, Suite 701							
City, State, Zip Code Burlington, NJ 08016		City, State, Zip Code Pittsburgh, PA 15235							
Project Manager for Monitoring Firm John Lutz		Telephone No. 609.571.7522	Telephone No. 570-708-7776						
License No. 01121									
Start Date (10) 04/27/2026		Scheduled Completion Date (11) 09/30/2026							
Name of OSHA Monitor PRISM Response									
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 300 Penn Center Boulevard, Suite 701							
		City, State, Zip Code Pittsburgh, PA 15235							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition ☒ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
See attached asbestos survey			X	See attached asbestos survey		X			
			X			X			
			X			X			
			X			X			
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. 17273	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill					
City, State Central New Jersey			Disposal Date	City, State Morrisville, Pennsylvania					
Completed by Jessica Wolfe		Title Administrative Support		Signature 		Date 6/24/2026			

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

RECEIVED

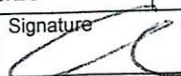
Date of Notification (1) 6/26/2026		Name of Building Owner/Operator (2) :							
Agencies Notified	Type Notification	Street Address 24 Lum Avenue							
☒ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Chatham, NJ 07928							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Residential		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 24 Lum Avenue		Square Feet	# of Floors						
City (5) Chatham		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) 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.	Telephone No. 201-577-1381						
			License No. 02008						
Start Date (10) 7/6/2026	Scheduled Completion Date (11) 7/20/2026	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
Exterior			X	Siding	1,650FS	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 6/26/2026			

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

RECEIVED

36004
* Amended *
New Material

New Check 10604

Date of Notification (1) 6/11/26		Name of Building Owner/Operator (2) Jacques School		JUL 7 2026					
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☒ Amended Amendment # <u>1</u> ☐ Emergency (including justification) ☐ Cancellation		Street Address 25 Washington Avenue Edgewater Park NJ 08010					
		City, State, Zip Code Edgewater Park NJ 08010		Telephone Number 609-877-2174					
		Name of Contact Ms. Nancy Lane							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Jacques School Transportation Office,				Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 25 Washington Ave.				Square Feet 1000+					
City (5) Edgewater Park NJ 08010				# of Floors 1					
County (6) Burlington				Bldg. Age 50+					
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) Epic Environmental		ASCM No.		Name of Abatement Contractor (9) Pernaco Inc.					
Street Address 80 Fork Bridge Road				Street Address PO Box 329					
City, State, Zip Code Pittsgrove NJ 08318				City, State, Zip Code West Berlin NJ 08091					
Project Manager for Monitoring Firm James Eberts		Telephone No. 856-889-1736		Telephone No. 856-753-9800					
				License No. 00727					
Start Date (10) 6/24/26		Scheduled Completion Date (11) 6/29/26		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) 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
Transportation Office			x	Floor Tile & Mastic	650 SF	x			
Transportation office			x	Glue Dots	150 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 6/26/26		City, State Morrisville PA 19067					
Completed by Anthony T Perna		Title President		Signature 		Date 6/11/26			

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

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

CK RECEIVED
 10605

Date of Notification (1) 6/24/26		Name of Building Owner/Operator (2) Gloucester City Board of Education		JUL 7 2026	
Agencies Notified		Type Notification		Street Address	
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		1300 Market Street	
				City, State, Zip Code Gloucester City NJ 08030	
				ASBESTOS CONTROL & LICENSING	
		Name of Contact James Eberts		Telephone Number 856-205-1077	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Gloucester City High School				Type of Facility (4)	
Street Address 1300 Market Street				☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
City (5) Gloucester City NJ 08030				Square Feet 1000+	
				# of Floors 1	
				Bldg. Age 50+	
County (6) Gloucester		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8) Epic Environmental		ASCM No.		Name of Abatement Contractor (9) Pernaco Inc.	
Street Address 80 Fork Bridge Road				Street Address PO Box 329	
City, State, Zip Code Pittsgrove NJ 08318				City, State, Zip Code West Berlin NJ 08091	
Project Manager for Monitoring Firm James Eberts		Telephone No. 856-205-1077		Telephone No. 856-753-9800	
				License No. 00727	
Start Date (10) 6/25/26		Scheduled Completion Date (11) 7/1/26		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: 3:PM Start				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)
	Yes	No	N/A		
Room A-9		x		Glue Dots	150 SF
Name of Registered Waste Hauler Pernaco Inc		NJDEP Waste Hauler ID No. 21787		Cubic Yards of Waste 2	
City, State Berlin NJ		Disposal Date 7/1/26		Name of Registered Landfill Fairless Hills	
				City, State Morrisville PA 19067	
Completed by Anthony T Perna		Title President		Signature 	
				Date 6/24/26	

2357

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

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JUL 7 2026

Date of Notification (1) 6/25/2026		Name of Building Owner/Operator (2) I							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 224 Maryland Avenue City, State, Zip Code Paterson, NJ 07503 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 224 Maryland Avenue		Square Foot 1,300	# of Floors 2						
City (5) Paterson		Bldg. Age 55+							
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) 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) 06/27/2026	Scheduled Completion Date (11) 06/28/2026	Name of OSHA Monitor Envirovisjon 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							
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☐ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition		City, State, Zip Code Fair Lawn, NJ 07410							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulate	Enclosure
Basement boiler room		X		TSI	30 LF	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 6/25/2026					

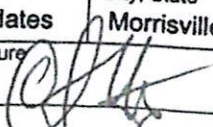
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) June 19, 2026		Name of Building Owner/Operator (2) Colgate-Palmolive	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	
Street Address 909 River Road		City, State, Zip Code Piscataway, NJ 08854	
Name of Facility Where Abatement is Taking Place (3) Colgate-Palmolive		Name of Contact Project Manager	
Street Address 909 River Road		Telephone Number 973-234-7026	
City (5) Piscataway		FACILITY INFORMATION	
County (6) Middlesex		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)	
County Code (7) (STATE USE ONLY)		Square Feet 200,000	
Name of Monitoring Firm Hired by Building Owner (8) Emerald Environmental Group, LLC		# of Floors Bldg. Age	
Street Address 22 Ottawa Rd N		Current Use (Prior if being demolished) business	
City, State, Zip Code Morganville, NJ 07751-1346		Name of Abatement Contractor (9) The MACK Group, LLC	
Project Manager for Monitoring Firm Joseph Rizzo, CSP, CHMM		Street Address 1500 Kings HWY N, STE 209	
Start Date (10) 6/24/26		City, State, Zip Code Cherry Hill, NJ 08034	
Scheduled Completion Date (11) 8/31/26		Telephone No. 848-275-9187	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours Other - Describe: 7am - 3:30 pm		Telephone No. (973) 759 - 5000	
		License No. 00781	
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		Name of OSHA Monitor The MACK Group, LLC.	
☐ Renovation ☐ Demolition		Street Address 1500 Kings HWY N, STE 209	
		City, State, Zip Code Cherry Hill, NJ 08034	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) mechanical penthouse		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Transite	
Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes ☒ No ☐ N/A ☐		Amount (Specify SF or LF) 13,480 sf	
		Abatement Type Removal ☒ Repair ☐ Encapsulate ☐ Enclosure ☐	
Name of Registered Waste Hauler Century Waste Services LLC		Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
NJ DEP Waste Hauler ID No. 4509		Cubic Yards of Waste 134.8	
City, State Elizabeth, NJ		Name of Registered Landfill IESI Bethlehem landfill / Minerva Ent.	
Completed by Steve King		City, State Bethlehem, PA / Waynesburg, OH	
Title V.P.		Disposal Date 8/31/26	
		Signature 	
		Date 6/19/26	

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

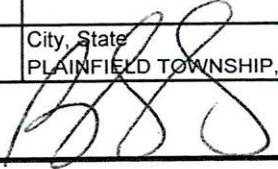
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Date of Notification (1) 6/24/2026		Name of Building Owner/Operator (2) Federal Reserve Bank of New York							
Agencies Notified		Street Address 32 Liberty Pl							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☐ Initial ☒ Amended ☐ Amendment # 02 ☐ Emergency (including justification) ☐ Cancellation							
		City, State, Zip Code New York, NY 10038							
		Name of Contact Albert Acevedo							
		Telephone Number 347-503-6918							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) FRBNY Cash Services Center		Type of Facility (4)							
Street Address 15 Mountainview Rd		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Warren		Square Feet 535,000	# of Floors 5						
County (6) Somerset		Bldg. Age 43							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Office building							
Name of Monitoring Firm Hired by Building Owner (8) Langan Engineering		ASCM No. 00099	Name of Abatement Contractor (9) Vollers Excavating & Construction, Inc						
Street Address 1 University Square, Suite 110		Street Address 3311 Route 22 East							
City, State, Zip Code Princeton, NJ 08540		City, State, Zip Code North Branch, NJ 08876							
Project Manager for Monitoring Firm Craig Napolitano		Telephone No. 646-210-6500	Telephone No. 908-725-1026						
Start Date (10) 6/15/2026		Scheduled Completion Date (11) 7/3/2026	License No. 02133						
Occupancy Status During Abatement (Check Only One)		Name of OSHA Monitor Nick Wahba							
☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours Other - Describe: <u>Structure demolished, currently a construction site</u>		Street Address 3311 Route 22 East							
Scope of Work (Check All That Apply)		City, State, Zip Code North Branch, NJ 08876							
☐ ≥ 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
Sewer and storm pipe system			X	Transite pipes, tar/mastic coating	2730 LF	X			
Name of Registered Waste Hauler Mazza Recycling Services		NJDEP Waste Hauler ID No. 36891	Cubic Yards of Waste 140 CY	Name of Registered Landfill Fairless Landfill					
City, State Tinton Falls NJ		Disposal Date multiple dates		City, State Morrisville, PA					
Completed by Chris Bergacs		Title Director of EHS		Signature 		Date 6/24/2026			

44328

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

RECEIVED
44328

Date of Notification (1) 7 / 2 / 2026		Name of Building Owner/Operator (2) VERIZON NJ INC.	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Street Address 773 SUMMIT AVENUE City, State, Zip Code JERSEY CITY, NEW JERSEY 07307	
Type Notification ☒ Initial Notification ☐ Amended Notification ☐ Cancellation ☐ On Hold ☐ EMERGENCY NOTIFICATION		Name of Contact RAFAEL LEONARDO	
		Telephone Number 732-289-7014	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) VERIZON		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (ie. private & commcl. bldgs., homes, etc.)	
Street Address 773 SUMMIT AVENUE		Square Feet 75,000	# of Floors 3
City (5) JERSEY CITY		Bldg. Age 65+	
County (6) HUDSON	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Pharm. Lab. COMMUNICATION BUILDING	
Name of Monitoring Firm Hired by Building Owner (8) RBS ENVIRONMENTAL		ASCM No. 17	Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION
Street Address 24 VETERANS SQUARE		Street Address 313 SPOOK ROCK ROAD	
City, State, Zip Code MEDIA, PA 19063		City, State, Zip Code SUFFERN, NEW YORK 10901	
Project Manager for Monitoring Firm MIKE STOCKU	Telephone Number 609-304-3969	Telephone Number 845-369-7500	License Number 1101
Expected State Date (10) 7 / 14 / 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 1376 ROUTE 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		☒ Full Containment ☐ Mini-Enclo. ☐ 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) Yes No N/A		Description of Asbestos-Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, or other miscellaneous)
ROOF -PENTHOUSE	X		DUCT INSULATION
ROOF -PENTHOUSE	X		DUCT VIBRATION DAMPER
ROOF -PENTHOUSE	X		FLOOR TILE / MASTIC
Name of Registered Waste Hauler NEWARK CARTING		NJDEP Waste Hauler ID No. 913	Cubic Yards of Waste 30
City, State NEWARK, NEW JERSEY		Name of Registered Landfill GRAND CENTRAL SANITARY	
Disposal Date 7/14/2026-9/30/2026		City, State PLAINFIELD TOWNSHIP, PA	
Completed by (Print or Type) BENJAMIN SANCHEZ	Title VICE PRESIDENT, OPERATIONS	Signature 	Date 7-2-26

1766

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

RECEIVED

Date of Notification (1) 6/22/2026		Name of Building Owner/Operator (2)							
Agencies Notified		Type Notification		Street Address					
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		96 Woodside Ave City, State, Zip Code Midland Park NJ 07432					
				Telephone Number					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private Residential				Type of Facility (4)					
Street Address 96 Woodside Ave				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Midland Park				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) MKD Property Maintenance LLC					
Street Address				Street Address 105 Van Riper Avenue					
City, State, Zip Code				City, State, Zip Code Clifton NJ 07011					
Project Manager for Monitoring Firm		Telephone No.		Telephone No. 201/899/9008	License No. 01336				
Start Date (10) 7/3/2026		Scheduled Completion Date (11) 7/30/2026		Name of OSHA Monitor Empire Environmental Ltd.					
Occupancy Status During Abatement (Check Only One)				Street Address 150 River Rd, F4					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code Montville NJ					
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☐ Renovation ☒ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Ground		X		Transite	156 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 6/22/2026		

1763

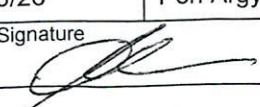
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

RECEIVED

Date of Notification (1) 6/16/2026		Name of Building Owner/Operator (2)	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 300 Edgewood Rd. City, State, Zip Code Linden, NJ 07036 Name of Contact _____ Telephone Number _____
	FACILITY INFORMATION		
	Name of Facility Where Abatement is Taking Place (3) Private Residential Street Address 300 Edgewood Rd City (5) Linden 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 _____ # of Floors _____ Bldg. Age _____ County Code (7) (STATE USE ONLY) _____ Current Use (Prior if being demolished) _____
	Name of Monitoring Firm Hired by Building Owner (8) Empire Environmental Ltd. Street Address 150 River Rd, Suite F4 City, State, Zip Code Montville NJ Project Manager for Monitoring Firm Michael Boggi Start Date (10) 6/29/2026		ASCM No. _____ Name of Abatement Contractor (9) MKD Property Maintenance LLC Street Address 105 Van Riper Avenue City, State, Zip Code Clifton NJ 07011 Telephone No. 201 704 3878 Telephone No. 201/899/9008 License No. 01336 Scheduled Completion Date (11) 7/29/2026 Name of OSHA Monitor Empire Environmental Ltd. Street Address 150 River Rd, F4 City, State, Zip Code Montville NJ
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) Cafeteria ceiling	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A X	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Ceiling tiles	Amount (Specify SF or LF) 160 SF
		Abatement Type Removal Repair Encapsulate Enclosure x	
Name of Registered Waste Hauler MKD Property Maintenance LLC		NJDEP Waste Hauler ID No. 003791	Cubic Yards of Waste N/A
City, State Clifton NJ 07011		Disposal Date N/A	Name of Registered Landfill Fairless Landfill City, State Morrisville PA 19067
Completed by Darko Raloski	Title Owner	Signature 	Date 6/16/2026

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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) 6/8/2026		Name of Building Owner/Operator (2) Newark Public Schools		JUL 7 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 190 Muhammad Ali Ave ASBESTOS CONTROL & LICENSING						
			City, State, Zip Code Newark, NJ 07108						
			Name of Contact Benjamin Olagadejo		Telephone Number 973.733.7220 Ext. 8149				
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Avon 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 129 Avon Ave				Square Feet 60000	# of Floors 2				
City (5) Newark NJ				Bldg. Age 60+					
County (6) Union		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Elementary school					
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental			ASCM No.	Name of Abatement Contractor (9) NIRAM INC					
Street Address 1253 North Church st			Street Address 4 E. Frederick pl.						
City, State, Zip Code Moorsetown, NJ 08057			City, State, Zip Code Cedar Knolls, 07927, NJ						
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 8568408800		Telephone No. 973-299-4455	License No. 01081				
Start Date (10) 6/24/26		Scheduled Completion Date (11) 07/30/26		Name of OSHA Monitor Niram 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 4 E Frederick pl					
				City, State, Zip Code Cedar Knolls, NJ, 07927					
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 suite offices	x			flooring various layers	1000 SF	x			
	x					x			
Name of Registered Waste Hauler Waste Managment		NJDEP Waste Hauler ID No. 71273		Cubic Yards of Waste 40	Name of Registered Landfill Grand Central Sanitary Landfill Inc				
City, State 100 Avenua A, Newark, NJ				Disposal Date 07/15/26	City, State Pen Argyl, PA, 18072				
Completed by Marcin Owczarski		Title Pr. Mngr		Signature 		Date 06/08/26			

62207

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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) 6/8/2026		Name of Building Owner/Operator (2) Newark Public Schools		JUL 7 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 190 Muhammad Ali Ave						
			City, State, Zip Code Newark, NJ 07108						
		Name of Contact Benjamin Olagadejo		Telephone Number 973.733.7220 Ext. 8149					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Wilson Ave 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 Ave									
City (5) Newark NJ			Square Feet 60000	# of Floors 2	Bldg. Age 60+				
County (6) Union		County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Elementary school						
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental		ASCM No. _____	Name of Abatement Contractor (9) NIRAM INC						
Street Address 1253 North Church st			Street Address 4 E. Frederick pl.						
City, State, Zip Code Moorsetown, NJ 08057			City, State, Zip Code Cedar Knolls, 07927, NJ						
Project Manager for Monitoring Firm Jim Guilardi		Telephone No. 8568408800	Telephone No. 973-299-4455	License No. 01081					
Start Date (10) 7/2/26		Scheduled Completion Date (11) 07/30/26		Name of OSHA Monitor Niram 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 4 E Frederick pl						
			City, State, Zip Code Cedar Knolls, NJ, 07927						
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, Kitchen office & storage	x			flooring various layers	1800SF	x			
Room 114	x			floor tile and mastic	900 sf	x			
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. 71273	Cubic Yards of Waste 40	Name of Registered Landfill Grand Central Sanitary Landfill Inc					
City, State 100 Avenua A, Newark, NJ			Disposal Date 07/15/26	City, State Pen Argyl, PA, 18072					
Completed by Marcin Owczarski		Title Pr. Mngr	Signature			Date 06/08/26			

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PAID

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

Print Form

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JUL 7 2026
JUN 25 2026

Date of Notification (1) 6/8/2026		Name of Building Owner/Operator (2) Newark Public Schools		JUL 7 2026	
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 190 Muhammad Ali Ave City, State, Zip Code Newark, NJ 07108 Name of Contact Benjamin Olagadejo Telephone Number 973.733.7220 Ext. 8149	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) University HS			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 pl			Square Feet 60000		
City (5) Newark, NJ			# of Floors 2		Bldg. Age 60+
County (6) Union		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Elementary school	
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental		ASCM No. _____		Name of Abatement Contractor (9) NIRAM INC	
Street Address 1253 North Church st		Street Address 4 E. Frederick pl.			
City, State, Zip Code Moorsetown, NJ 08057		City, State, Zip Code Cedar Knolls, 07927, NJ			
Project Manager for Monitoring Firm Jim Guillard		Telephone No. 8568408800		Telephone No. 973-299-4455	
Start Date (10) 6/29/26		Scheduled Completion Date (11) 07/30/26		License No. 01081	
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 Niram inc		
			Street Address 4 E Frederick pl		
			City, State, Zip Code Cedar Knolls, NJ, 07927		
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) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	
room 102		x		flooring various layers	
Cafeteria & caf storage rm		x		floor tile and mastic	
Name of Registered Waste Hauler Waste Management		NJDEP Waste Hauler ID No. 71273		Cubic Yards of Waste 40	
City, State 100 Avenua A, Newark, NJ		Disposal Date 07/15/26		Name of Registered Landfill Grand Central Sanitary Landfill Inc	
City, State 100 Avenua A, Newark, NJ		Disposal Date 07/15/26		City, State Pen Argyl, PA, 18072	
Completed by Marcin Owczarski		Title Pr. Mngr		Signature 	
				Date 06/08/26	

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

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Date of Notification (1) 06/25/2026		Name of Building Owner/Operator (2) Tenaflly Public Schools		JUL 7 2026				
Agencies Notified		Type Notification		Street Address				
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☒ DCA		☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation		500 Tenaflly Road				
				City, State, Zip Code Tenaflly, NJ 07670				
		Name of Contact Stephen Frost		Telephone Number (973) 361-0808				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Tenaflly Middle School				Type of Facility (4)				
Street Address 10 Sunset Lane				☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)				
City (5) Tenaflly, NJ 07670				Square Feet 122,000	# of Floors 1+			
County (6) Bergen		County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Educational				
Name of Monitoring Firm Hired by Building Owner (8) Enivirovision Consultants, Inc.		ASCM No. 00079		Name of Abatement Contractor (9) Spes Contracting LLC				
Street Address 20-21 Wagaraw Road - Bldg. 35E				Street Address 59 Beaverbrook Rd. Ste 302 E				
City, State, Zip Code Fair Lawn, NJ 07410				City, State, Zip Code Lincoln Park, NJ, 07035				
Project Manager for Monitoring Firm Fredirck Larson		Telephone No. 973 - 636 - 9145		Telephone No. 973-807-6330	License No. #01383			
Start Date (10) 07/06/2026		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. Ste 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) <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
Please see attached document.								
Name of Registered Waste Hauler Spes Contracting LLC		NJDEP Waste Hauler ID No. 0038075		Cubic Yards of Waste 50Y	Name of Registered Landfill Tri State Transfer & Associates			
City, State Lincoln Park, NJ, 07035				Disposal Date TBD	City, State Bronx, NY			
Completed by Branslav Paylov		Title General Manager		Signature 		Date 06/25/2026		

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

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Date of Notification (1) 6/30/26		Name of Building Owner/Operator (2) Brandon Raso		JUL 7 2026					
Agencies Notified		Type Notification		Street Address					
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		23 Plymouth Rd					
				City, State, Zip Code Hammonton NJ 08037					
		Name of Contact Brandon Raso		Telephone Number 609-892-2001					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Former Office				Type of Facility (4)					
Street Address 209 South White Horse Pike				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Hammonton, NJ, 08037				Square Feet 1500+	# of Floors 2				
County (6) Atlantic				Bldg. Age 50+					
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) office							
Name of Monitoring Firm Hired by Building Owner (8) Coastal Environmental Compliance		ASCM No. _____		Name of Abatement Contractor (9) Pernaco Inc.					
Street Address PO Box 167		Street Address PO Box 329							
City, State, Zip Code Hammonton, NJ, 08037		City, State, Zip Code West Berlin NJ 08091							
Project Manager for Monitoring Firm Cathy Ledden		Telephone No. 609-820-9312		Telephone No. 856-753-9800	License No. 00727				
Start Date (10) 7-13-26		Scheduled Completion Date (11) 7-27-26		Name of OSHA Monitor Same					
Occupancy Status During Abatement (Check Only One)				Street Address					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior Windows & Doors			x	Caulking	440 LF	x			
Kitchen & 2nd Floor Bathroom			x	Floor Tile & Mastic	360 SF	x			
Basement			x	Flue Packing	1 SF	x			
Exterior Garage			x	Transite Siding	120 SF	x			
Name of Registered Waste Hauler Pernaco Inc.		NJDEP Waste Hauler ID No. 21787		Cubic Yards of Waste 4	Name of Registered Landfill Atlantic County MUA				
City, State West Berlin NJ		Disposal Date 7/27/26		City, State Egg Harbor Twp NJ					
Completed by Anthony T Perna		Title President		Signature 		Date 6/30/26			

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

RECEIVED

JUL 7 2026

ASBESTOS CONTROL & LICENSING

Date of Notification (1) June 22, 2026		Name of Building Owner/Operator (2) Bloomfield Board of Education						
Agencies Notified	Type Notification	Street Address 155 Broad Street						
☒ EPA ☒ DEP ☒ DOL	☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Bloomfield, NJ 07003						
☒ DOH ☒ DCA		Name of Contact Duvany Acosta	Telephone Number 201-794-3700 X 3760					
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Franklin Elementary School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)						
Street Address 85 Curtis Street		Square Feet # of Floors Bldg. Age						
City (5) Bloomfield		Current Use (Prior if being demolished)						
County (6) Essex		County Code (7) (STATE USE ONLY)						
Name of Monitoring Firm Hired by Building Owner (8) Briggs Associates		ASCM No.	Name of Abatement Contractor (9) Osiyo Inc					
Street Address 3 Crosswicks Street		Street Address 292 Main Street, #261						
City, State, Zip Code Bordentown, NJ 08505		City, State, Zip Code Harleysville, PA 19438						
Project Manager for Monitoring Firm Michael Hoodak		Telephone No. 609-298-5520	Telephone No. 610-400-8711 License No. 01373					
Start Date (10) July 13, 2026		Scheduled Completion Date (11) July 31, 2026						
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours Other - Describe: <u>Areas vacated during entire period of abatement</u>		Name of OSHA Monitor Schneider Laboratories Global Inc.						
		Street Address 2512 West Cary Street						
		City, State, Zip Code Richmond, VA 23220						
Scope of Work (Check All That Apply)								
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition						
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
SEE ATTACHED LIST		X			X			
Name of Registered Waste Hauler Century Waste Services LLC		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste	Name of Registered Landfill Fairless Landfill				
City, State Elizabeth, NJ		Disposal Date		City, State Morrisville, PA				
Completed by Carol Bradford		Title President	Signature <i>Carol Bradford</i>		Date June 22, 2026			



OSIYO INC.

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

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

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

**OSIYO INC.**

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

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

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

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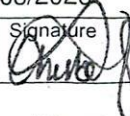
Print Form

JUL 7 2026

Date of Notification (1) 06/29/2026		Name of Building Owner/Operator (2)							
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation		Street Address 42 Bosworth Lane						
			City, State, Zip Code Willingboro, NJ 08046						
			Name of Contact		Telephone Number				
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Street Address 42 Bosworth Lane				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) Willingboro		Square Feet 1,372		# of Floors 2	Bldg. Age 67				
County (6) Burlington		County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Residence					
Name of Monitoring Firm Hired by Building Owner (8) Management & Environmental Consulting Serv			ASCM No.		Name of Abatement Contractor (9) Shade Environmental, LLC				
Street Address PO Box 341			Street Address 623 Cutler Avenue						
City, State, Zip Code Chesterfield, NJ 08515			City, State, Zip Code Maple Shade, NJ 08052						
Project Manager for Monitoring Firm Nora Pearse		Telephone No. 609-298-4070		Telephone No. 856-755-0099	License No. 00842				
Start Date (10) 07/23/2026		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) <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 Right Rear Bedroom			X	Joint Compound/Sheetrock	397 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 07/28/2026	City, State Morgantown, PA				
Completed by Shannon Thomson		Title Operations Manager		Signature <i>Shannon Thomson</i>		Date 06/29/2026			

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

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Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended ☐ Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	3 N. Point Road ASBESTOS CONTROL & LICENSING							
		City, State, Zip Code Lincroft, NJ 07738							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
Street Address 3 N. Point Road		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Lincroft		Square Feet 3,062	# of Floors 3						
		Bldg. Age 70							
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) Management & Environmental Consulting Serv		ASCM No.	Name of Abatement Contractor (9) Shade Environmental, LLC						
Street Address PO Box 341		Street Address 623 Cutler Avenue							
City, State, Zip Code Chesterfield, NJ 08515		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Nora Pearse		Telephone No. 609-298-4070	Telephone No. 856-755-0099						
		License No. 00842							
Start Date (10) 07/29/2026	Scheduled Completion Date (11) 08/03/2026	Name of OSHA Monitor EMSL Analytical, Inc.							
Occupancy Status During Abatement (Check Only One)		Street Address							
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		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
Basement			X	Floor Tile	489 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 08/03/2026		City, State Morgantown, PA					
Completed by Christina Fay		Title VP of Operations		Signature 		Date 06/26/2026			

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STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 AND 12:120)

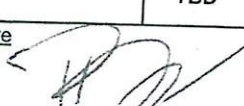
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JUL 6 2026

Date of Notification (1) 6/25/2026		Name of Building Owner/Operator (2) Bloomfield Board of Education	
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		Notification Type ☒ Initial ☐ Amended # _____ ☐ Emergency (including justification) ☐ Cancellation	
Street Address 155 Broad St		City, State, Zip Code Bloomfield, NJ 07003	
Name of Contact Vicky Guo		Tel. Number 973 680-8501	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Demarest 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 465 Broughton Ave,		City (5) Bloomfield	
County (6) Essex		County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner (8) Briggs Associates		ASCM No. 00004	
Street Address 3 Crosswicks St		Name of Contractor (9) MTM Metro Corporation	
City, State, Zip Code Bordentown, NJ 08505		Street Address 135-137 McBride Ave	
Project Manager for Monitoring Firm Mike Hoodak		City, State, Zip Code Paterson, NJ 07501	
Telephone Number 609.298.5520		Telephone Number 973-742-5030	
Scheduled Start Date (10) 07/08/2026		License Number 00809	
Scheduled Completion Date (11) 07/31/2026		Name of OSHA Monitor MTM Metro Corporation	
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 by other trades		Street Address 135-137 McBride Avenue	
		City, State, Zip Code Paterson, NJ 07501	
Source of Work (Check all that apply) ☐ > 3 sf or > 3 lf ☒ > 160 sf or > 260 lf ☒ Renovation ☐ Demolition ☒ CLEAN-UP & REPAIR ☐ Full Containment with Negative Pressure ☐ Non-Exempted(*) & Non-Friable Procedure ☐ Mini-Enclosure ☐ Glovebag Procedure			
Location of Asbestos-Containing Material (ACM) in Facility (13) Attic	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES ☒ NO ☐ N/A ☐	Description of ACM (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) Corrugated Duct Ins Clean/up repair	Amount (Specify SF or LF) 2,400 sf
		Abatement Type Rem. ☐ Rep. ☒ Encap ☒ Enclose ☐	
Name of Reg. Waste Hauler MTM Metro Corporation		NJDEP Waste Hauler ID # 26552	Cubic Yards of Waste 20
City, State 135-137 McBride Ave		Name of Reg. Landfill Tullytown	
Disp. Date 0731/2026		City, State Tullytown, PA	
Completed by (Print or Type) Mike Damevski		Title Project manager	Signature Mike Damevski
		Date 06/25/2026	

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

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Date of Notification (1) 6/29/26		Name of Building Owner/Operator Manalapan Englishtown Regional School District	
Agencies Notified ☒ EPA ☐ DCA ☒ DOL ☒ DEP ☒ DOH		Notification Type ☒ Initial Notification ☐ Amended # ☐ Emergency notification (including justification) ☐ Cancelled	
Street Address 54 Main St		City, State, Zip Code Englishtown, NJ 07726	
Name of Contact Veronica Wolf, Business Administrator		Telephone Number 732-786-2500	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Clark Mills Elementary School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (other than K-12) ☐ Other (i.e. private & commercial buildings., homes, etc.)	
Street Address 34 Gordons Corner Road		Sq. Feet: NA # of Floors: 1 Bldg. Age: unknown	
City (5) Manalapan	County (6) Monmouth	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner (8) TBD Ahera Consultants		ASCM No.	
Street Address PO Box 35		Name of Contractor (9) Panoramic Window & Door Systems Inc.	
City, State, Zip Code Oceanville, NJ 08231		Street Address 712 Sergeantsville Road	
Project Manager for Monitoring Firm John Smoyer		Telephone Number 609-652-1833	Telephone Number 732-926-0900
Scheduled Start Date (10) 7/8/26		License Number 01237	
Scheduled Completion Date (11) 8/19/26		Name of OSHA Monitor Panoramic Window & Door Systems Inc.	
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement X Abatement Performed Outside of Normal Facility Hours - Describe 7AM-3PM ☐ Other - Describe:		Street Address 712 Sergeantsville Road	
		City, State, Zip Code Stockton NJ 08559	
Source of Work (Check all that apply)			
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf			
☒ Renovation ☐ Demolition			
☐ Mini-Enclosure ☐ Glove bag Procedure ☒ Non-Friable Procedure			
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other misc.)	Amount (Specify SF or LF)
Window panel	☐ YES ☐ NO ☒ NA	Glazing	1,440 SF
Window	☐ YES ☐ NO ☐ NA	Caulk	1,078 LF
Name of Reg. Waste Hauler Panoramic Window and Door Systems Inc.		NJDEP Waste Hauler ID # 0036057	Cubic Yards of Waste TBD
		Name of Registered Landfill Chrin Brothers Sanitary Landfill	
Completed by (Print or Type) Paul Nagy		Title Vice President	Signature 
		Disposal Date TBD	Date 6/29/26
		City, State Easton, PA	

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) 06/30/2026		Name of Building Owner/Operator (2) Ramapo Indian HS District							
Agencies Notified	Type Notification	Street Address 131 Yawpo Ave							
☐ EPA ☒ DEP ☐ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Oakland, Nj 07436							
		Name of Contact Mark Coffini	Telephone Number 201-416-8100						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Indian Hills HS		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 97 Yawpo Ave		Square Feet	# of Floors						
City (5) Oakland, Nj 07436		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) Aero Environmental		ASCM No.	Name of Abatement Contractor (9) Nick Restoration LLC						
Street Address 275 Rt 10 East		Street Address 72 Brookside rd							
City, State, Zip Code Succasunna		City, State, Zip Code Randolph NJ							
Project Manager for Monitoring Firm Michael Berta		Telephone No. 973-920-9061	License No. 01358						
Start Date (10) 07/10/2026	Scheduled Completion Date (11) 07/12/2026	Name of OSHA Monitor Nick Restotation 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 72 Brookside rd							
		City, State, Zip Code Randolph, NJ							
Scope of Work (Check All That Apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Cafeteria		x		Pipe Fittings Wrap & cut	30 LF	x			
Name of Registered Waste Hauler Century		NJDEP Waste Hauler ID No. 32797	Cubic Yards of Waste tbd	Name of Registered Landfill GROWS					
City, State Elizabeth			Disposal Date TBD	City, State Tullytown					
Completed by Nikica Mrda		Title President	Signature Nikica Mrda			Date 06/30/2026			

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

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Date of Notification (1) 07/01/2026		Name of Building Owner/Operator (2) NJ Department of Human Services		JUL 6 2026					
Agencies Notified ☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 222 South Warren Street City, State, Zip Code Trenton, NJ 08625 Name of Contact Steven Sofkos Telephone Number 856-466-0857					
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Vineland Developmental Center - Lee Cottage				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 1676 E. Landis Avenue				Square Feet 100,000					
City (5) Vineland				# of Floors 2					
County (6) Cumberland				Bldg. Age 67					
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished) Developmental Center							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection, Inc.		ASCM No. _____		Name of Abatement Contractor (9) Shade Environmental, LLC					
Street Address 120 North Warren Street		Street Address 623 Cutler Avenue							
City, State, Zip Code Trenton, NJ 08608		City, State, Zip Code Maple Shade, NJ 08052							
Project Manager for Monitoring Firm Roland Jones		Telephone No. 609-392-4200		License No. 00842					
Start Date (10) 07/01/2026		Scheduled Completion Date (11) 07/08/2026		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: Abatement performed in vacated 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)			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
Entry Foyer		X		Pipe Insulation (Wrap & Cut)	4 LF	X			
Entry Foyer		X		Pipe Insulation	3 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 07/08/2026		City, State Morgantown, PA					
Completed by Samantha Brown		Title Operations Coordinator		Signature 		Date 07/01/2026			

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

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Date of Notification (1) 06/26/2026		Name of Building Owner/Operator (2) JUL 6 2026							
Agencies Notified	Type Notification	Street Address							
☒ EPA ☒ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	24 Edison Avenue							
		City, State, Zip Code Cherry Hill, NJ 08002							
		Name of Contact	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3)		Type of Facility (4)							
Street Address 24 Edison Avenue		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Cherry Hill		Square Feet 1,210	# of Floors 1						
		Bldg. Age 70							
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 Pearse		Telephone No. 609-298-4070	Telephone No. 856-755-0099						
		License No. 00842							
Start Date (10) 07/14/2026	Scheduled Completion Date (11) 07/16/2026	Name of OSHA Monitor EMSL Analytical, 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: _____		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
Office			X	Floor Tile	100 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 07/16/2026		City, State Morgantown, PA					
Completed by Shannon Thomson		Title Operations Manager		Signature Shannon Thomson			Date 06/26/2026		