

# CONSTRUCTION PERMIT APPLICATION

**Applicant Completes: Sections I, II, III (optional), IV, VI and VII**

1. Proposed Work-site at: BRICK CENTER, 350 CHAMBERS BRIDGE ROAD

2. Name of Owner in Fee: OCEAN COUNTY VO-TECH SCHOOLS Tel. (908) 240-6414  
Address 137 BEY LEA ROAD, TOMS RIVER, NJ 08753  
street municipality zip code

3. Ownership in Fee: Public XX Private \_\_\_\_\_

4. Principal Contractor: A-TECH RESTORATION, INC. Tel. (201) 238-9225  
Address 292 NORTH HALEDON AVE, NORTH HALEDON, NJ 07508  
License No. OR, if new home, Builder Reg. No: 00249 Exp. Date 4/19/97  
Federal Emp. No. 22-2941600 Social Security No. \_\_\_\_\_

5. Architect or Engineer RK ENVIRONMENTAL Tel. (908) 454-6316  
Address 401 ST. JAMES ST, PHILLIPSBURG, NJ 08854

6. Responsible Person in Charge of Work RAYMOND C. PEDALINO Tel. (201) 238-9225

1. ☐ Minor work  
(single trade)  
2. ☐ Small Job (\$5,000  
and no prior approvals)  
3. ☐ New Building  
4. ☐ Addition  
5. ☐ Alteration  
6. ☐ Fire Protection  
7. ☐ Plumbing  
8. ☐ Electrical  
9. ☐ Elevator Devices  
10. ☒ Asbestos Abatement  
11. ☐ Demolition

**TOTAL COSTS**

Est. Cont

6,800.

**OPTIONAL (for office use only)**[illegible]

III. DO YOU WANT: (optional)      1. ☐ Partial Releases    2. ☐ Prototype Processing

**IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?**

- |                                                                                     |                                                                      |                                                                 |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------|
| 1. <input type="checkbox"/> Elevators/Escalators/Lifts/<br>Dumbwaiters/Moving Walks | 4. <input type="checkbox"/> Refrigeration Systems                    | 7. <input type="checkbox"/> Sprinklers                          |
| 2. <input type="checkbox"/> High Pressure Boilers                                   | 5. <input type="checkbox"/> Cross-Connections/Backflow<br>Preventers | 8. <input type="checkbox"/> Smoke Control Systems in Open Wells |
| 3. <input type="checkbox"/> Pressure Vessels                                        | 6. <input type="checkbox"/> Hazardous Uses/Places of Assembly        | 9. <input type="checkbox"/> Underground Storage Tanks           |

**V. FEE SUMMARY (for office use only)**

|                                      |    | Update | Update |
|--------------------------------------|----|--------|--------|
| 1. Building                          | \$ |        |        |
| 2. Electrical                        |    |        |        |
| 3. Plumbing                          |    |        |        |
| 4. Fire Protection                   |    |        |        |
| 5. Elevator Devices                  |    |        |        |
| 6. Subtotal                          | \$ |        |        |
| 7. Less 20% for<br>State Plan Review |    |        |        |
| 8. Subtotal                          | \$ |        |        |
| 9. DCA Training Fee                  |    |        |        |
| 10. Subtotal                         | \$ |        |        |
| 11. Cert. of Occupancy               |    |        |        |
| 12. Other                            |    |        |        |
| 13. TOTAL                            | \$ |        |        |

## VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories \_\_\_\_\_
2. Height of Structure \_\_\_\_\_ ft.
3. Area—Largest Floor \_\_\_\_\_ sq. ft.
4. New Building Area \_\_\_\_\_ sq. ft.
5. Volume of New Structure \_\_\_\_\_ cu. ft.
6. Construction Classification \_\_\_\_\_
7. Total Land Area Disturbed \_\_\_\_\_ sq. ft.
8. Flood Hazard Zone \_\_\_\_\_
9. Base Flood Elevation \_\_\_\_\_ ft.
10. Wetlands    yes \_\_\_\_\_ sq. ft.  
                  no \_\_\_\_\_
11. Max. Live Load \_\_\_\_\_
12. Max. Occupancy Load \_\_\_\_\_

## VII. DESCRIPTION OF BUILDING USE

~~A.~~ RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☐ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No of dwelling units:

Before Construction \_\_\_\_\_

After Construction \_\_\_\_\_

Net gain or loss \_\_\_\_\_

### B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:

## CERTIFICATION IN LIEU OF OATH

### I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

- A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

- B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

- C. (XX) I further certify that I will perform or supervise the following work:

C.1. (XX) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:

C.3. ( ) Electrical C.4. ( ) Plumbing

- D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature Edward J. [Signature] O.C.U.T.S. Date 3/20/17

### II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( \_\_\_\_ ) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

OFFICE DATE RECEIVED: \_\_\_\_\_

| VIII. PRIOR APPROVALS CHECKLIST<br>(office use only)            | LOCAL APPROVAL    |            | COUNTY APPROVAL   |            | REGIONAL APPROVAL |            | STATE APPROVAL    |            | COMMENTS |
|-----------------------------------------------------------------|-------------------|------------|-------------------|------------|-------------------|------------|-------------------|------------|----------|
|                                                                 | Prelimin. Initial | Final Date | Prelimin. Initial | Final Date | Prelimin. Initial | Final Date | Prelimin. Initial | Final Date |          |
| <input type="checkbox"/> Zoning Officer                         |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Planning Board                         |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Zoning Board                           |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Sewer Authority                        |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Water Authority                        |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Fire Department                        |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Police Department                      |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Health Department                      |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Soil Conservation                      |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> N.J. Dept. of Community Affairs        |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> N.J. Department of Transportation      |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> N.J. Dept. of Environmental Protection |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/> Utility Dig No.                        |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/>                                        |                   |            |                   |            |                   |            |                   |            |          |
| <input type="checkbox"/>                                        |                   |            |                   |            |                   |            |                   |            |          |

**IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)**

| Name of Code & Edition | Name of Code & Edition         | Other |
|------------------------|--------------------------------|-------|
| Building _____         | Energy _____                   |       |
| Electrical _____       | Barrier Free _____             |       |
| Plumbing _____         | Flood Hazard _____             |       |
| Fire Protection _____  | As Built Elevation Cert. _____ |       |
| Mechanical _____       | Other _____                    |       |

| X. CERTIFICATES ISSUED (office use only)                     | DATE ISSUED    | DATE EXPIRED  | DATE REISSUED | DATE EXPIRED |
|--------------------------------------------------------------|----------------|---------------|---------------|--------------|
| <input type="checkbox"/> Temporary Certificate of Occupancy  | No. _____      | _____         | _____         | _____        |
| <input type="checkbox"/> Temporary Certificate of Compliance | No. _____      | _____         | _____         | _____        |
| <input type="checkbox"/> Continued Certificate of Occupancy  | No. _____      | _____         | _____         | _____        |
| <input type="checkbox"/> Certificate of Compliance           | No. _____      | _____         | _____         | _____        |
| <input type="checkbox"/> Certificate of Occupancy            | No. _____      | _____         | _____         | _____        |
| <input checked="" type="checkbox"/> Certificate of Approval  | No. <u>611</u> | <u>4/2/97</u> |               |              |



# CERTIFICATE

Date Issued 4-2-97  
Control #  
Permit # 611-97

## IDENTIFICATION

Block 701.39 Lot 12  
Work Site Location 350 Chambersbridge Rd.  
Owner in Fee Ocean County Voc-Tech Schools  
Address 137 Bea Lea Rd.  
Pomona River, NJ 08753  
Tele. ( )  
Contractor A-Tech Restoration, Inc.  
Address 292 North Haledon Ave.  
North Haledon, NJ 07508  
Tele. ( )  
Lic. No. or Bids. Reg. No.  
Federal Emp. No.  
or Social Security No.

Home Warranty No. N/A  
Use Group F  
Maximum Live Load  
Description of Work/Use:

Asbestos abatement (75 square feet of breaching  
in hot water storage tank)

Type of Warranty Plan: [ ] State [ ] Private  
Construction Classification  
Maximum Occupancy Load

## CERTIFICATE OF OCCUPANCY/APPROVAL

### ☐ CERTIFICATE OF OCCUPANCY

### ☒ CERTIFICATE OF APPROVAL

This serves notice that said building, structure, or equipment has been constructed or installed in accordance with the New Jersey Uniform Construction Code, and is approved for use and/or occupancy.

### ☐ CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

### ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

If this is a Temporary Certificate of Occupancy the following conditions must be met no later than 19 or the owner will be subject to a fine or order to vacate:

Fee \$  
Paid [ ] Check No.  
Collected by:

CONSTRUCTION OFFICIAL



# APPLICATION FOR CERTIFICATE

Date Received \_\_\_\_\_  
Date Permit Issued \_\_\_\_\_  
Control # \_\_\_\_\_  
Permit # 611-97  
Date Issued 3-25-97

## IDENTIFICATION

Block 701.39 Lot 12  
Work Site Location BIRICK CENTER Contractor A-TECH RESTORATION  
350 CHAMBERS BRIDGE RD TOMS RIVER Address 292 N. HALEDON AVE  
Owner In Fee OCEAN COUNTY VO-TECH SCHOOLS H. HALEDON NJ 07508  
Address 137 BEA-LEA RD Tele. ( 201 ) 238-9225  
TOMS RIVER NJ 08753 Lic. No. 00249  
Tele. ( 908 ) 240-6414 Federal Emp. No. 22-2991600  
or Social Security No. \_\_\_\_\_

## ACTION

☒ CERTIFICATE OF OCCUPANCY ☐ CERTIFICATE OF APPROVAL  
☐ CERTIFICATE OF CONTINUED OCCUPANCY ☐ TEMPORARY CERTIFICATE OF OCCUPANCY  
USE GROUP \_\_\_\_\_ Previous \_\_\_\_\_ Current \_\_\_\_\_

FINAL COST OF CONSTRUCTION: \$ 6800.00

(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

## DESCRIPTION OF WORK/USE:

ASBESTOS REMOVAL  
HOT WATER TANK BREECHING

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED

☐ Owner  
☒ Agent

Jan Giller AST #0628

OWNER/AGENT

RKD ENVIRONMENTAL ANALYSIS INC  
ASC# 0090



# CONSTRUCTION PERMIT

Date Issued

3/25/97

Control #

Permit # 611-97

IDENTIFICATION Block

701.39

Lot

12

Work Site Location

350 Chambersbridge Rd.

Contractor

A-TECH Restoration, Inc.

Address

Owner in Fee

O.C.VO-TECH Schools

Address

137 Bee Line Rd.

Tele. ( )

Tomb River, NJ

Tele. ( )

Lic. No. or Bldrs. Reg. No.

Exp. Date

Federal Emp. No.

or Social Security No.

Is hereby granted permission to perform the following work:

☐ BUILDING☐ PLUMBING☒ OTHERASBESTOS  
REMOVAL☐ ELECTRICAL☐ FIRE PROTECTION☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

NOTE: If construction does not commence within one (1) year of date of issuance, or  
if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$

6,800

CONSTRUCTION OFFICIAL

## PAYMENTS (Office Use Only)

Building

Electrical

Plumbing

Fire Protection

Elevator Devices

Other

DCA Training Fee

Cert. of Occ.

Other

Total

Check No.

Cash

Collected By:

(see reverse side)

# REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:\_\_\_\_\_

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode;
2. Foundations and all walls up to grade level prior to back filling;
3. All structural framing and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

☐ A complete copy of approved plans must be kept on the job site.

If you do not understand any of this information, please ask.

# **BUILDING** **SUBCODE** TECHNICAL SECTION



Date Received 3-25-97  
 Date Issued  
 Control # 611-97  
 Permit #

## A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING

CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.  
 Block 101.39 Lot 12  
 Work Site Location BRICK CENTER  
350 CHAMBERS BRIDGE RD, TOMS RIVER, NJ  
 Owner in Fee OCEAN COUNTY VO-TECH SCHOOLS  
 Address 137 BEA LEA ROAD  
TOMS RIVER, NJ 08753  
 Tele. ( 908 ) 240-6414  
 Contractor A-TECH RESTORATION, INC.  
 Address 292 NORTH HALEDON AVENUE  
NORTH HALEDON, NJ 07508  
 Tele. ( 201 ) 238-9225  
 Lic. No. or Bldrs. Reg. No. ASBESTOS LICENSE #00249  
 Federal Emp. No. 22-2941600 or Social Security No.

## C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record  
 and am authorized to make this application  
 Signature [Signature]

## D. TECHNICAL SITE DATA

DESCRIPTION OF WORK  
 ASBESTOS ABATEMENT OF APPROX. 75 SQUARE FEET  
 OF BREECING IN HOT WATER STORAGE TANK.

| JOB SUMMARY (Office Use Only)       |               | PLAN REVIEW              |        | Date                     | Initial | INSPECTIONS |         | Dates (Month/Day) |          | Initial |
|-------------------------------------|---------------|--------------------------|--------|--------------------------|---------|-------------|---------|-------------------|----------|---------|
| PLAN REVIEW                         | No Plans Req. | 3-24-97                  | EM     |                          |         | Type:       | Failure | Failure           | Approval |         |
| <input checked="" type="checkbox"/> | All           |                          |        |                          |         | Footing     |         |                   |          |         |
| <input type="checkbox"/>            | Footing       |                          |        |                          |         | Foundation  |         |                   |          |         |
| <input type="checkbox"/>            | Foundation    |                          |        |                          |         | Slab        |         |                   |          |         |
| <input type="checkbox"/>            | Frame         |                          |        |                          |         | Frame       |         |                   |          |         |
| <input type="checkbox"/>            | Other         |                          |        |                          |         | Insulation  |         |                   |          |         |
| Joint Plan Review Required:         |               |                          |        |                          |         | Finishes:   |         |                   |          |         |
| <input type="checkbox"/>            | Elec.         | <input type="checkbox"/> | Plumb. | <input type="checkbox"/> | Fire    | Energy      |         |                   |          |         |
| SUBCODE APPROVAL                    |               |                          |        |                          |         | Mechanical  |         |                   |          |         |
| <input type="checkbox"/>            | CO            | <input type="checkbox"/> | CCO    | <input type="checkbox"/> | CA      | TCO         |         |                   |          |         |
| Date:                               |               |                          |        |                          |         | Other       |         |                   |          |         |
| Approved By:                        |               |                          |        |                          |         | Find        |         |                   |          |         |

## B. BUILDING CHARACTERISTICS

Use Group Present Proposed  
 Const. Class Present Proposed  
 No. of Stories 1  
 Height of Structure 12 Ft.  
 Area—Largest Floor 12 Sq. Ft.  
 New Bldg. Area/All Floors 12 Sq. Ft.  
 Volume of New Structure 12 Cu. Ft.  
 Total Land Area Disturbed 12 Sq. Ft.

## Est. Cost of Bldg. Work:

1. New Bldg. \$  
 2. Alteration \$  
 3. Total (1+2) \$

TYPE OF WORK:  
☐ New Building  
☐ Addition  
☒ Alteration

☐ Roofing  
☐ Siding  
☐ Fence  
☐ Sign  
☐ Pool  
☒ Asbestos Abatement  
☐ Other  
☐ Demolition

(Office Use Only)  
 FEE

Administrative Surcharge \$  
 Minimum Fee \$  
 DCA TRAINING FEE \$  
 TOTAL FEE \$



Date Received 3.25-97  
Date Issued  
Control #  
Permit # 611-97

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING

CONTRACTORS, NOTIFY THIS OFFICE, CALL UTILITY DIG NO: 1-800-272-1000.  
Block 711.39 Lot 12  
Work Site Location BRICK CENTER  
350 CHAMBERS BRIDGE RD., TOMS RIVER, NJ  
Owner in Fee OCEAN COUNTY VO-TECH SCHOOLS  
Address 137 BEA LEE ROAD  
TOMS RIVER, NJ 08753  
Tele. (908) 240-6414  
Contractor A-TECH RESTORATION, INC.  
Address 202 NORTH BAYVIEW AVENUE  
ROSELAND, NJ 07068  
Tele. (201) 238-9225  
Lic. No. or Bids. Reg. No. ASBESTOS LICENSE #00249  
Federal Emp. No. 72-2941620 or Social Security No.

JOB SUMMARY (Office Use Only)

| PLAN REVIEW                                                                                  | Date    | Initial | INSPECTIONS | Dates (Month/Day) | Initial |
|----------------------------------------------------------------------------------------------|---------|---------|-------------|-------------------|---------|
| <input checked="" type="checkbox"/> No Plans Req.                                            | 3-24-97 | EM      | Type:       | Failure           | Failure |
| <input type="checkbox"/> All                                                                 |         |         | Footings    |                   |         |
| <input type="checkbox"/> Footing                                                             |         |         | Foundation  |                   |         |
| <input type="checkbox"/> Foundation                                                          |         |         | Slab        |                   |         |
| <input type="checkbox"/> Frame                                                               |         |         | Frame       |                   |         |
| <input type="checkbox"/> Other                                                               |         |         | Insulation  |                   |         |
| Joint Plan Review Required:                                                                  |         |         | Finishes:   |                   |         |
| <input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire |         |         | Energy      |                   |         |
| SUBCODE APPROVAL                                                                             |         |         | Mechanical  |                   |         |
| <input type="checkbox"/> CO <input type="checkbox"/> CCO <input type="checkbox"/> CA         |         |         | TCO         |                   |         |
| Date:                                                                                        |         |         | Other       |                   |         |
| Approved By:                                                                                 |         |         | Final       |                   |         |

B. BUILDING CHARACTERISTICS

Use Group Present Proposed  
Constr. Class Present Proposed  
No. of Stories  
Height of Structure Ft.  
Area-Largest Floor Sq. Ft.  
New Bldg. Area/All Floors Sq. Ft.  
Volume of New Structure Cu. Ft.  
Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work:  
1. New Bldg. \$  
2. Alteration \$  
3. Total (1+2) \$

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the agent of, owner, record and am authorized to make this application  
Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK  
ASBESTOS ABATEMENT OF APPROX. 75 SQUARE FEET  
OF BREECING IN HOT WATER STORAGE TANK.

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☒ Alteration
  - ☐ Roofing
  - ☐ Siding
  - ☐ Fence
  - ☐ Sign
  - ☐ Pool
  - ☒ Asbestos Abatement
  - ☐ Other
  - ☐ Demolition

(Office Use Only)  
FEE

Administrative Surcharge \$  
Minimum Fee \$  
DCA TRAINING FEE \$  
TOTAL FEE \$

OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL  
FACILITIES AND GROUNDS DEPARTMENT

1200 Old Freehold Road

Toms River, New Jersey 08753

E. Crawford (908) 473-3112

M. Yezzi (908) 473-3110

P. Donahue (908) 473-3111

Facsimile (908) 505-9662

**FACSIMILE COVER SHEET**

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**Date:** March 24, 1997 **No. of Pages (Include Cover Sheet):** (2)

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**To:** Mr. Frank Mizer **Facsimile No.:** (908) 262-8954

Letter dated 03/24/97 in regard to Asbestos Abatement scheduled for Easter Recess, 03/31/97 through 04/04/97--see attached.

E. Crawford

EC/mfy

**If All Pages Are Not Received Telephone (908) 473-3110**

**Confidentiality Notice:** Information contained in this facsimile and accompanying documents may contain confidential and legally privileged information intended only for use by individuals or entities named above. Recipients other than those noted above are, hereby, notified that disclosure, copying, distribution, or any action in reliance upon the information contained herein is strictly prohibited. If transmission is received in error, telephone this office immediately to arrange for the return of documents.

mfy01/27/97

**OCEAN COUNTY VOCATIONAL-TECHNICAL SCHOOLS**  
**FACILITIES AND GROUNDS DEPARTMENT**

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1200 Old Freehold Road • Toms River, NJ 08753-4298  
(908) 473-3100 or (908) 473-3112 • Fax # (908) 505-9662

**EDWARD J. CRAWFORD**  
Facilities and Grounds Manager

March 24, 1997

Brick Township Building Department  
401 Chambers Bridge Road  
Brick, New Jersey 08723

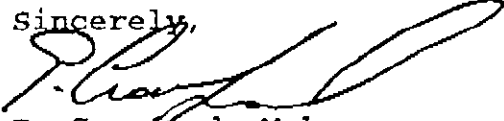
Attention: Mr. Frank Mizer

Reference: Asbestos Abatement  
Brick Boiler Breaching

Dear Mr. Mizer:

The Brick facility will be vacant for Easter Recess, 03/31/97 through 04/04/97. The only exception to this will be the custodial staff who will be available to give access to contractors in the building and for security purposes.

Sincerely,



E. Crawford, Manager  
Facilities and Grounds

EC/mfy  
Encl.: Facsimile Verification  
f\asbatproj.br.1997

## Plan Review #

Date:

## Building

(City, County, Township, etc.)

Ocean

(Street address)

# Asbestos Removal

FM

CORRECTION LIST

Code  
Section

Need "

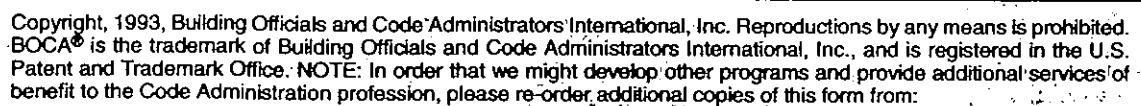
Cert That Building is Vacant

Plan Showing Location &  
Route of Asbestos to Outside

3/24/97

F.M.

spoke to Contract



**BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.**  
**4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60478-5795**

R.K. FAX COVER SHEET

TO: FRANK MIZER

BUILDING OFFICIAL

ORGAN.: TOMS RIVER MUNICIPAL BUILDING

FAX: 908 262 8954

\*\*\*\*\*

FROM: JONATHAN GILBERT

ORGAN.: R.K. OCCUPATIONAL & ENVIRONMENTAL ANALYSIS, INC.

PHONE: 609 768-8414

FAX: 609 767-4418

\*\*\*\*\*

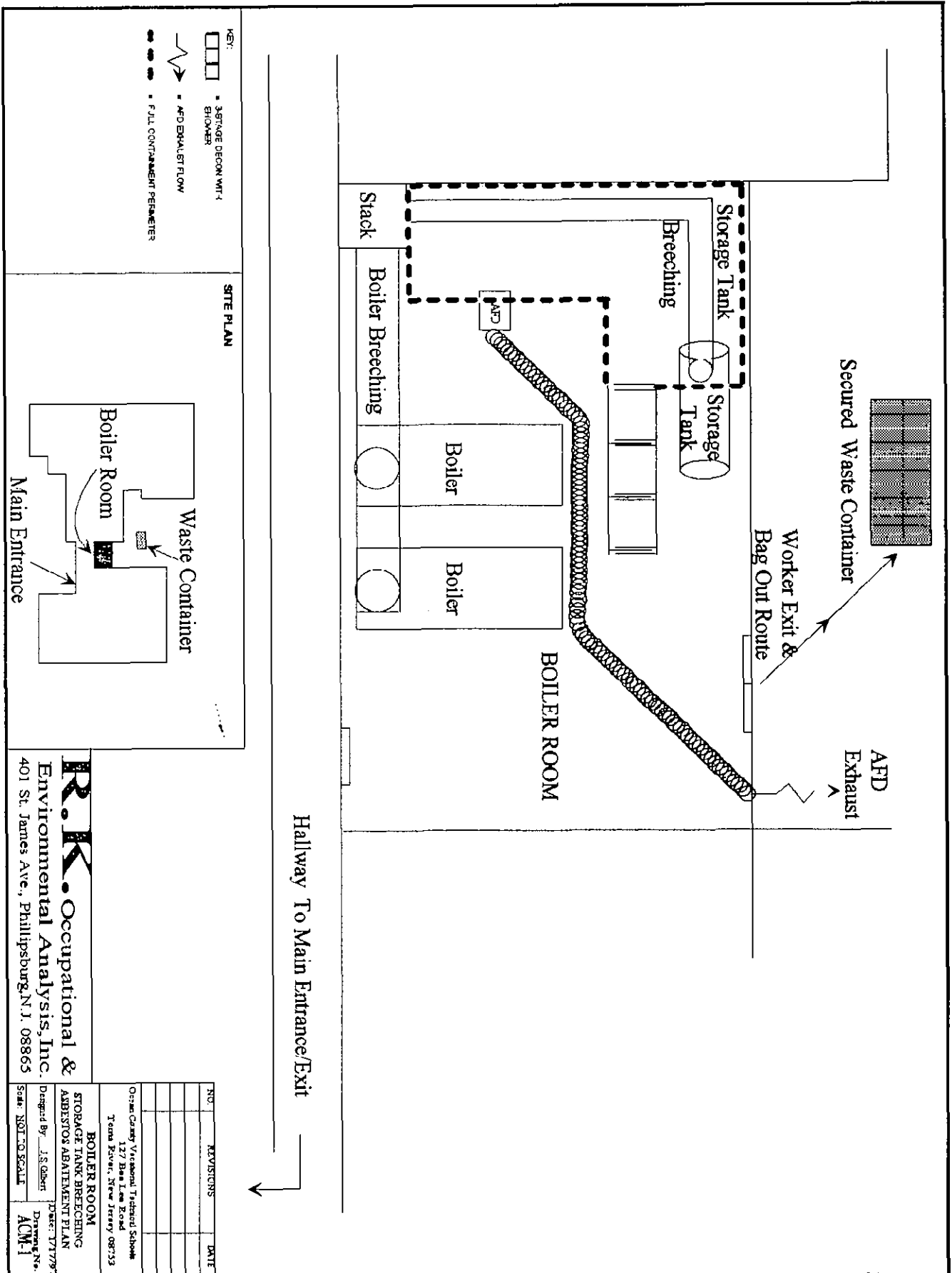
COMMENTS: ATTACHED IS DRAWING YOU REQUESTED FOR ASBESTOS PROJECT

CONSTRUCTION PERMIT AT THE THE BRICK CENTER SCHOOL, O.C.V.T.

PLANNED START DATE 3/31/97. BUILDING WILL BE UNOCCUPIED THROUGHOUT THE

3 TO 4 DAY PROJECT. AN APPLICATION FOR C.O. WILL BE PRESENTED TO YOUR OFFICE

AT THE COMPLETION OF THE PROJECT.



### FACILITY INFORMATION

Scope of Work (Check all that apply)

☐ Renovation

XX Full Containment with Negative Pressure  
[ ] Mini-Enclosure  
[ ] Glovebag Procedure  
[ ] Non-Friable Procedure

ASB-41  
JUN 95

**G4487'**

State of New Jersey  
Department of Labor  
DIVISION OF WORKPLACE STANDARDS

**ASBESTOS LICENSE**

LICENSE NUMBER: 00249

ISSUE DATE: 04/19/96

EXPIRATION DATE: 04/19/97

THIS LICENSE has been issued in accordance with and subject to the provisions of the Asbestos Control and Licensing Act, P.L. 1984, c. 173.

Employer: A-Tech Restoration, Inc.

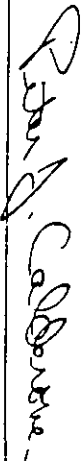
Address: 292 North Haledon Avenue

North Haledon, NJ 07508

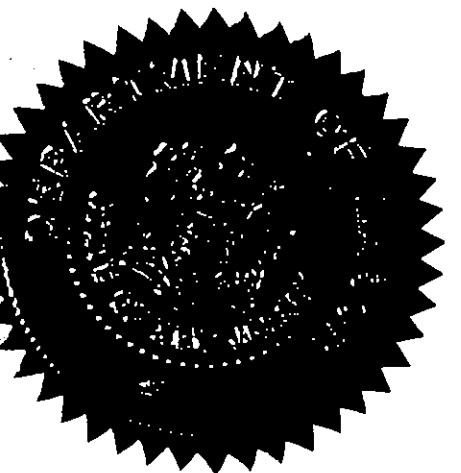
TYPE "A" LICENSE to perform any type of asbestos work

Responsible Individual: Svetozar Beljakovic, President

This license is VALID ONLY FOR THE EMPLOYER NAMED HEREIN and must be readily available at the work site for inspection by the Commissioners of Labor and Health and the contracting agency.

  
Commissioner

08669



RK

OCCUPATIONAL & ENVIRONMENTAL ANALYSIS  
401 ST JAMES AVENUE  
PHILLIPSBURG, NJ, 08855

NEW JERSEY SUBCHAPTER 8 - N.J.A.C. 5:23-8

ASBESTOS ABATEMENT PROJECT

CERTIFICATE OF COMPLETION

The work area described below has been inspected and met the requirements of N.J.A.C. 5:23-8.21 and/or 40 CFR 763.90, and this Certificate of Completion is hereby issued.

Final clearance air monitoring analysis passed by:

\_\_\_\_\_ PCM per N.J.A.C. 5:23-8.21 - <0.01 fiber/cc  
and/or 40 CFR 763.90(i)(5)

\_\_\_\_\_ TEM per 40 CFR 763.90(i)(3) - Z-Test = <1.65

X TEM per 40 CFR 763.90(i)(4) - <70 structures/mm<sup>2</sup>

Having met these conditions, this Certificate of Completion is respectively submitted to the administrative authority having jurisdiction for the issuance of a Certificate of Occupancy.

Construction Permit No. 611-97

Building & Address: BRICK CENTER, 350 CHAMBERS BRIDGE RD, TOMS RIVER

Work Area Location: BOILER ROOM H/W TANK BREECHING

Description of Asbestos Material & Procedure of Removal: \_\_\_\_\_

H/W TANK BREECHING INSULATION VIA FULL CONTAINMENT

ASCM Firm: RKO ENVIRONMENTAL ANALYSIS ASCM No. 0090

Contractor: A-TECH RESTORATION License No. 0249

\*\*\*\*\*

Inspected By: Jan Gallant Date: 4/2/97

AST License No. 628 Time: 1200



**RK Occupational &  
Environmental Analysis, Inc.**

401 St. James Avenue  
Phillipsburg, New Jersey 08865  
(908) 454-6316 fax (908) 454-4818

### ASBESTOS ABATEMENT INSPECTION RECORD

In accordance with N.J.A.C. 5:23-8.7 - Inspections, the work area described below has undergone and passed visual inspections performed by the licensed Asbestos Safety Technician (AST). This shall serve as notice to proceed with asbestos abatement activities as described below.

Building & Address: BRICK CENTER, 350 CHAMBERS BRIDGE RD, TOMS RIVER NJ

Work Area Location: BOILER ROOM

Description of Asbestos Material & Procedure of Removal: H/W TANK BREECHING  
INSULATION VIA FULL CONTAINMENT METHODS

ASCM Firm: RKO ENVIRONMENTAL ANALYSIS INC. ASCM No.: 0090

Contractor: A-TECH RESTORATION License No.: 0249

\*\*\*\*\*

#### PRE-COMMENCEMENT INSPECTION --- NOTICE TO PROCEED

|                   |                          |               |             |
|-------------------|--------------------------|---------------|-------------|
| <u>Boh-Lu</u>     | <u>03219</u>             | <u>4/1/97</u> | <u>0930</u> |
| Requested By      | Supervisor's License No. | Date          | Time        |
| <u>Jan Gullet</u> | <u>0628</u>              | <u>4/1/97</u> | <u>0945</u> |
| Inspected By      | AST's License No.        | Date          | Time        |

#### PRE-SEALANT INSPECTION --- AUTHORIZATION TO ENCAPSULATED

|                   |                          |               |             |
|-------------------|--------------------------|---------------|-------------|
| <u>Boh-Lu</u>     | <u>03219</u>             | <u>4/1/97</u> | <u>1145</u> |
| Requested By      | Supervisor's License No. | Date          | Time        |
| <u>Jan Gullet</u> | <u>0628</u>              | <u>4/1/97</u> | <u>1215</u> |
| Inspected By      | AST's License No.        | Date          | Time        |

#### CLEN-UP INSPECTION --- AUTHORIZATION TO REMOVE BARRIERS

|                   |                          |               |             |
|-------------------|--------------------------|---------------|-------------|
| <u>Boh-Lu</u>     | <u>03219</u>             | <u>4/2/97</u> |             |
| Requested By      | Supervisor's License No. | Date          | Time        |
| <u>Jan Gullet</u> | <u>0628</u>              | <u>4/2/97</u> | <u>0820</u> |
| Inspected By      | AST's License No.        | Date          | Time        |

Method Of Analysis: TEM Results (average): 15.4 s/mm<sup>2</sup>

**ASBESTOS AIR SAMPLE LOG SHEET**

PROJECT: OCVT-Brick Center  
SAMPLED BY: Jonathan Gilbert  
DATE: 04/01/97  
PROJECT NO. JSG-093  
S.S. NO.: 151-58-7527  
SHIFT: 1 2 3  
SAMPLE DAY: 0401  
DAILY PROJECT DESCRIPTION: Post testing of Boiler Room for  
Storage Tank Breaching Removal

| SAMPLE NO. | LOCATION & WORK DESCRIPTION                | CODE | TIME  |      | TOTAL MINUTES | CALIBRATION             |                          | ANALYTICAL   |                         |
|------------|--------------------------------------------|------|-------|------|---------------|-------------------------|--------------------------|--------------|-------------------------|
|            |                                            |      | START | STOP |               | PUMP NO. CALIBRATOR     | FLOW RATE START/STOP/AVG | TOTAL VOLUME | # FIBERS/ FIELDS RESULT |
| 0401-10    | Post Test Inside Breaching Work Area       | 3A   | 1350  | 1550 | 120           | DAW001 hi vol rotameter | 10/10/10                 | 1200         | <15.4                   |
| 0401-11    | Post Test Inside Breaching Work Area       | 3A   | 1350  | 1550 | 120           | DAW002 hi vol rotameter | 10/10/10                 | 1200         | <15.4                   |
| 0401-12    | Post Test Inside Breaching Work Area       | 3A   | 1350  | 1550 | 120           | DAW003 hi vol rotameter | 10/10/10                 | 1200         | <15.4                   |
| 0401-13    | Post Test Inside Breaching Work Area       | 3A   | 1350  | 1550 | 120           | MM004 hi vol rotameter  | 10/10/10                 | 1200         | <15.4                   |
| 0401-14    | Post Test Inside Breaching Work Area       | 3A   | 1350  | 1550 | 120           | MM005 hi vol rotameter  | 10/10/10                 | 1200         | <15.4                   |
| 0401-15    | Post Test Outside Work Area at Decon       | 3N   | 1345  | 1345 | 120           | TI027 hi vol rotameter  | 10/10/10                 | 1200         | HOLD                    |
| 0401-16    | Post Test Outside Work Area in Boiler Room | 3N   | 1346  | 1346 | 120           | TI004 hi vol rotameter  | 10/10/10                 | 1200         | HOLD                    |
| 0401-17    | Post Test Outside Work Area Hallway North  | 3N   | 1347  | 1347 | 120           | TI030 hi vol rotameter  | 10/10/10                 | 1200         | HOLD                    |
| 0401-18    | Post Test Outside Work Area Hallway South  | 3N   | 1348  | 1348 | 120           | TI028 hi vol rotameter  | 10/10/10                 | 1200         | HOLD                    |
| 0401-19    | Post Test Outside Work Area Faculty Room   | 3N   | 1349  | 1349 | 120           | TI002 hi vol rotameter  | 10/10/10                 | 1200         | HOLD                    |

CODES: A. Aggressive D. Dormant N. Normal P. Perimeter T. TWA R. Representative

1. Diagnostic  
2. Preliminary  
3. Final  
4. Personnel Work Area  
5. Environmental Work Area  
6. Personnel Clean Area  
7. Environmental Clean Area

Cassette Make: AME Calibration Date: 04/01/96  
Cassette Type: MCE .45 um pore 25 mm 2 in Calibration Method: calibrated rotameter  
Cassette Lot No.: M45-6101 Calibrated By: JSG  
Special Conditions: ☆ Area passes final air clearance criteria of average of 70 s/mm2 or less as set by EPA AHERA & N.J.A.C. 5.23-8.

Signature: *Jon Gilbert* AST # 0628 Page 2 of 3

|                             |  |                                                                   |  |                     |  |
|-----------------------------|--|-------------------------------------------------------------------|--|---------------------|--|
| PROJECT: OCVT-Brick Center  |  | DATE:04/01/97                                                     |  | PROJECT NO. JSG-093 |  |
| SAMPLED BY:Jonathan Gilbert |  | S.S. NO.:151-58-7527                                              |  | SHIFT: 1 2 3        |  |
| DAILY PROJECT DESCRIPTION   |  | Post testing of Boiler Room for<br>Storage Tank Breaching Removal |  |                     |  |

[illegible]

CODES:  
 1. Diagnostic  
 2. Preliminary  
 3. Final  
 4. Personnel Work Area  
 5. Environmental Work Area  
 6. Personnel Clean Area  
 7. Environmental Clean Area

A. Aggressive  
 D. Dormant  
 N. Normal  
 P. Perimeter  
 T. TWA  
 R. Representative

Cassette Make: AME Calibration Date: 04/01/96  
 Cassette Type: MCE 45 um pore 25 mm 2 in Calibration Method: calibrated rotameter  
 Cassette Lot No.: M45-6101 Calibrated By: JSG  
 Special Conditions: Area passes final air clearance criteria of average of 70 s/mm2 or less as set by EPA AHERA & N.J.A.C. 5:23-8.

Signature: [Signature] Page 3 of 3

STATE OF NEW JERSEY  
DEPARTMENT OF COMMUNITY AFFAIRS  
BUREAU OF CODE SERVICES

THIS IS TO CERTIFY THAT



Jonathan Gilbert

Has Been Certified As:  
ASBESTOS SAFETY TECHNICIAN

CERTIFICATION NO: 00628

EFFECTIVE DATE: 8/1/96

EXPIRATION DATE: 7/31/98

*Jon Gilbert*

Signature of Asbestos Safety Technician

STATE OF NEW JERSEY  
DEPARTMENT OF COMMUNITY AFFAIRS  
BUREAU OF CODE SERVICES

THIS IS TO CERTIFY THAT



Jonathan Gilbert

Has Been Certified As:  
ASBESTOS SAFETY TECHNICIAN

CERTIFICATION NO: 00628

EFFECTIVE DATE: 12/20/94

EXPIRATION DATE: 7/31/96

*Jon Gilbert*

Signature of Asbestos Safety Technician

THIS CARD IS ISSUED PURSUANT TO  
N.J.S.A. 52:27D-119 ET SEQ. OF THE  
STATE OF NEW JERSEY.



*Robert K. ...*

CHIEF

Bureau of Code Services

THIS CARD IS ISSUED PURSUANT TO  
N.J.S.A. 52:27D-119 ET SEQ. OF THE  
STATE OF NEW JERSEY.



*Robert K. ...*

CHIEF

Bureau of Code Services

Forwarded Via Facsimile, 03/25/97, Verification Attached  
Forwarded Via First Class Mail, 03/25/97



**OCEAN COUNTY VOCATIONAL-TECHNICAL SCHOOLS**  
FACILITIES AND GROUNDS DEPARTMENT

1200 Old Freehold Road • Toms River, NJ 08753-4298  
(908) 473-3100 or (908) 473-3112 • Fax # (908) 505-9662

**EDWARD J. CRAWFORD**  
Facilities and Grounds Manager

March 24, 1997

Brick Township Building Department  
401 Chambers Bridge Road  
Brick, New Jersey 08723

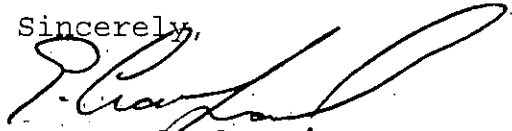
Attention: Mr. Frank Mizer

Reference: Asbestos Abatement  
Brick Boiler Breaching

Dear Mr. Mizer:

The Brick facility will be vacant for Easter Recess, 03/31/97 through 04/04/97. The only exception to this will be the custodial staff who will be available to give access to contractors in the building and for security purposes.

Sincerely,



E. Crawford, Manager  
Facilities and Grounds

EC/mfy  
Encl.: Facsimile Verification  
f\asbatproj.br.1997

OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL  
FACILITIES AND GROUNDS DEPARTMENT

1200 Old Freehold Road

Toms River, New Jersey 08753

E. Crawford (908) 473-3112

M. Yezzi (908) 473-3110

P. Donahue (908) 473-3111

Facsimile (908) 505-9662

**FACSIMILE COVER SHEET**

---

**Date:** March 24, 1997 **No. of Pages (Include Cover Sheet):** (2)

---

**To:** Mr. Frank Mizer **Facsimile No.:** (908) 262-8954

Letter dated 03/24/97 in regard to Asbestos Abatement scheduled for  
Easter Recess, 03/31/97 through 04/04/97--see attached.

E. Crawford

EC/mfy

**If All Pages Are Not Received Telephone (908) 473-3110**

**Confidentiality Notice:** Information contained  
in this facsimile and accompanying documents  
may contain confidential and legally privileged  
information intended only for use by individuals  
or entities named above. Recipients other than  
those noted above are, hereby, notified that  
disclosure, copying, distribution, or any action  
in reliance upon the information contained herein  
is strictly prohibited. If transmission is received  
in error, telephone this office immediately to  
arrange for the return of documents.

mfy01/27/97

TRANSMISSION VERIFICATION REPORT

TIME: 03/25/1997 12:48  
NAME: BUILDING & GRNUNDS  
FAX : 1-908-505-9662  
TEL : 1-908-505-9662

DATE, TIME  
FAX NO. / NAME  
DURATION  
PAGE(S)  
RESULT  
MODE

03/25 12:48  
2628954  
00:00:46  
02  
OK  
STANDARD  
ECM

OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL  
FACILITIES AND GROUNDS DEPARTMENT  
1200 Old Freehold Road

Toms River, New Jersey 08753

E. Crawford (908) 473-3112

M. Yezzi (908) 473-3110

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EC/mfy

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mfy01/27/97

3/25/97

Frank I made copy &  
put in the jacket O.C. Becher  
JH. issued 3/25/97

**OCEAN COUNTY VOCATIONAL-TECHNICAL SCHOOLS**  
**FACILITIES AND GROUNDS DEPARTMENT**

---

1200 Old Freehold Road • Toms River, NJ 08753-4298  
(908) 473-3100 or (908) 473-3112 • Fax # (908) 505-9662

**EDWARD J. CRAWFORD**  
Facilities and Grounds Manager

March 24, 1997

Brick Township Building Department  
401 Chambers Bridge Road  
Brick, New Jersey 08723

Attention: Mr. Frank Mizer

Reference: Asbestos Abatement  
Brick Boiler Breaching

Dear Mr. Mizer:

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Sincerely,



E. Crawford, Manager  
Facilities and Grounds

EC/mfy  
Encl.: Facsimile Verification  
f\asbatproj.br.1997

# RK

RK Occupational & Environmental Analysis Inc.

401 St. James Ave., Phillipsburg, N.J. 08865

Telephone: 908-454-6316 Fax: 908-454-4818

Health/Safety and  
Environmental  
Regulatory  
Compliance

Right-To-Know

OSHA/EPA/DOT  
Training Programs

Asbestos and Lead  
Management

Industrial Hygiene/  
OSHA Compliance

Indoor Air Quality

Underground/  
Aboveground  
Storage Tanks

Environmental  
Site Assessment

Hazardous/  
Medical Waste  
Management

Environmental  
Audits

Expert Witness/  
Litigation Support

Customized  
Software

## SPECIFICATIONS FOR ASBESTOS ABATEMENT

**HOT WATER TANK BREECHING PROJECT  
BRICK CENTER  
350 CHAMBERS BRIDGE RD.  
TOMS RIVER, NEW JERSEY**

**JANUARY 1997**

Plans & Specifications Approved and  
Released by RKO Environmental Analysis, Inc  
A.S.C.M. Number 0090.

*[Signature]*  
Project Designer

1/22/97

Date

PD-071

Cert. No.

Building Official

Date

Seal

**PREPARED FOR:**

**OCEAN COUNTY VOCATIONAL TECHNICAL  
SCHOOLS  
137 Bea Lea Road  
Toms River, New Jersey 08753**

**PREPARED BY:**

**R. K. OCCUPATIONAL &  
ENVIRONMENTAL ANALYSIS, INC.  
401 St. James Avenue  
Phillipsburg, New Jersey 08865**

**R.K. Project No. JSG-093**

DIRECTORY

**Owner:** Ocean County Vocational Technical Schools  
137 Bea Lea Road  
Toms River, New Jersey 08753  
Attn: Ed Crawford Supervisor of Buildings & Grounds  
Tel: 908 473-3112  
Fax: 908 505-9662

**Job Site:** Brick Center  
350 Chambers Bridge Road  
Brick, New Jersey

**ASCM:** R.K. Occupational & Environmental Analysis, Inc.  
401 St. James Avenue  
Phillipsburg, New Jersey 08865  
Attn: Jonathan S. Gilbert  
Tel: 908 454 6316 or 609 768-8414  
Fax: 908 454 4818 or 609 767-4418

**Asbestos Abatement Scope of Work**

1.00 The asbestos removal phase of this project shall commence on Monday, March 31, 1997 and shall be completed in its entirety by Wednesday, April 2, 1997. If asbestos removal phase the work is not significantly completed by *April 4, 1997*, then liquidating damages of \$500.00 per shift shall be incurred for the length of time necessary to complete the removal project. The re-insulation phase of work shall commence after the removal phase and be completed by Friday, April 4, 1997. The objective of *Ocean County Vo Tech* is to have all contracted work removed and cleared by *April 4, 1997*.

2.00 The Contractor shall provide all labor, materials, employee training, services, fees, insurance and equipment necessary to carry out the asbestos removal, decontamination operations and disposal in accordance with the federal EPA's AHERA, NESHAP and OSHA regulations and N.J.A.C. 5:23-8 and this Scope Of Work. The successful bidder must be a State of New Jersey Licensed Contractor and employ certified asbestos workers as per statute and EPA AHERA regulations.

3.00 The Contractor shall be responsible for obtaining all Construction Permits. The Contractor is required to fulfill any format necessary as well as the required fee.

4.00 The Contractor shall notify the following agencies by certified mail ten days prior to the start of the asbestos removal project, and the Contractor shall provide copies of the mail receipts to the ASCM.

.01 EPA Asbestos Coordinator

EPA Region II  
26 Federal Plaza, Room 500  
New York, NY 10007

.02 DOL Department of Labor and Industry

Office of Asbestos Control and Licensing  
28 Yard Avenue  
Station Plaza One, 3rd Floor  
Trenton, New Jersey 08625-0054

.03 DEP New Jersey Department of Environmental Protection

Division of Waste Management  
Bureau of Field Operations  
120 Yardville, New Jersey 08620

.04 DOH Department of Health

John Fitch Plaza  
Trenton, New Jersey 08625  
ATTN: Asbestos Control Program

.05 DCA Department of Community Affairs  
Bureau of Code Services  
Asbestos Safety Unit  
CN 816, 3131 Princeton Pike  
Trenton, New Jersey 08625-0805

5.00 The project includes full containment removal of approximately 75 square feet of Hot Water Storage Tank Breeching Insulation.

6.00 All removal activities shall be performed under containment procedures as described in N.J.A.C. 5:23-8 - Unoccupied Building, EPA AHERA regulation 40 CFR 763, NESHAP 40 CFR Part 61, and in accordance with the OSHA Standards 29 CFR 1910.1001, 24 CFR 1910.134, 29 CFR 1926.1101.

Containment construction is summarized as follows:

.01 All walls, ceilings, floors and critical barriers shall be sealed with fire retardent six-mil polyethylene sheets. The containment shall be framed with 2x4 inch studs at a minimum of 2 foot intervals. All remaining small gaps shall be sealed with high quality silicon caulk or expansion foam.

.02 The floor of the contaminated work area shall have at least 2 layers of six-mil polyethylene film brought up the side walls at least 12 inches for the first layer and 24 inches for the second layer. The one layer wall poly shall overlap the floor poly by at least 18 inches. No seams shall be in corners.

.03 A three-stage decontamination chamber, with a full step through shower, shall be constructed as the entrance/exit to the work area. This decon shall serve as the waste removal route as well.

.04 High quality AFD's shall be placed so as to develop and hold a negative differential air pressure within the work area. This negative air pressure shall be maintained continuously, 24 hours a day from the time the isolation barrier is first established until final clearance air sampling is completed. The Contractor shall supply a digital manometer with constant readout and the air pressure differential in the work area shall be maintained at -0.03 inches of water column.

.05 Smoke testing will also be performed before and during removal work at the discretion of the AST to check negative air pressure and seals in the perimeter.

7.00 Disposable coverall suits shall be worn by any authorized person entering the work area and shall be supplied by the Contractor.

8.00 Proper respiratory protection is mandatory for any persons entering work area as stipulated in OSHA 1926.1101.

9.00 All insulations shall be wetted with amended water, using a fine low pressure sprayer and saturated prior to any removal. Absolutely no dry removal is permitted in the work area.

10.00 The Contractor shall provide and post in clearly visible locations, caution signs indicating that asbestos work is being conducted and that unprotected persons should not enter. Only personnel essential to the asbestos abatement project shall be present in the work area.

11.00 All disposal procedures shall comply with all NESHAP, DEPE, AHERA, DOT, OSHA, State and other applicable requirements.

.01 The bags of asbestos waste shall be labeled with the name of the generator and site of origin, as well as required asbestos warnings.

.02 The hauler of the asbestos waste shall currently be licensed and registered by the New Jersey Department of Environmental Protection & Energy.

.03 All waste manifests must be completed and signed by the transporter and disposal site operator and entered into the project log. The Contractor shall provide an additional waste disposal form which will provide a signed chain-of-custody for the waste from the work site.

12.00 The procedure for clearance and release of the work area will be as follows:

.01 Pre-encapsulation inspection by the AST as requested by the Contractor Supervisor. This may be repeated, if necessary.

.02 Encapsulation of work area followed by a 24 hour settling period or as determined by the AST.

.03 Removal of polyethylene double layer floor and single inside layer wall coverings leaving only the Critical Barriers.

.04 Performance of fine cleaning via wet wiping and HEPA vacuuming as required. The AST shall conduct a detailed final inspection to ensure that no visible dust or ACM debris remains on any surfaces. Results of such inspections shall be documented and included in the final report.

.05 Clearance air sampling shall be via Transmission Electron Microscopy (TEM) using aggressive techniques. A minimum of five (5) samples shall be collected inside the work area and five (5) samples outside the work area with a minimum volume of 1200 liters each. An area release will be given after sample analysis shows the average air quality levels to be less

then 70 structures/cc, as required by AHERA and N.J.A.C. 5:23-8.

13.00 The contractor shall be liable for any expenses incurred by the owner for additional services of the AST and additional cleaning of the site, if and when air samples collected for final clearance exceed the limits set forth in N.J.A.C. 5:23-8 and EPA AHERA regulations.

14.00 After receiving a final clearance from the AST and removing the containment barriers, the contractor shall employ experienced workers or professionals to perform the final cleaning of the work area. This will include the following:

- .01 Removal of all non permanent signs and labels.
- .02 Cleaning of transparent materials and reflective surfaces.
- .03 Replacement of damaged materials.
- .04 Removal of all temporary devices and facilities.
- .05 Thorough cleaning of all surfaces and floors.
- .06 Cleaning the project site and storage area.
- .07 Repairing any damage not noted.

## **RE-INSULATION SCOPE OF WORK**

### **15.00 SCHEDULING RE-INSULATION**

.01 Re-insulation shall be required to be completed within the time frame of the construction project. If re-insulation cannot be accomplished before April 4, 1997, then date and time of work will be scheduled convenient to the Owner and Contractor.

.02 Re-insulation will be completed no later than April 18, 1997 or liquidating damages shall be assessed at a rate of \$500.00 per day after the April 18, 1997 deadline.

### **16.00 PROCEDURES FOR PIPE RE-INSULATION**

.01 The intent of this specification is to re-insulate all breeching, where existing asbestos-containing insulation is to be removed. The contractor shall inspect the site prior to bidding and make note of all breeching which will require re-insulation. No claims for extra compensation will be considered for failure to make such an inspection.

.02 No work shall proceed until all asbestos materials have been removed, encapsulated and a visual inspection of the work area, as well as air monitoring, has been conducted by the environmental consultant.

a. Do not apply insulation until surfaces to be covered have been leak tested, have had rust and scale removed, and have been cleaned, dried and inspected.

.03 Contractor shall re-insulate breeching in all areas with calcium silicate insulation.

Insulation thickness for breeching shall be 2 inches:

All material shall be resistant to flame and moisture penetration and not support mold growth. Provide vapor-barrier material on insulation in exposed locations with a white surface suitable for painting without sizing.

.04 All insulation shall be manufactured by Owens Corning, Manville, Certain Teed, or approved equal.

a. Insulation, adhesives, vapor-barrier materials and other accessories, except as specified herein, shall be noncombustible. The materials shall not have a flame-spread rating more than 25 and a smoke-developed rating of more than 50 in accordance with NFPA 255, ASTM E 84, or UL 723.

.05 All insulation materials shall be delivered to the job site in their original containers or packages and shall have the manufacturer's stamp or label attached.

.06 All insulation packages and containers must be marked "Asbestos Free."

.07 Product data: Contractor shall submit the following information to the consultant no later than twenty (20) calendar days prior to installation:

a. Materials list and a sample of each item proposed to be provided under this section.

b. Manufacturer's specifications, catalog cuts, and other data needed to prove compliance with the specified requirements.

c. Manufacturer's recommended installation procedures which, when approved by the consultant, will become the basis for accepting or rejecting actual installation procedures used on the work.

.08 Submit separate written warranty, signed by the installer and contractor, agreeing to replace or repair insulation which has cracked, flaked, separated, or peeled from the surface to which it was applied, or otherwise failed to fulfill performance requirements, due to defective materials or workmanship within a period of two (2) years from the date of substantial completion of the work.

.09 The execution of the work shall be in accord with the manufacturer's instructions and recommendations, the best practice of the trade, and the intent of these specifications. All insulation shall be installed over only clean, dry piping.

.10 Insulation shall be clean and dry when installed and kept dry during finish application. Wetted insulation will not be approved for installation. Install materials neatly with smooth and even surfaces with jackets drawn tight and smoothly cemented down on

longitudinal and end laps. Scrap pieces shall not be used where a full-length section will fit. All surface finishes shall be extended to protect all surfaces, ends, and raw edges of insulation. Coatings and adhesives shall be applied at the manufacturer's recommended coverage per gallon.

.11 Do not insulate name plates or ASME labels. Bevel insulation around name plates and ASME stamps.

.12 Install insulation with joints tightly butted. Overlap longitudinal jacket laps not less than 1-1/2 inches. Wrap butt joints with 3 inch wide strips of the same material as jacket. Cement jacket laps and butt strips with adhesive or bedding compound and additionally secure with flared staples on 4 inch centers outside clinched without complete penetration of insulation. A factory-applied self-sealing system may be used without staples unless fishmouths develop. Where vapor barrier jacket on cold or chilled piping is stapled or punctured, the jacket shall be brush-coated with vapor-barrier coating. Adhesive is not required on hot piping jackets when staples are used.

.13 Flanges, Unions, Valves and Fittings shall be insulated with premolded, precut, or job-fabricated insulation of the same thickness and conductivity as used on adjacent piping. When segments of insulation are used, provide elbows with not less than three segments. For other fittings and valves, cut segments to required curvature, or use nesting size sectional insulation. Place and join the segments of the insulation with adhesive. After the segments are in place, apply Type II vapor-barrier coating. Where unions, flanges, and valves are specified not to be insulated, terminate the covering neatly at the ends with insulation cement trowelled on a bevel. Apply a vapor-barrier coating, Type II, to the beveled ends. Cover unions and flanges with removable sections of insulation vapor-barrier-sealed inside and out with adjacent insulation ends neatly finished and vapor-barrier-sealed.

.14 Continue insulation through pipe hangers and pipe sleeves. Where anchors or hangers are secured to chilled piping to be insulated, insulate hangers or anchors same as piping for a distance not less than four times insulation thickness to prevent condensation. Provide protection shields and insulation inserts at hangers where the pipe supported by the insulation. For pipe 2 inches and larger, provide insulation inserts at least 12 inches long at hangers and supports. Inserts shall be treated wood or cork for pipe with operating temperatures below 60 degrees fahrenheit. Provide protection saddles with insulation filler for pipe with operating temperatures above 60 degrees fahrenheit. Saddles shall have sufficient depth for insulation thickness specified and shall have an insulation filler of the same material as the adjacent pipe insulation. Vapor barrier facing of the insert shall be of the same material as the facing on the adjacent insulation. Seal insulation inserts into the insulation with vapor-barrier coating. Provide vapor-barrier over insulation inserts.

.15 Expansion clearances: At points where breeching will move during expansion and contraction (expansion joints, Z-bends, expansion loops, and ells), clearance between the pipe and encased insulation shall be sized to permit full pipe movement without cracking or damaging insulation and casing or jacket.

17.00

**TABLE NO. 1 - SUMMARY OF WORK****ASBESTOS CONTAINING MATERIALS TO BE ABATED**

| <b><u>LOCATION / DESCRIPTION</u></b> | <b><u>APPROX.<br/>QUANTITY*</u></b> |
|--------------------------------------|-------------------------------------|
| Boiler Room /<br>H/W Tank Breeching  | 75 sq.ft.                           |

\* It is the responsibility of the bidder to verify the presence of materials and objects encountered within the indicated work areas, and to take all measurements for estimating total footage. The amounts shown are approximations and any variation more or less shall NOT entitle contractor a price adjustment. These quantities are for disposal estimating only.

18.00 The following floor plan is provided for the Contractor's reference and orientation. Not all objects are indicated. It is the responsibility of the bidder to verify the presence of materials and objects encountered within the indicated work areas.

## 19.00 BID PROCEDURE

.01 Bids will be received and addressed to Mr. , Business Administrator, at the Ocean County Vocational Technical Schools, Administration Offices, 137 Bea Lea Road, Toms River, New Jersey 08753, on or before , 3 pm, Monday, January 27, 1997.

.02 All bids must be in writing, signed and sealed by the bidders. ALL BIDS MUST be submitted in the form set forth in the contract's documents. No bid shall be considered unless submitted in this form. All proposals must be marked:

### BID FOR ASBESTOS REMOVAL BRICK CENTER

.03 In submitting a bid, the bidder signifies that he is fully informed as to the extent and character of the supplies, materials, equipment and services necessary to perform his bid in accordance with all documents constituting the bid and will comply satisfactorily with the bid documents. Further, the bidder signifies that when necessary he has inspected the site on which the work shall be done and is aware of all conditions affecting the execution of the work contained within the bid documents.

.04 The owner reserves the right to reject any or all bids, and re-advertise the work should it be advisable to do so, or to award the contract to any bidder.

.05 Individual: Where the bidder is an individual, he shall sign and seal the proposal personally.

.06 Partnership: Where the bidder is a partnership, the proposal shall be signed and sealed in the name of the partnership, followed by the signature of a partner.

.07 Corporations: Where the bidder is a corporation, the proposal shall be signed and sealed in the name of the corporation, signed by the President or Vice President, and by the Secretary, or Assistant Secretary of the corporation, and the corporate seal affixed thereto. If the proposal is submitted by an agent other than the above, he shall submit evidence of his authority certified by the Secretary of the corporation under the Corporate Seal.

.08 Where the bidder is trading under the Fictitious Names Act, the bid shall include the fictitious name and the names of the persons or corporations carrying on the said business.

.09 No changes in specifications shall be made by the bidder. Alterations or interlineations in the bid may void the bid entirely or may void it as to the part interlined or altered, at the discretion of the Owner.

.10 Where unit prices are requested, as additions or deductions to the base bid, the bidder shall state the unit prices on the proposal sheet in the spaces provided thereon.

.11 The unit prices in every case shall include all tasks of the job, including set-up, execution, disposal, materials, etc.

.12 Each bidder submitting a bid thereby agrees to enter into a contract and to furnish the bonds, if required.

.13 The owner has the right to make an award within 60 days after the opening of the bids and no bid may be withdrawn within that time (or any authorized postponement thereof).

.14 The Owner may reject any bid not prepared and submitted in accordance with the provisions hereof and may waive any informalities in and reject any or all of the bids or any

items or parts thereof.

.15 The bids will be tabulated following their receipt. The Owner will notify the successful bidder in writing that he has been awarded a contract. Within seven (7) days after receipt of the award notice, the bidder (bidders) shall execute the contract and return it along with a Payment Bond and a Performance Bond in the form set forth in the Contract Documents.

#### **20.00 BIDDER'S RESPONSIBILITY**

.01 Each bidder shall familiarize himself with all of the attached forms including general conditions, specifications, and all other documents pertinent to the work including but not limited to drawings, bulletins and addenda to the specification.

.02 The bidder shall visit the site of the work before submitting his bid, and shall examine all physical conditions which might be material to the performance of the work.

.03 No interpretation of the meaning of the specification will be made orally to any bidder. Request for interpretation must be in writing, addressed to the owner and received no later than three days prior to the date of bid opening.

#### **21.00 PERFORMANCE BOND (If required) YES**

.01 A Performance Bond (in the form attached) in an amount equal to one hundred percent (100%) of the Contract, conditioned upon the faithful performance of the Contract.

#### **22.00 LABOR AND MATERIAL BOND (If required) YES**

.01 A Labor and Material Bond (in the form attached) in an amount equal to one hundred percent (100%) of the amount of the Contract, such bond to be solely for the protection of the amount of the claimant's supplying labor or materials to the Prime Contractor to whom the Contract was awarded, or to any of his sub-contractors, and shall be conditioned for the prompt payment of all such materials furnished or labor supplied or performed in the prosecution of the work. The Labor and Material Bond shall include public utilities services and reasonable rental of equipment, but only for periods when the equipment rented is actually used at the site.

#### **23.00 SURETY**

.01 Surety on all bonds shall be authorized to do business in the State of New Jersey and must be approved by the Owner prior to the bond application, and the Surety must have a certificate of authority as an accepted surety on bonds to be furnished to the United States of America on Federal projects.

#### **24.00 INSURANCES**

.01 The successful bidder shall also deliver to the Owner, before the time of the execution of the Contract, Insurance Certificates showing that he is carrying for this project, the kinds and types of insurance and the amounts thereof as required. All insurance shall be issued by companies approved by the Owner and authorized to transact business in this State. Certificates shall contain a provision that the policies cannot be cancelled without thirty (30) days notice to the Owner.

.02 Contractor shall provide, secure and maintain in force for the term of the project

insurance coverage. The Contractor shall provide three (3) Certified Certificates of Insurance for all coverage described herein, and shall list the Owner and R.K. Occupational & Environmental Analysis, Inc as additional names insured. No cancellation of said policies shall be done for any reason without written notice of thirty (30) days.

.03 The Contractor shall carry, and submit documentation with the bid, at minimum the following amounts of insurance:

a. Workmen's Compensation and Employer's Liability Insurance affording (1) protection under the Workmen's Compensation and (2) Employer's Liability protection subject to a limit of not less than \$ 500,000.00.

b. Comprehensive General Liability Insurance under a policy including coverage for asbestos hazards and pollution liability in amounts not less than:

|                 |                 |
|-----------------|-----------------|
| Bodily Injury   | \$ 1,000,000.00 |
| Each Person     | \$ 1,000,000.00 |
| Each Accident   |                 |
| Property Damage | \$ 500,000.00   |
| Each Accident   | \$ 500,000.00   |
| Aggregate       |                 |

c. Comprehensive Automobile Liability Insurance under a policy as broad in scope as that in general use by domestic insurers in amounts not less than:

|                 |                 |
|-----------------|-----------------|
| Bodily Injury   | \$ 1,000,000.00 |
| Each Person     | \$ 1,000,000.00 |
| Each Accident   |                 |
| Property Damage | \$ 500,000.00   |
| Each Accident   | \$ 500,000.00   |
| Aggregate       |                 |

.04 Owners' Protective Liability Insurance: The Contractor will procure and maintain, at its own expense, during the entire period of performance of the contract which will include the maintenance and guarantee period, an Owners' Protective Liability Insurance policy subject to limits as specified in subsection .02 b. under the heading Comprehensive General Liability Insurance. Coverage under this policy is to protect the Owner, its officers and employees from claims for bodily injury and property damage which may arise from or out of operations be by the Contractor, the sub-contractor or by any sub-contractor, or by anyone directly or indirectly wmployed by any and all of them including all liability assumed under this contract or under any other provisions thereof. This insurance must cover the legal liability of the Owner by listing *Ocean County Vocational Technical School* as the "named insured" for the project.

If the contractor so desires or is unable to obtain this coverage in a form acceptable to the Owner, the Owner will purchase an Owners' Protective policy as described above and deduct the cost from the total contract price.

.05 Where services provided by the Contractor involve the removal of asbestos or clean up of any environmental contaminant or pollutant, the contractor is required to provide additional information regarding its liability coverage which will show that coverage is provided for these exposures subject to a policy limit at least equal to but not less than \$1,000,000 each occurrence and annual aggregate.

With respect to Asbestos & Pollution Liability, a "claims made" form may be acceptable if coverage can not be obtained on an "occurrence" form. However, before the Owner will accept a "claims made" form, the contractor must submit in writing to the Consultant an explanation as to why the contractor is unable to obtain coverage on an "Occurance Form". The Contractor must also include a complete copy of the contractor's policy for review by the Consultant.

.06 Contractor must provide WITH THIS BID, a complete and thorough explanation of his asbestos liability coverage. The explanation must indicate that the policy is written on an "occurrence" basis with the name and address of the insurance carrier, the date of inception and cancellation and any/all exclusions in the policy. The Contractor must completely explain his coverage and provide an example of a previous certificate issued for an asbestos project. If the Contractor so desires, he may choose to submit a copy of his actual policy. Owner has the right to refuse the Contractor's bid based on the quality of the insurance policy.

## 25.00 PREVAILING WAGE INFORMATION (If required) NO

.01 Labor rate schedules and additional information regarding the New Jersey Prevailing Wage Act may be distributed at the mandatory pre-bid meeting.

.02 The Contractor understands that the project includes removal work on mechanical systems and will be taking place on some weekend hours.

## 26.00 NON-COLLUSION AFFIDAVIT

.01 The non-collusion affidavit found in Appendix I, must be executed by the member, officer, or employee of the bidder who makes the final decision on prices and the amount quoted on the bid.

.02 This item shall be submitted with the Contractor's bid form.

## 27.00 INTERPRETATION

.01 The Consultant shall decide, in his absolute discretion, as to the meaning and applicability of any part of the General Conditions, Specifications for Asbestos Removal, and Scope of Work, and his decision shall be binding and final on any question submitted such as what constitutes "satisfactory" performance. Above and beyond consideration of their respective rights and duties, it is well to remember that the Owner, the Consultant, and the Contractor constitute three parties who should strive continually to work together in a spirit of mutual helpfulness toward a common objective, the satisfactory completion of the contract.

.02 Any correction of errors or omissions in the Specifications may be made in writing by the Consultant when such correction is necessary for the proper fulfillment of their intention as construed by him. Where said correction of errors or omissions, except as provided in the next two paragraphs below, adds to the amount of work to be done by the

Contractor, compensation for said additional work shall be made under the item for extra work.

.03 Any work performed after the discovery of an error or omission in the Specifications, without the acceptance of the Consultant, shall be at the risk and expense of the Contractor with no liability or cost attaching to the Owner.

.04 All work and materials usual and necessary to make the work complete in all its parts, whether or not they are specifically mentioned in the Specifications, shall be furnished and executed the same as if they were called for by the Specifications but will not entitle the Contractor to consideration in the matter of any claim for extra compensation.



**R.K.** Occupational & Environmental Analysis, Inc.  
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