No Check	(Pu	rsuant to	NJAC 8:60 and	12:120)		201		*		口	
Date of Notification (1) 4/23/14	10.00	Name of E	Building Owner/O	perator	(2)							
Agencies Notified Type Notification		Street Add	dress gle Rock Rd			1263	APR	3 0	2	714		
EPA Initial Amended Amendme		City, State	e, Zip Code nd, NJ 07068		6	•					2	
DOH Emergence justification	cy (including n)	Name of 0	Contact				Talanhana	Numbe	r			
DCA Cancellation	on		ITY INFORMATION	ON								
Name of Facility Where Abatement is Tal-	king Place (3)	TAGIL			Type o	f Facility (4)			OBJUE.			
Saddle Brook Substation					S	chool (K-12)	/O11 #	K 40\				
Street Address 392 Jefferson St					対。	ubchapter 8 ther (i.e. priv c.)	(Other than rate & comm	nercial b	uildi	ngs, I	nome	s,
City (5)					Square N/A		# of Floors N/A		Blo N/	ig. Ag	ge	
Saddle Brook, NJ 07663 County (6)	10	County C	ode (7)			t Use (Prior	if being dem	nolished	11000000			
Bergen County	1	(STATE U	SE ONLY)	-	N/A							
Name of Monitoring Firm Hired by Buildin N/A	ng Owner (8)	ASCM	No.	Name WRS	of Abate Envir	ement Contr onmental	actor (9) Services,	inc.				
Street Address N/A					Address							
City, State, Zip Code					State, Zip	Code NY 11980						
N/A		Telephon	no No		none No		Licen	se No.	-			-
Project Manager for Monitoring Firm N/A		reiepriori	le Nu.		924-81		3303					
Start Date (10) 4/22/14	Scheduled Com 4/22/14	npletion D	Date (11)			A Monitor onmental	Services,	Inc.				
Occupancy Status During Abatement (Ch	heck Only One)			TOTAL CONTRACTOR	Address							
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	re Period of Abatem ormal Facility Hours	nent i		City, S	State, Zip	197						
Scope of Work (Check All That Apply)											0	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renova Demolit				Mini	i-Enclosure vebag Proce	nt with Negatedure (*) and Non-				9	
	Is Locati	ion					7			Abate	ment	
Location of	Normal	ly	De	scription	n of				-	Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Sole Maintenar Custodial S (12) Yes No	nce/			ns insulat AT, or		Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
Exterior Trenching		X	Tra	nsite F	Pipe		1 LFT	2	2			
Exterior frontishing												
			1									
Name of Registered Waste Hauler	61 63	JDEP W		Yards			egistered La	andfill				
Veolia ES Technical Solutions	14 23	lauler ID 0071	1/4			Wayne [
City, State 1 Eden Lane, Flanders NJ 07836	3		Dispo 4/24/	sal Date	е	City, State Belleville	e, MI 4811	1				
Completed by Michael DiMaria	Title Project Ma	anager		Signatur	chae	110	Mans	Date 4/23				

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Mo Chac	ic		(Pu	rsuant	to NJAC 8	3:60 and	12:120	0)						己口	5
Date of Notification (1) 4/23/14				Name of PSEG	Building (Owner/Op	perator	(2)				1		1	
Agencies Notified	Type Notification		1000	Street A	ddress agle Roc	k Rd			2		, 52	ว ก	2017		4
DEP DOL	Initial Amended Amendment	#	(City, Sta	te, Zip Co and, NJ (de		17				A V			
DOH DCA	Emergency justification) Cancellation		ī	Name of	Contact Neville					Tole	enhone Nu	ımh	-1	-	
				FACI	LITY INFO	ORMATIC	ON							370	
Name of Facility Where A Hudson Switching S		g Place (3))					Ту	pe of Facility (School (K-1	2)	ar than K	12)			
Street Address 164 Van Keuren Av	е							×	Subchapter Other (i.e. p etc.)	orivate 8	commerc	cial buil	dings	, home	es,
City (5) Jersey City, NJ 070	97							Sq N/	uare Feet	# of N/A	Floors		Bidg. /	Age	
County (6) Hudson County					Code (7) USE ONLY)		_	Cu N	rrent Use (Pri	or if bei	ng demolis	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	l No.				batement Cor			c.			
Street Address N/A		The state of the s					Street 17 O		iress Dock Rd				-		*
City, State, Zip Code N/A					11				, Zip Code k, NY 1198	0					
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	hone	CHILD A CASE OF THE STATE OF		License 33039	No.			
Start Date (10) 4/23/14		Schedule	d Com		Date (11)		Name	of C	OSHA Monitor	al Sen		 С.			
Occupancy Status During	Abatement (Chec	91.W-0.97/785_1					Street								
Facility Closed/Vaca Abatement Perform	ated During Entire	Period of A	batem Hours	ent		l	City, S	State	Oock Rd , Zip Code						-
Other – Describe: _						_	Yapi	han	k, NY 1198	0					
Scope of Work (Check Al ≥3 sf or ≥3 If ≥160 sf or ≥260 If	ll That Apply)		enovat emoliti						Full Containm Mini-Enclosure Giovebag Pro Non-Exempte	e cedure	6			re	
		Is	Location	on									Aba	ement	
Location			lormall d Solel				cription				v.		Τ,	Ī	
Asbestos-Containing TO BE ABA In Facili (13)	ATED	Mai	ntenar odial S (12)	nce/		thermal	system cing, VA	as ins	or	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior Tre	enching			X		Trar	site P	Pipe			4 LF	X	T		
Name of Registered Was	te Hauler		N.	JDEP W	/aste	Cubic '	Yards		Name of	Registe	ered Landf	ill	1	l	
Veolia ES Technical			H	auler ID		of Was		ā	Wayne	Dispo					
City, State 1 Eden Lane, Flande	ers NJ 07836					Dispos 4/24/1	al Date	9	City, Stat Bellevil		48111				
Completed by Michael DiMaria		Title Proje	ct Ma	nager		S	ignature 1	e K	hal /1	94		Date 1/23/1	4		

No Check		M. 1 4 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			0 and 12:12	NV.							<u> </u>
Date of Notification (1) 4/23/14	9		ame of B	uilding Ow	ner/Operato	r (2)					Electric de la constant de la consta	4	
Agencies Notified Type Notification			reet Add 40 Eag	iress jle Rock	Rd						2		- 1
EPA Initial Amended Amendment		Ci	ity, State loselar	, Zip Code nd, NJ 07	068		Y		Ft I	7/1	-8		
[X] Emergency		100	ame of 0					Tele	phone Num			143	
DOH justification) DCA Cancellation				TY INFOR	MATION	- system			*				
Name of Facility Where Abatement is Takin Intersection of Ackerman Ave & R Street Address Intersection of Ackerman Ave & R	oute 21 - E	xcav				Typ	School (K-12) Subchapter 8 Other (i.e. pri	(Othe	r than K-12) commercia	l buildi	ngs, I	nomes	s,
City (5)	Oute 21		ni			Squ N/	etc.) uare Feet	# of N/A	Floors	Blo N/	dg. Ag	je	
Clifton, NJ 07011 County (6)		C	ounty C	ode (7)		Cui	rrent Use (Prior			ed)			
Passaic County Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.	Nam	N/. ne of A	batement Contr	actor	(9)				\dashv
N/A						RS Er	vironmental	Serv	ices, Inc.				\dashv
Street Address N/A			= 2		17	Old [ock Rd						
City, State, Zip Code N/A					City,	State phanl	, Zip Code k, NY 11980						
Project Manager for Monitoring Firm N/A		T	elephon	e No.		phone 1-924	No. -8111		License No 33039).			
Start Date (10) 4/17/14	Scheduled 4/17/14	Com	pletion D	oate (11)			SHA Monitor nvironmental	Sen	rices, Inc.				
Occupancy Status During Abatement (Che				All Designation	(A 45 (A 10))	et Add Old [ress Dock Rd						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	mal Facility H	ateme ours	ent:				, Zip Code k, NY 11980)					
Scope of Work (Check All That Apply)						<u>г—</u>							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati				H	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure				e	٠.
							Non-Exempted	() an	u Non-man	T		ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	No Used Maint Custoo	enan	y y by nce/	(i.e. t	Descript os Containin hermal syste surfacing, other misce	g Mate ems in VAT, o	sulation, or	(5	mount Specify F or LF)	Removal	Repair	e Encapsulate	Enclosure
		No	N/A		Transite	Dine			LFT	x		-	\vdash
Exterior Trenching (Street work)	1		X		Tansile	ripe	,			+			
-													
1													
Name of Registered Waste Hauler		1000000	JDEP W	STREET STORM	Cubic Yard of Waste	İs	Name of I Wayne		ered Landfil	ı			
Veolia ES Technical Solutions		10000	0071		1/4 Disposal D	ate	City, State	į.	Jour		-	discussion of	
City, State 1 Eden Lane, Flanders NJ 07836			Lr annien in en		4/24/14		Bellevill			ate			
Completed by Michael DiMaria	Title Projec	t Ma	anager		Signa	lure UCI	hael / K	Et.	~ ~ -	/23/1	4		

Check. # 2048

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

Date of Notification (1)		-		Building Owner / Ope	rator (2)			1 15	
04 / 28 / 14			MARS SN Street Ad	ACK FOODS	-				
Agencies Notified Type of N	lotification		700 HIGH	2007 THE SOURCE					
☑ EPA ☑	Initial		City, State	e, Zip Code	,	APH	3 0 0	018	
DEP DEP	Amended			STOWN, NJ 07840		T	Nii-	97.7	•
☑ DOH □	Amendment	# // justification	Name of O	7477.7.7.8.8.5		Telephe	DA NIIME		
DCA	Cancellation	ii justineation	2014 AVIA	DERWAL		1	1	>	
		F	ACILITY IN	FORMATION				12.594	
Name of Facility Where Abates	mont is Taking	Place (3)		Type of Facility (4)		0 4		-	
MARS CHOCOLATE	Hent is raking	riace (3)		Type of Facility (4)					
				School (K	28				
Street Address					er 8 (Other				
700 HIGH STREET					., private & omes, etc.)	Cilinercia	aı		
City (5) County (5)	County Code	(7)	Square Feet	# Of Floor	'S	Building		
HACKETTSTOWN WARREN	Ŋ w			800,000	<u> </u>	3	1	40-	F
				Current Use (Prior if MANUFACTURING	being dem	iolisnea)			
Name of Monitoring Firm Hire	d by Blda. Own	er (8)	ASCM NO	Name of Abatement	Contractor	(9)	<u> </u>		
		(5)				. ,			
AET				LVI Demolition Service	es Inc.				
Street Address 907 DOOLITTLE DRIVE				Street Address					
City, State, Zip Code				32 Williams Parkway					
BRIDGEWATER, NJ 08807				City, State, Zip Code)				
Project Mngr. For Monitoring I	irm	Telephone Nu	mber	1	102				
ERIC HOUSEKNECHT	Icahad Cama	908-218-1108	4)	East Hanover, NJ 079 Telephone Number	936	License	Number		
Sheduled Start Date (10) 05 / 13 / 14	05	letetion Date (1	14	relephone Number		Licerise	Number		
//	/	-/		973-772-3660			0	0860	
Occupancy Status During Aba				Name of OSHA Mon					
Facility Closed/Vac	ated During En	tire Period of		LVI Demolition Service Street Address	es inc.				
Abatement Perform Hours - Describe:	ed Outside of I	Normal Facility		32 Williams Parkway					
Other - Describe:	_7:00AM -3:30	PM		City, State, Zip Code					
Scope of Work (Check All Tha	t Apply)			East Hanover, NJ 079	336				
Damaiidea		D	(T)	Full Containment wi	th Nogotive	Drocour			
☐ Demolition ☐ >3sf or >3lf	V	Renovation		Full Containment wi Mini - Enclosure	ui Negauve	riessuit	3		
≥160 sf or ≥260 lf				Glovebag Procedure					
				Non-Exempted (*) ar	nd Non-Fria	ble Proce	edure		
Location of	ls	<u> </u>	Descript	ion of	1	Abateme	ent Type		
Asbestos Containing	Location	As	sbestos - C			R		E	E
Material (ACM)	Normally		Material		Amount	E	R	N	N
TO BE ABATED in Facility	Used	NO.	e., therma	l systems facing, VAT,	(Specify SF or LF)	M	E	C	C L
(13)	by Main-			ellaneous)	Jar of Lr)	l v	A	P	o
3,55	tenance/					Α	1	s	s
	Custodial					L	R	U	U R
	Staff (12) YES NO N/A				-		+	1	- K
TANK FARM		TANK INSULA	TION		200 SF	v			
TANK FARM		PIPE INSULAT	ΓΙΟΝ		7 LF	V			
								1 -	 -
Name of Registered Waste Ha		NJDEP Waste	Cubic	Name of Registered	l andfill		4-4-		
NEWARK CARTING	alei	Hauler ID No.		I.E.S.I.	Lunum				
City, State		- 4503	Disposal	City. State					
NEWARK, NJ			Date	BETHLAHEM, PA					
Completed by (Print or Type)		Title		Signature	()r	_		Date	
STEVE STILES		PRO JECT MAI	NAGER	1 10	#	<u>></u>)			04/28/14

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

Date of Notification (Name of Bu		ner / Opera	tor (2)	· · · · · · · · · · · · · · · · · · ·		7	
04 / 28	/14		The state of the s	First Energy Street Add					7	1 1-1	
Agencies Notified	Type of No	tification		76 South St	reet						
☐ EPA	√	Initial		City, State, Akron, Ohio				ADD			
☐ DEP ☑ DOH		Amended Amendment#		Name of Co				Telenhon	M AlI		
☑ DOL	1000000	Emergency w		Jim Halsey				(9	P	
<u> </u>		Cancellation									
			FA	CILITY INF	ORMATION	N.	2		ř.		ĺ
Name of Facility Whe	ere Abateme	ent is Taking	Place (3)		Type of Fac	cility (4)				•	
					Santana.	School (K-	(5)		<u> </u>		
Street Address						Subchapter Other (l.e.,	8 (Other	than K-12	?) ial		
321 MAIN STREET				1		oldgs., hon		Johnnero	iai		
City (5)	County (6)		County Code ((7)	Square Fee	-	Of Floors	3	Building	Age	
SAYREVILLE	Middlesex		, se		Current Us	a /Drior if h	oing dom	olished)	1		
					Telephone F		enig deni	olisheuj			
Name of Monitoring	Firm Hired	by Bldg. Own	er (8)	ASCM NO	, otopitotio .						
					11/1 Dazza?"	ion Conila-	e Inc				
Environmental Health	Investigation	ns			LVI Demolit Street Add		s IIIC.				
Street Address 655 West Shore Trail					- Got Audi						
City, State, Zip Code					32 Williams						
Sparta, NJ 07871			T-1		City, State,	Zip Code					
Project Mngr. For Mo Dino Nappi	onitoring Fi	rm	Telephone Nu 212-682-9271		East Hanov	er, NJ 0703	36				
Sheduled Start Date	(10)	Sched. Comp	letetion Date (1		Telephone			License	Number		
05//09	/14	05		14_	070.00	4 0000			00	0860	
// /	/ Abata	mant (Chack	Only 1)		973-884 Name of O		or		- 00	,000	
Occupancy Status D	losed/Vacat	ted During En	tire Period of		LVI Demolit	17					
Abatemer	nt				Street Add	ress					
Abatemer	nt Performe	d Outside of I	Normal Facility		32 Williams	Parkway					
Other - De	escribe:	Friday 8:00 a MON - 8:00an	n to 5,00 pm		City, State,						
					East Hanov	er, NJ 0703	36				
Scope of Work (Che	ck All That	Apply)									
☐ Demolitio	n	V	Renovation		Full Contai	inment with	n Negative	Pressure	е		
	3lf	_			Mini - Encl						
☐ ≥160 sf or	r ≥260 If				Glovebag I Non-Exem	Procedure	d Non-Fria	ble Proce	edure		
				<u>.</u>	NOII-EXCIII	ptou () u.i.					
Location o	of	ls		Descripti				Abateme	ent Type	ΙE	ΙE
Asbestos Cont	aining	Location	As As	sbestos - C Material (T		Amount	R	R	N	N
TO BE ABAT	TED	Normally Used	(1	e., thermal.			(Specify	М	E	С	c
in Facility		Solely	insu	ılation, surf	acing, VAT	,	SF or LF)	20,500	P	A	L
(13)	1	by Main-	or	other misc	ellaneous)			V A	A	P S	o s
3		tenance/ Custodial						l î	R	Ū	Ü
		Staff (12)								L	R
		YES NO N/A					20.15		1	 	-
Exterior Telephone P	ole		Transite Cond	uit			20 LF	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			+-
			1						1 5		
Name of Registered		iler	NJDEP Waste		Name of R	egistered	_andfill				
NEWARK CARTING			Hauler ID No.	Yards of Waste	I.E.S.I.						
City, State			4508	Disposal	City. State						
NEWARK, NJ				Date		EM, PA 181	05				
			T:41e			Signature				Date	
Completed by (Print	t or Type)		Title			Jigilatule	-	=	9		
Steven Stiles			Project Manag	ger		200		2			04/28/14

Na Chark			NO	TIF					STOS ABAT 3:60 and 5:16				********	10 TS00 VS		
Date of Notification (1)						Name	of Building	g Ov	vner/Operator (2	2)				-	7.	
	15	/ _	14					5.44		of Design and	Constru	ction			97.	
Agencies Notified	Type N		tion			Street	Address					nn				
☐ EPA	☑ Initia					200	Elm Dr.					APR •:	0	2014		
□ DOLWD	⊠ Ame					City, S	State, Zip C	Code)							
☑ DHSS	The property of the control of the c		nt # <u>5-4/</u>		14		nceton, N				the season	in the street,				
DCA (NJAC 5:23-8)		rgenc ficatio	y (includ	ing			of Contac				Telephor		400			
(NJAC 3.23-6)	☐ Can					100000000000000000000000000000000000000	pert Orte						17016 11			-
			-	_					RMATION				_			
Name of Facility Where A	batemer	nt is Ta	aking Pla	ce ((3)				· · · · · · · · · · · · · · · · · · ·	Type of Facility (4)	-				
Princeton Universit										School (K-12)					
Street Address	•									Subchapter 8						
Washington Rd										Other (i.e., pr homes, etc.)	ivate and	commer	cial bu	ııldıng	ļS,	
City (5)										Square Feet	# of Flo	ors	BI	dg. A	ge	-
Princeton													-	-3	3-	
County (6)						Cour	ty Code (7	7)/ST	ATE USE ONLY)	Current Use (Pri	or if being	demolis	hed)			
MERCER						Joour	ny oode (i	ДОП	THE GOL ONE IT	Library	or it boiling	001110110	ilou)			
Name of Monitoring Firm	Hirod by	Duildi	ina Own	NF / 9	»\ T	ASCM	No	Nic	ama of Abatama	ent Contractor (9)						
ATC Associates Inc		Dullul	ing Own	ei (c	"	ASCIVI	NO.	38638		' '	INC					
	. .							-		VIRONMENTAI	_, INC.			2532		
Street Address								reet Address	OTDEET							
Three Terri Center									1123 BEAVE							
City, State, Zip Code									ty, State, Zip Co							
Burlington, NJ 0801	16705								BRISTOL, PA	19007	-					
Project Manager for Moni	toring Fi	rm				ephone		1	elephone No.		License					
Michael Keehn						09-386		1	215-788-6040		0050	9				
Start Date (10)	_14_	S	cheduled 5		o more	etion Da		1000	ame of OSHA M BRISTOL EN	onitor VIRONMENTAI	_, INC.					
Occupancy Status During	Abatem	ent (C	heck on	y or	ne)			Sti	reet Address	2100			•			
☐ Facility Closed/Vacate								1 .	1123 BEAVER	R STREET						
☐ Abatement Performed							cribe	Cit	ty, State, Zip Co	ode			27-33-38			-
Time of Abatement: 6	:30AM-3	:00PI	M/	_PM	1	AM			BRISTOL, PA	19007						
Scope of Work (Check all	that app	ily)						1		200 CO 20	AND SOLET					
		1.5.5%	_							ainment with Neg	ative Pres	sure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 					ovat noliti				Mini-Enc Glovebage Glovebag							
₩ ≥100 SI OI ≥200 II			u	Den	HOIL	OII				mpted (*) and No	n-Friable F	rocedur	e			
		-		ls l	Loca	tion		+1					Ab	atem	ent T	уре
Location	of				orma				Description o	f			10000	T	1	1
Asbestos-Containing		(ACM)				ely by ance/			Containing Ma		Amo		em	Repair	nca	nclo
TO BE ABA			1.0	10000		Staff?	(I.e		ermal systems i surfacing, VAT,		(Spe		Removal	=	psu	Enclosure
(13)	.,				(12)		1		ther miscellane				-		Encapsulate	G,
			Ye	s	No	N/A				90						
Throughout Levels C	, B and	A	\boxtimes				Floor ti	le a	nd mastic		1,46	SF				
Office A-7J							Windov	N C	aulk		96	LF				
Throughout Levels C	, B and	Α					Duct w	ork			1775	SF				
Name of Registered Was	te Hauler				2000	NJDEP I		110000	ibic Yards of	Name of Regis	tered Land	dfill		-	-	
SERVICE TRANSPO	ORT GR	OUP	INC		F	dauler II 20990		Wa	aste	G.R.O.W.S	. NORTH	LAND	FILL			
City, State	100,120,110,100							Dis	sposal Date	City, State	-15/00/2012 -1-2-2-2-2					100
NEW CASTLE, DE										MORRISVI	LLE, PA	19067				
Completed By (Print or Ty	/pe)		Title					1	Signature	1 1.	1	Da	te			
Brian Scafiro			Estin	nato	or				Brisa	Scolino	1-1					

Date of Notification (1)					Nan	ne of Buildi	ng Owner/Operator	(2)		0.77			
01/	15 /	14	L				University-Office		AFR Constructio	3 U ₹ n	114		
☐ EPA	Type Notif ☑ Initial	fication			Stre	et Address 00 Elm Dr			3	-			
M 100 100 100 100 100 100 100 100 100 10	Amend					State, Zip	<u>. </u>						
⊠ DHSS	Amend						NJ 08544						
DCA (NJAC 5:23-8)	☐ Emerge justifica	ency (in	ncludir	ng		ne of Conta			-	11			
	☐ Cancel					obert Orte			Telephone N	iimhe-	79		
					_								
Name of Facility Where Ab	atement is	Takin	- Die	- (2)	F/	ACILITY II	NFORMATION						
Princeton University				æ (3)				Type of Facility (☐ School (K-12)	95				
Street Address								Subchapter 8	(Other than K	-12)			
Washington Rd			100					Other (i.e., pri homes, etc.)	ivate and com	mercial	buildi	ngs,	
City (5)								Square Feet	# of Floors		Dida	۸۵۵	
Princeton								oquale i col	W 011 10015		Bldg.	Age	
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Price	or if hains dom	aliah a di			
MERCER						, 0000 (MOTATE OUE ONE TY	Library	i i being dem	iolisned)		
Name of Monitoring Firm Hi	red by Bu	ilding C	Owner	(8)	ASCN	A No	Name of Abatem	Programme and the second second					
ATC Associates Inc.	1			(0)	/10011	1110.	1						
Street Address								VIRONMENTAL	, INC.				
Three Terri Center							Street Address				24.00		
City, State, Zip Code	-						1123 BEAVE						
Burlington, NJ 08016							City, State, Zip Co				100		
				1			BRISTOL, PA	19007					
Project Manager for Monitor	ing Firm				ephone		Telephone No.		License No.				-
Michael Keehn				1		0088-6	215-788-6040		00509				
Start Date (10)2 /5 /						ate (11) 14	Name of OSHA M BRISTOL EN	Ionitor VIRONMENTAL	. INC.				
Occupancy Status During Al	batement	(Check	only	one)			Street Address						
☐ Facility Closed/Vacated [4.			ment		1123 BEAVER	STREET					
Abatement Performed Ou	utside of N	Normal	Facilit	y Hou	rs - De	scribe	City, State, Zip Co						
Time of Abatement: 6:30	DAM-3:00	PM/_	P	M	AM		BRISTOL, PA						
Scope of Work (Check all the	at apply)				-								
≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf			⊠ Re □ De	enovat emolitic	ion on		Mini-Encl Glovebag			dure			
				Local							haten	ent T	vne
Location of	oriol (A Ct			Norma ed Sole			Description of			1		T-	-
Asbestos-Containing Mat TO BE ABATE		VI)	Ma	intena	nce/	Asbes	stos Containing Mat ., thermal systems i	erial (ACM)	Amount	Remova	Repair	inci	Enclosure
IN Facility	-		Cus	todial	Staff?	(surfacing, VAT,	or	(Specify SF or LF)	ova	=	squ	uso
(13)		-		(12)	Τ	-	other miscellaned	ous)		-		Encapsulate	6
hroughout Levels C, B	and A		Yes	No	N/A	F1				_	_	-	
Office A-7J	and A	-					e and mastic		1,465 SF	×			
						Window			96 LF	Ø			
hroughout Levels C, B	and A	-				Duct wo	ork —————		1775 SF	×			
lame of Registered Waste H SERVICE TRANSPORT		INC		H	JDEP V	No.	Cubic Yards of Waste	Name of Registe G.R.O.W.S. I		DEIL			
ity, State					20990		Disposal Data			DI ILL			
NEW CASTLE, DE							Disposal Date	City, State MORRISVILL	E, PA 1906	7			
ompleted By (Print or Type)		Title					Signature			Date			
Brian Scafiro		Est	timat	ог			Breeze	belin lik	,	4/10	.//	4	

Date of Notification (1)				11		Iding Owner/Opera		APH 3 U	YIII.			
01 / _	15 /	14			Princetor	n University-Off	tor (2)	d C				_
Agencies Notified ☐ EPA ☑ DOLWD	Type Notific			5	Street Addres	SS		d Construction	on ——			ٺـــ
☑ DOLWD	Amende			. 6	ity, State, Z				_			
□ DCA	Amendm Emergen	ent #3-	4/3/14	.		, NJ 08544						
(NJAC 5:23-8)	justificati	on)	Jaing	IN	ame of Con			de des houses	-27			
	☐ Cancellat				Robert Or			Telephone N	lumbe			_
		_				INFORMATION						
Name of Facility Where Al	patement is T	aking P	lace (3)		THE STATE OF	Type of Facility	(A)				
Princeton University	-Firestone	Librar	У				School (K-1					
Street Address Washington Rd		**					☐ Subchapter ☐ Other (i.e.,	8 (Other than K	-12) mercia	ıl buik	dinas	
City (5) Princeton							homes, etc.	# of Floors			. Age	
County (6)										Diug	. Aye	,
MERCER				10	ounty Code	(7)(STATE USE ONL	Current Use (P	rior if being dem	olishe	d)		-
Name of Monitoring Firm H	ired by Buildi	na Own	er /8\	TAS	CM No.		Library			-,		
ATC Associates Inc.	-,	g Own	C1 (U)	ASI	JIVI NO.		ment Contractor (9 NVIRONMENTA					_
Street Address						Street Address	MAIKONMENTA	L, INC.				
Three Terri Center		1000				1123 BEAV	ER STREET					
City, State, Zip Code	* 81.00					City, State, Zip						_
Burlington, NJ 08016						BRISTOL, P						
Project Manager for Monitor	ing Firm			elepho		Telephone No.		License No.				
Michael Keehn					86-8800	215-788-604	10	00509				
Start Date (10) 2 / 5 /	Sc				Date (11)	Name of OSHA	Monitor	00000				
					14	BRISTOL E	VIRONMENTAL	INC.				
ccupancy Status During At	patement (Ch	eck onl	one)			Street Address						
Facility Closed/Vacated D Abatement Performed Out	Juring Entire	Period o	f Aba	tement		1123 BEAVE	R STREET					
Time of Abatement: 6:30	AM-3:00PM	iai raci /	iny mo PM-	urs - Di Al	escribe M	City, State, Zip C	ode					
cope of Work (Check all tha						BRISTOL, PA	A 19007					
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			s Loca		T	EZ WON-EXE	mpted (*) and Non	-Friable Procedi	ure			
Location of Asbestos-Containing Mate	rinl (ACAA)	He	Norm	ally lely by		Description of	ıf		A	baten	_	
TO BE ABATED		M	ainten	ance/	Asbes	tos Containing Ma	terial (ACM)	Amount	Re	Re	E	1
IN Facility		Cus		Staff?	(1.6.	, thermal systems surfacing, VAT,	insulation,	(Specify	Remova	Repair	Cap	Fuctosone
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roughout Levels C, B a	nd A	×			-	and mastic			_	_	_	L
ice A-7J		×		1	Window			1,465 SF	×			L
oughout Levels C, B a	nd A	×			Duct wo			96 LF	×			
		Ø		6				1775 SF	×			
ne of Registered Waste Hau	ıler	1-		JDEP \	Vaste Tr	Cubic Yards of	I No.					
ERVICE TRANSPORT	ROUP INC	:		auler II 20990	No.	Vaste	Name of Register G.R.O.W.S. N	red Landfill	EU 1			
State				20330		Disposal Date	City, State	UNIT DAND				- A-STA
EW CASTLE, DE							MORRISVILL	F. PA 10067				W
plated By (Drint or Type)	T 7144							-, FA (300/				

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Agencies Notified EPA	Type Notif	cation			Street Addr		e or Design an	o Const	tructio	n			
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☑ DHSS	Amend												
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(NJAC 5:23-8)	☐ Emerge justifica	incy (in	dudin	g	rnnceto	on, NJ 08544							
	Cancell	ation			Name of Co			Talen	hone Ni	armh.		_	_
					Robert C			1	10110 141				
Name of Facility Where Ab	Stement in	Table.			FACILIT	Y INFORMATION		٠			_		
Princeton University	Eimoton	i aking	Place	(3)			Type of Facility	14)					
Street Address	LINGSTON	e Libr	ary				School (K-12						
Washington Rd							Subchanter	R /Other	than v	461			
City (5)							I LO Uther (i.e., p	Ovate an	d comm	12) Merci	al bu	ildin .	
Princeton		574-4						Marine III		~ I (ei v ui	wung:	S,
							Square Feet	# of F	loors		Bld	g. Ag	e
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MERCER				- 1	y 0000	WAS THIE USE ONLY		or if bein	g demo	lishe	d)	-	_
Name of Monitoring Firm Hir	ed by Build	ding Ov	vner (A) IA	SCM No.		Library		-1 coll 600 5555		-/		
ATC Associates inc.			(0	1	COM NO.	Name of Abateme	ent Contractor (9)						_
Street Address					1/4	BRISTOL EN	VIRONMENTAL	INC					
Three Terri Center						Street Address		,					
City, State, Zip Code						1123 BEAVER	RSTREET					59550	
Burlington, NJ 08016						City, State, Zip Co	de						
Project Manager for Monitorin	- Fi-				25-36-	BRISTOL, PA							
Michael Keahn	ig rim		T		one No.	Telephone No.	. 3001	1					
				609-	386-8800	215-788-6040		License					_
Start Date (10)	10												
	1 30	hedule	d Con	pletion	Date (11)	Name of Colle		0050	18				
2 / 5 / 14	-	4	_ /	4	Date (11)	Name of OSHA Mo	nitor		19				_
2 / 5 / 14 Occupancy Status During Aba	tement (C)	4 neck on	_ / _	4	/ 14	BRISTOL ENV	nitor IRONMENTAL,		J9				_
2 / 5 / 14 Occupancy Status During Aba Facility Closed/Vacated During	tement (Cr	eck on	ly one	4	/ 14	BRISTOL ENV	IRONMENTAL,)9				
2 / 5 / 14 Decupancy Status During Aba Facility Closed/Vacated During Abatement Performed Outs	tement (Cr	1 Period	ly one of Aba	4) atemen	/ <u>14</u>	Street Address 1123 BEAVER	IRONMENTAL, STREET) 9				
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)					arought !	to NJAC 8:60 and	d 5:16)				8 /4		
	15 /	14		144	Name of	Building Owner/One	mtor (2)			PR :	5 4		4
Agencies Notified EPA	Type Notifi	_			Street Ad	oton University-O	Mice of Design	and Cor	rstruct	lion			
☑ DOLWD	Amende				200 EI								_
☑ DHSS	Amenda	NO No es ded	484	144.4	City, State	e, Zip Code							
□ DCA	L Emerge	new /ine	diedia.	<u>1/14</u>	Prince	ton, NJ 08544							_
(NJAC 5:23-8)	Justificat	ion)	aucii i	9	Name of (Cook, NO DESAM		and the second s					
	☐ Cancella	rtion		***	Robert	Ortoga		Tel	aphone	Mumb	-	_	_
Name of Facility Where A	batement in	Takina	Place	/21	FACILI	TY INFORMATIO	N	9	1				_
Princeton University	V-Fireston	l lbe	· MICE	(3)			Type of Fac	微y (4)			100		
Street Address		FIGIC	iry				School ()	K-12)					
Washington Rd							Subchan	har & rows	er than	K-121			
City (5)							Uther (i.e	Drivete	and cor	nmerc	del bu	ildino	
Princeton							homes, e Square Feet	, j					•
County (6)							Square rest	# 0	f Floors		Bit	lg. Ag	e
MERCER					County Co	ode (7)(STATE USE ON	N C	-					
			Electric Line			, 1,5 OOE ON	Current Use	(Prior if b	eing der	molish	ed)		_
Name of Monitoring Firm H	ired by Build	ing Ow	ner (8	3) A	SCM No.	Marro of At-	Library						
ATC Associates Inc.						Manne of Abat	ternent Contractor	(9)				_	_
Street Address						BRISTOL	ENVIRONMENT	ral, inc	: .				
Three Terri Center						Street Address	-		_			_	_
City, State, Zip Code						1123 BEAN	VER STREET						
Burlington, NJ 08016						City, State, Zip			-		_		_
Project Manager for Monitori	ing Firm		-	Telent		BRISTOL,	PA 19007						
Michael Keehn					ione No.	Telephone No.		Line	nse No.				
Start Date (10)	1	hodulo	10-	909	-386-8800	215-788-60	40	1)509				
OFF SITE WITH \$15	114		Con	npletio	n Date (11)	Name of OSHA	Monitor	- 00	ASAA			_	
		4	. / _	4_	/ 14		NVIRONMENT	A1 1010					
Occupancy Status During Ab	atement (Ch	eck on	y one)		Street Address	TO THE PARTY	AL, INC.					
Facility Closed/Vacated D	uring Entire (Period	of Abi	ateme	nt	1123 BEAV	EB 0222						_
Abatement Performed Out Time of Abatement: 7:00A	ML2.2000	nal Fac	lity H	ours -	Describe	City, State, Zip (
			PIM		AM						_		_
Scope of Work (Check all that	apply)					BRISTOL, P	'A 19007						
] ≥3 sf or ≥3 lf		-				D Euli Co.	-4-1		_		_		_
2 ≥160 of or ≥260 M			emoi	ation			ntainment with Ne	gative Pro	enusse				
			roi i i i i i	IUON		Glovenho	Dog Dog and						
		T	s Loc	ation		Mon-Ex	empted (°) and No	n-Frieble	Proced	une			
Location of		1	Nom	ally						-	hata		_
Asbestos-Containing Mater TO BE ABATED	ial (ACM)	US	ed Sc	olely by	/ Asb	Description of the Containing Ma	of			0.000	_	nent "	-
IN Facility		Cut	todia	iumos/ I Staff	, (i.	e., inemai systems	insulation	Am	ount	Remova	Repair	E E	1
(13)			(12			Sunacina, VAT	or	(Sp	ectify or LF)	1 28	E	1 g	1
	e de les constantes de la constante de la cons	Yes	No	NV	A	other miscellane	one)	01 0	· L-)	1 2		Encapsulate	
roughout Levels C, B an	nd A	×									1	5	
fice A-7J		-	-	-	rioor t	ile and mastic		1,46	19.2		+=	-	1
HGE A-14		X			Window	w Caulk				Ø	_		
				-				96	LF				Ī
roughout Levels C, B an	d A	_			Bucat						1	-	1 -
roughout Levels C, B an	d A			10	Duct w	ont		1775	SF	-	-	-	-
		_				ont		1775	SF	×	0		
ne of Registered Waste Haule	or			JDEP	Waste		I Nome de		-	-		-	
roughout Levels C, B an me of Registered Waste Hauk ERVICE TRANSPORT GI	or		□ N H	UDEP lauler (Waste D No.	Cubic Yards of Waste	Name of Registe	ared Land	fill		-		
ne of Registered Waste Haule	or		□ N H	JDEP	Waste D No.	Cubic Yards of Waste	Name of Register	ared Land	fill		-	-	
ne of Registered Weste Hauk ERVICE TRANSPORT GI	or		□ N H	UDEP lauler (Waste D No.	Cubic Yards of	Name of Register G.R.O.W.S. City, State	ared Land	fill		-	-	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Ck# 2544

NEW CASTLE, DE						Sieposai Date	City, State MORRISVILL	E, PA 19067				
lame of Registered Waste Ha SERVICE TRANSPORT ity, State	GROUP INC		H	JDEP V nuier ID 20990	No.	Cubic Yards of Waste Disposal Date	G.R.O.W.S. N			_	_	
an alphan d 186ana 14	ulos	×				Y-10-10-10-10-10-10-10-10-10-10-10-10-10-						-
Throughout Levels C, B	ING A	×			Duct w	ork		1775 SF	×			
	and A	-		-		w Caulk		96 LF	×		0	
Office A-7J								1,465 SF	×			
Throughout Levels C, B	and A	Tes			Elec: 4	ile and mastic			1		-	
Location of Asbestos-Containing Mate TO BE ABATEL IN Facility (13)	erial (ACM) 2	Usa	intens	ally by anout Staff?	Ásb (i.	Description of estos Containing Mat e., thermal systems in surfacing, VAT, other miscellance	erial (ACM) reulation, or	Amount (Specify SF or LF)	2 Removal	Repair	_	Enclosure
PG ≥160 \$1 01 ≥200 11					,	☐ Glovebag ☑ Non-Exer	Procedure npted (") and Non-	Friable Procedi	uro			
Scope of Work (Check all the ≥3 of or ≥3 if ≥160 of or ≥280 if	at apply)	図R	noval			Full Cont	einment with Nega	tive Pressure				-
☐ Facility Closed/Vecated if ☐ Abatement Performed Or Time of Abatement: 7:90	During Entire P Utside of Norma AM-3:30PM/	eriod o	Abati tv Hou	m - De	scribe	Street Address 1123 BEAVEI City, State, Zip Co BRISTOL, PA	ide					
Occupancy Status During A							VIRONMENTAL	, INC.				
Start Date (10) 1 / 30 /					Pate (11)	Name of OSHA R		1 3300		_		
Michael Keehn					6-8800	215-788-6040)	00509				
Project Manager for Monito			Te	lephon	o No.	Telephone No.	4 19007	License No.				
Burlington, NJ 08016			12			City, State, Zip C BRISTOL, PA					0.00	
Three Terri Center City, State, Zip Code						1123 BEAVE	COLUMN TO SERVICE STATE OF THE					
Street Address						Street Address		, 1140.				
ATC Associates Inc.							IVIRONMENTAL					
Name of Monitoring Firm H	lired by Buildin	g Owne	r (8)	TASC	M No.	Name of Abstern	Library					
County (6) MERCER				Co	ounty Code	(TYSTATE USE ONLY)		or if being demo	lished			
City (5) Princeton							homes, etc.) Square Feet	# of Floors		Bldg.	-	_
Street Address Washington Rd	A mesions F	JOREN					School (K-12) Subshapter 8 Other (i.e., pri	(Other then M.	12) Vercial	bulldi	hour.	,
Name of Facility Where Al Princeton University	betement is Tal	king Pla	co (3)	N.		1000	Type of Facility (4)			_	
Alama of St., 1914, 1945, and 19				F	ACILITY	INFORMATION		216.	Indian	<u> -</u>	_	
(NJAC 5:23-8)	justification Cancellatio	1	9	Na	me of Cor lobert O	vtact		Telephone Nu	mbor	-	_	
□ DCA	Amendment Emergency	(inches	ina			n, NJ 08544						
☑ DOLWD 7562 ☑ DHSS 1579	☐ Amended				y, State, Z							
☐ EPA	Type Notificati	on		8.8	eet Addre						_	
Agencies Notified	15 / _			F	rinceto	n University-Office	of Design and (Arri Construction	1.0			
Date of Notification (1)				Ne	me of Bui	Iding Owner/Operator	(2)	F. D.L.			_	

No Chark			NO	TIFI(CATI Pursi	State of ON OF A lant to N	SBI	v Jersey ESTOS ABA 88:60 and 5:1	TEMENT (7 [<u> </u>
Date of Notification (1)		8 2 2		<u> </u>				Owner/Operator			-			
	_ ′	1	4		F	Princeton	Uni	versity-Office	of Design and	Construction				- 63
		fication	1		Str	eet Address	s			APR	3 () 20	14	
⊠ EPA ⊠ In					1 2	00 Elm D	r.							
	mend		Marie Article		Cit	y, State, Zip		de						1
			# <u>7-4/2</u>											**
DCA E	merg	ency (i	includir	ng		Princeton,		U8544		ericana de la composición della composición dell				•
		ation) lation				me of Conta				Telephone Num	her			
								ORMATION				•		
Name of Facility Where Abatem				e (3)					Type of Facility	(4)				
Princeton University-Fire	estor	ne Lib	orary						School (K-1	2)				
Street Address					0.0				Subchapter	8 (Other than K-12	2)			
Washington Rd									Other (i.e., p	rivate and comme	rcial b	ouildir	ıgs,	
City (5)									homes, etc.					
Princeton									Square Feet	# of Floors	ক ³ E	Bldg. /	Age	
County (6)														
					Co	ounty Code	(7)(S	TATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			
MERCER		and the same			-1				Library					
Name of Monitoring Firm Hired	by Bu	ilding	Owner	(8)	ASC	M No.	N	lame of Abateme	ent Contractor (9)					
ATC Associates Inc.					00	098			VIRONMENTA					
Street Address				22			-	treet Address	VIICONIIIENTA	L, 1140.				
Three Terri Center							١		0.070557					
City, State, Zip Code	-						4-	1123 BEAVE						
Burlington, NJ 08016							10	ity, State, Zip Co						
				_				BRISTOL, PA	19007					
Project Manager for Monitoring I	-irm				lephor		To	elephone No.		License No.				
Michael Keehn				(309-3	36-8800		215-788-6040		00509				
Start Date (10)2 /5 /14		Sched 01	duled (t OL	letion [Date (11)	N	ame of OSHA M	lonitor VIRONMENTA	L. INC				
Occupancy Status During Abate	ment	(Chec	k only	one)			-			., 1140.	- /-			
☐ Facility Closed/Vacated Durin	o En	tire Do	riod of	Abot			1	treet Address						
☐ Abatement Performed Outsid	e of N	dorma	Facilit	ADAL V Ho	ement	a a a riba	-	1123 BEAVER						
Time of Abatement: 6:30AM-	3:00	PM/3:	00PM	y ⊓oi	IIS - DI	escribe	- 1	ity, State, Zip Co						
W					<u></u> /			BRISTOL, PA	19007					
Scope of Work (Check all that ap	ply)					terrent de la companya de la company		⊠ Full Cont	ainment with Neg	ative Proceure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re	enova emolit					osure	auve Flessule				
								☐ Non-Exer	npted (*) and No	n-Friable Procedur	e			
			Is	Loca	ation						1	atem	ont T	
Location of				Norm				Description of			-	_		T .
Asbestos-Containing Material	(ACI	VI)	Ma	inten	lely by ance/	7300	estos	Containing Mat	erial (ACM)	Amount	Rer	Rep	E E	l E
TO BE ABATED IN Facility					Staff?	(i.e		ermal systems in		(Specify	Remova	Repair	Encapsulate	Enclosure
(13)				(12				surfacing, VAT, ther miscellaned		SF or LF)	<u>a</u>		sula	ure
			Yes	No	N/A		Ŭ	diei miscellaneo	(45)			1	ë	
Throughout Levels C, B and	IA		\boxtimes		10	Floortil	le ar	nd mastic		71,198 SF			П	
Throughout Levels C, B and	IA		\boxtimes			Pipe In	sula	ntion		4,660 SF				
Throughout Levels B and A			\boxtimes			Joint C	-			24,690 SF				
Throughout Level B			\boxtimes			Pipe Fi	tting	gs		20 LF				
Name of Registered Waste Haule	r			. 1	JDEP	Waste		bic Yards of	Name of Regist		1 23			
SERVICE TRANSPORT GR	OUF	INC		H	lauler 2099	ID No. 0		aste		NORTH LANDE	FILL			
City, State							Dis	posal Date	City, State			-	-	-
NEW CASTLE, DE										LE, PA 19067				
Completed By (Print or Type)	-	Title						Signature						
Brian Scafiro		3,502750	timat	or				Brian	Scolins	Dat 4	/25	-/1	4	

ASB-41 MAY 11 B 5 14 0 0 3 - A

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

Name of Building Owner/Operator (2) Princeton University-Office of Design and Construction Street Address 200 Elm Dr. City, State, Zip Code Princeton, NJ 08544 Name of Contact Robert Ortega FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Library Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 609-386-8800 215-788-6040
Street Address 200 Elm Dr. City, State, Zip Code Princeton, NJ 08544 Name of Contact Robert Ortega FACILITY INFORMATION ing Place (3) ibrary Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Library Owner (8) ASCM No. 00098 Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 509-386-8800 Telephone No. Felephone No. Felepho
200 EIm Dr. City, State, Zip Code Princeton, NJ 08544 Name of Contact Robert Ortega FACILITY INFORMATION ing Place (3) ibrary Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Library Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. Felephone No. Fele
City, State, Zip Code Princeton, NJ 08544 Name of Contact Robert Ortega FACILITY INFORMATION ing Place (3) ibrary County Code (7)(STATE USE ONLY) Courrent Use (Prior if being demolished) Library County Code (7)(STATE USE ONLY) Courrent Use (Prior if being demolished) Library County Code (7)(STATE USE ONLY) Courrent Use (Prior if being demolished) Library City, State, Zip Code BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. License No.
Princeton, NJ 08544 Name of Contact Robert Ortega Telephone Number
Name of Contact Robert Ortega FACILITY INFORMATION ing Place (3) ibrary Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Square Feet County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Library Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 609-386-8800 245 789 Code Code Replace (3) Telephone No. County Code (7)(STATE USE ONLY) Subchapter 8 (Other than K-12) Cother (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age County Code (7)(STATE USE ONLY) Library Current Use (Prior if being demolished) Library
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Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. Telephone No. 609-386-8800 245 789 6000
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BRISTOI ENVIDONMENTAL
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k only one) Street Address
Street Address priod of Abatement 1123 BEAVER STREET
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sk only one) Street Address Priod of Abatement Street Address 1123 BEAVER STREET
k only one) Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007
Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Renovation
Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Is Location Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007
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Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement To Page 1 Procedure Abatement To Page 1 Procedure SF or LF) Yes No N/A Street Address 123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Mi
Street Address Priod of Abatement I Facility Hours - Describe City, State, Zip Code BRISTOL, PA 19007 Street Address
Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Floortile and mastic Pipe Insulation A,660 SF Inc.
Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Floortile and mastic Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure (*) and Non-Friable Procedure Abatement Ty Republic Specify SF or LF) Floortile and mastic 71,198 SF Pipe Insulation 4,660 SF Joint Compound Accomposite Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Abatement Ty Republic Specify SF or LF) Abatement Ty Republic Specify SF or LF) Pipe Insulation 4,660 SF
Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Floortile and mastic Floortile and Flo
Street Address ariod of Abatement I Facility Hours - Describe COPM-11:30AM Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Floortile and mastic Floortile and mastic Floortile and mastic Pipe Insulation Joint Compound Pipe Fittings NJDEP Waste Cubic Yards of Name of Registered Landfill
Street Address ariod of Abatement Facility Hours - Describe 1123 BEAVER STREET
Street Address Friod of Abatement Facility Hours - Describe Pacility Hours - Describe
Street Address ariod of Abatement Facility Hours - Describe 1123 BEAVER STREET
duled Completion Date (11) Name of OSHA Monitor
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4 / Z5 / 14 BRISTOL ENVIRONMENTAL
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k only one) Street Address riod of Abatement 1 Facility Hours - Describe 00PM-11:30AM Street Address 1123 BEAVER STREET City, State, Zip Code
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Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Glovebag Procedure Abatement T Abatement T Repair (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Floortile and mastic 71,198 SF
Street Address Priod of Abatement I Facility Hours - Describe City, State, Zip Code BRISTOL, PA 19007 Second Full Containment with Negative Pressure Mini-Enclosure Second Full Containment with Negative Pressure Mini-Enclosure Second Full Containment with Negative Pressure Mini-Enclosure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A N/A
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	5 /	14			Princete	uilding Owner/Ope	rator (2)	APH 3	ij,	(1)114		_
Agencies Notified T	pe Notifica	ation				oniversity-0	ffice of Design a	ind Construct	ion			
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☑ DHSS	Amendme		A1214	. 1	City, State, 2							
☑ DCA ☐	Emergeno	ni (in al	4/3/1	4		n, NJ 08544						_
(NJAC 5:23-8)	justificatio	n)	uaing	1	James (C	II, NJ 08544						
	Cancellation	on.		Ι.	Name of Co			Telephone	Alumah	#		_
					Robert O	rtega		- Globilone	Numb	er		
Name of Facility Where Abate	ement is Te	kina F	No A		FACILITY	Y INFORMATIO	N			_		_
Princeton University-F	irestone l	Libra	riace (3)			Type of Facili	ity (4)		_		_
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ATC Associates Inc.	by Bulldin	g Own	er (8)	AS	CM No.	Name of Ahai	ement Contractor (21			25 52574	
				0	8600	BRISTO	ENVIDONMENT	9)				
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City, State, Zip Code							VER STREET					
Burlington, NJ 08016						City, State, Zip	Code					
				n 000 (n 500 H		BRISTOL,						
Project Manager for Monitoring	Firm	0.000	T	elepho	ne No.	Telephone No.						
Michael Keehn					86-8800			License No.				-
Start Date (10)	Sche	dulad	Com	alati-	Date (11)	215-788-60		00509				
2 / 5 / 14	Cone	A	/	MELION I	Date (11)	Name of OSHA	Monitor					
	- 1 -		′ —	10	14		NVIRONMENTA	LINC				
ccupancy Status During Abate	ment (Che	ck only	one)			Street Address	- TOTAL MAN	L, INC.				
Facility Closed/Vacated Durin	ng Entire Po	eriod o	of Abai	ement						_		_
J Abatement Performed Outsid	a of Alasma	1			escribe		ER STREET					
Time of Abatement: 6:30AM-	3:00PM/3	:00PA	n-11:	30AM	- SOLIDE	City, State, Zip	Code					_
cope of Work (Check all that ap						BRISTOL, P						
	-97											_
≥3 sf or ≥3 lf		⊠ R	enova	tion		☑ Full Co	ntainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			emolit			E-2 1441111-F-1	CIOSURE					
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		ls	s Loca	tion	1		empted (*) and Nor	-Friable Proced	ure			
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TO BE ABATED IN Facility		MIS	intena	ance/ Staff?	(i.e.	stos Containing M , thermal systems	inculation	Amount	9	10	E	
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()		V			-	other miscellane	eous)	SF or LF)	100	1	130	
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oughout Level B					Pipe Fitti			24,690 SF	X			1
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RVICE TRANSPORT GRO	UP INC		Ha	uler ID	7.2.2	Cubic Yards of	Name of Register	ed Landfill		_	1-	_
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State				2200		Disposal Date		- LANDI	ILL			
W CASTLE, DE					"	nepusal Date	City, State					-
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								nd 5:16	,	-	1000			
	01/	15	, ,	4		Name of I	Building Owner	00040 - 10		APR				
Ac	encies Notified					Prince	ton University-C	Ser (2)					-	_
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		- Outloo	INSCION			Robert	Ortena			Telephor	ne Nun	her		_
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D.	ne of Facility Where Ab	atement is	Takin	g Plac	æ (3)	PACILII	Y INFORMATIO	N		-				
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AIL	- Associates inc.						Name of Abat	ement C	Ontractor (O)					
Street	Address					00098	BRISTOL	ENVIR	ONMENTAL,	***				_
Thr	se Terri Center						Street Address		MARKIAL,	INC.				
	tate, Zip Code						1123 BEA							_
	ington, NJ 08016						City Ctota Si	VER ST	REET					
							City, State, Zip	Code			-			_
Project	Manager for Monitorin	Firm			Teleph	one No.	BRISTOL,	PA 190	07					
	ael Keehn			- 1		386-8800	Telephone No.			License No				
Start Da	ate (10)	Sc	haduk	od Co	008-	366-8800	215-788-60	40	- 1		0.			
2	_ / _5 / _14	.	A	o Col	Tipletion	Date (11)	Name of OSHA	Monitor		00509				
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	ity Closed/Vacated Dur													_
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e team	DOUBLE SHIE	2.00	3:00F	M-11	:30AM	1.11	City, State, Zip C	ode						
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 6:16)

Date of Notification	(1)				(Pursuant to	O NJAC 8:60 a	ABATEM						
01	. B. Caree	_ / _	44		Name of	Building Owner/Op		AP	R 3	0 5	111		
Agencies Notified					Prince	ton United Owner/O	perator (2)			1	114		_
EPA	Type	Notifical	tion			minelsky-	Office of De	sion and C	Constm.				
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☑ DHSS	Ø A	mended			200 EIn	ים מ				_			_
	/ A	mondme	1 #2 9A	2014	City State	it or.					10		1
Ø DCA	DE	mergency	11 00-71	15/14	City, State,	, Zip Code							
(NJAC 5:23-8)	Ju	stification	(includi	ing	Princet	on, NJ 08544						-	_
	I D C	ncellatio	'		Name of Co	Ontact .							
					Robert (Orthogo		1	elephor	no Ma	- NE		_
Name of Facility When	n Ab-a				FACULT	W man	A SAMP GARAGES CO	1.		146	or or original	II.	
Princeton Univer		ent is Tak	ing Plac	æ (3)	ואטונוו	Y INFORMATIO	NC			_			
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Washington Rd							— H Son	ool (K-12)					
City (5)							100	chapter 8 (O	ther the	n K-1	2)		
Princeton				_				or (i.e., prival es, etc.)	e and a		Drcin	l buile	linno
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County (6)								rett (of Floo	rs		Bldg.	Ann
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Name of Monitoring Firm ATC Associates In	raired by	Building (Owner (8) 14	SCM No.		Librar	v	O(=moli	Bhed)	
a weencristing IN	3,.			' '		Name of Abel	ernent Contro	eles (D)					
Street Address					86000	BRISTOL	EAR ADOLL	210f (8)			-		
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City, State, Zip Code						Angel Wagles	8		-				
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Burlington, NJ 0801	6					City, State, Zip	Corie						
Project Manager for Monit	orina Firm					BRISTOL	DA 40000					_	
Michael Keehn			- 1	Teleph	one No.	Tobal	PA 19007						
Start Date (10)			- 1	RAP.	200 0000	Telephone No.		The	ense No				
		Schedu	led Con	mindia	Date (11)	215-788-60	40			١.	55		
2 / 5 /	14				Date (11)	Name of OSHA	Monitor	0	0509				
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Facility Closed Accepted		(Check c	only one			BRISTOL E	MAIKONWEN	ITAL, INC.	3				
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:50 and 5:16)

	ite of Notification (1						W KLIMI DAGA	ABATE		100			
1	01 /	•				Magno a	to NJAC 8:60 am	d 6:16)		At	PR 3	0 5	014
And	oncies Notified		_ / _			Below	Building Owner/Ope	retor (2)					
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L						Name of	Contact USS44						
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Name	of English When		-			FACU	CAMPBO			, oregan	none No	Mupor	
Pal	of Facility Where	Abateme	nt is Tal	ing Pl	DOD (3)	PACILI	TY INFORMATION	M					-
	nceton Universi	ly-Fires	bone L	bmn	, (0)				16.7				
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Prin	coton							ho	mes, etc.)	Amen SUE	COMM	erchi b	ulldings.
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ATC	Monitoring Firm H Associates Inc.	lifed by B	uilding (Owner	(8)	ASCM No.		Libr	, acc (L 110	a pelug	demoli	shed)	
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	Terri Center						Street Address	A A INCOME	MENTAL,	INC.			W.
	le, Zip Code												
Burlin	gton, NJ 08016						1123 BEAVE	R STREE	ET .				
Protect M	eneger for Monitor	D					City, State, Zip C	odo					
Michae	el Koohn	ng Fim			Telep	hone No.	BRISTOL, PA	4 19007					
Start Date					600	1980 0000	Telephone No.			Ta:			
			Schodu	led Co	molett	on Date (11)	215-788-8040)	- 1	License A			
	1 5 1 1					/ _14	Name of OSHA M	loalles		00509			60
Occupancy	Status During Aba	tement /	hoel o			. / _14	BRISTOL EM					_	
							Street Address	MANAGE	ntal, ia	IC.			
☐ Abelems	ont Performed Out	ide of No		of Al	efeme	nt						-	
		A MI IAR	anni Li	citty F	lours -	Describe	1123 BEAVER	STREET					
Time of	Abstement: 6:30A	W-3:00P	MIV	_PM-	1	AM	Life Charles to						
Time of	Abstement: 6:30A	desired.	W/				City, State, Zip Cod	lo		-	-		
Time of	Abatement: 6:30A	desired.					BRISTOL, PA	19007					
Time of // Scope of Wo	Abetement: 6:30A ork (Check all that a	desired.					BRISTOL, PA	19007					
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NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:80 and 6:16)

1	Date of Notification (1)				(Laughaut 6	D NJAC 8:80 and 6	ATEMENT	5000000	a V 2014
* 1	01	R			Marina	Bull nere	5:16)		
-	Agencies Notified		14		Below	Building Corner/Operate	or (2)		
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	Page 1	Amendm	mi og.	MAN	City, Sinh	Zo Code			
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· · · M	Office of Ecolity VAC				PARIS I	Chando			SAMPLE CONTROL
1	ome of Facility Where Abate Princeton Unhample, Co.	ment is To	iking P	90a (9)	PACILIT	Y INFORMATION			
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10.	CONT MEDICAL SERVICE S						Typo of Facility (4)	
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Cit	y (5)						Other (Lo., per	(Other th	han (K-12) Commercial buildings
0	Princeton						homes, etc.)	- Comp	commercial buildings.
Cou	unity (8)							0 of Flo	
	iercer				County Co			1 - 10	Didg. Ago
					- COO	(T)STATE USE ONLY)	Current Une flavo	Mari	
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1 ~	. A VENEGRAMM INC.			(0)	ASCM No.	Namo of Abatama	of Cardenda (6)		
	of Address				00000	DRISTOL ENV	in comment (a)		
	ree Terri Center					Street Address	HOUSE TAL,	inc.	
City.	State, Zip Code		-						
	orcoo, NJ coops					1120 BEAVER	STREET		
	A Manager for Monitoring Fig					City, State, Zip Cod	0		
	haal Kaahn	m		Tolar	phone No.	BRISTOL, PA 1	9007		
				0.00	R-900 0000	Yelephone No.		-	
	Date (10)	School	ulad C	- Colonia	on Date (11)	216-703-0040		Icense A	lo.
#4 (OFF	5186 UNTR 2/5/19				on Date (11)	Name of CSHA Man	Nav.	00800	
Occupi	ancy Status During Abateme	-4404			/ 14	DRISTOL ENVIR	Manney		
						Street Address	WILL IN	ic.	
☐ Abel	terrent Perfermed Outside of Abatement: 2:00AM-3:5	india por	ed of A	betome	mt				
Time	of Abotoment: Z:00AM-2:3		- acity	Hours -	Describe	1120 DEAVER 8	TREET		
1		m	PM		AM	City, State, Zip Code			
Scope of	Wark (Check all that apply)	-	_			BRISTOL, PA 100	307		
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· .		7				Glovebag Pros	Bothery		.
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APR 3 0 2014

Date of Notification (1)	N	OTIFI (Pursuant to	ASSESTOS AS NJAC 8:60 and 6	ATIEMENT	Ca 4 5/2
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(NJAC 5:23-6)	arpancy (includ	laa	Bulmana.	ap Code		
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Washington Rd					Daniel m	
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Princeton					Li Other (Le., pri	hate and commercial hydrian
County (6)						6 of Floors
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Street Address		1	00000	Name of Abatemen	A Partie de Constitution de Co	
Three Terri Center				WINDS FOLL MAN	ROMMENTAL	IMA
City, State, Zip Code				and Marie		mg.
Burlington, NJ 00016		_		1123 BEAVER	STREET	
Project Manager for Monitoring Firm				City, Shah, 25 Com		
Michael Keehn	T	ologhe	one No.	BRISTOL, PA 1	0007	
	- 1	A80 9	Ma 000-	Telephone No.	11	I management
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C Abstract Belowed a Line	Ported of Abo		1	PERSONAL PROPERTY.	THE OWNER WHEN PERSON NAMED IN	No.
Abstement Performed Outside of No Time of Abstement: Z:00AM-3:30P	mal Facility Ho			1123 BEAVER ST	MET	
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Scope of Work (Check all that apply)				DRISTOL, PA 100	87 .	
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Date of Notification (1)								Owner/Operator (2			¥ .	-	T	
	24	/	14	_		Mr. I	Daniel Bi	ills	/ Job #	1404-1871	Chk.#			
Agencies Notified	Type No	tificati	ion			Street	Address		7					
⊠ EPA						1306	Liberty	Place		۵۷	D 0 0			
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□ DHSS		ndmen		-				NJ 08081						
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(NJAC 5:23-8)	W-255	ication	7							relephone is:				-
	☐ Cano	ellatio	on			IVIT.	Dan Bills	•				_		
						FAC	ILITY IN	FORMATION						
Name of Facility Where A	batemen	t is Ta	king	Place	(3)		A1601021	#	Type of Facility	(4)				
Residential Propert	У								School (K-12		40)			
Street Address									☐ Subchapter 8 ☐ Other (i.e., pr			ildina	2	
608 Lincoln Avenue	•								homes, etc.)		nercial bu	ildii ig.	٥,	
City (5)			- 41						Square Feet	# of Floors	Bio	ig. Ag	e	
Collingswood									1650	·4 4	1	1920		
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Name of Monitoring Firm	erribed Strongs	Buildii	ng O	wner (8)	ASCM I	No.	Name of Abateme						
Horizon Environme	ntal								d Mold Service	s, Corp.				
Street Address								Street Address						
PO Box 336								3859 Sylon B	oulevard					
City, State, Zip Code								City, State, Zip Co	ode					
Thorofare, NJ 08086	6							Hainesport,	NJ 08036					
Project Manager for Moni	toring Fir	m			Tele	phone I	No.	Telephone No.		License No.				
Dave or Steve Flani						56-848		609-702-0400)	00862				
Start Date (10)	9411	Sc	chade	ulad C		tion Da		Name of OSHA M						_
05 /07 /	14					_ / _		EMSL Analyt						
Occupancy Status During	Abatem	ent (C	heck	only	one)		-	Street Address						-
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Abatement Performed	-						cribe	City, State, Zip Co	ode					-
Time of Abatement: _	AM	ŀ	_PN	N	PM-		ΑM	Cinnaminsor						
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		ļ				02265)	5 Disposal Date	City, State					-
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Kimberly A. Trumbe	etti		0	ffice	Coor	dinato	•	NXX	V		4-21	4-1-	1	
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(Mark#	001010				to NJAC 8:60 an			- L	-		I	, ,
Date of Notification (1)			100	_	f Building Owner/0		52,000					
	4/25/14			150	roof Ke	eans	burg		3 0			
Agencies Notified	Type Notification							PULL	. J U	ZU	14	
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DOH DCA	justification) Cancellation	condy			d Stre			rolophono ra	iiiDCi			4
					LITY INFORMAT					(12)		-
Name of Facility When	e Abatement is Taking	Place (3	3)		16		Type of Facility	(4)				
FEMA PP	DR - Sandy	Kelai	ted.	Dem	olition	7	School (K-					
Street Address							Subchapte Other (i.e.)	r 8 (Other than K-1, private & commerc	al buil∉	dinas	home	es.
20 Dead	reeze Way						etc.)					
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	rm Hired by Building O	wner (8)		ASCN	/ No.	Name	of Abatement Co			-	- 235	-
Consulting	Serviceso	f Ame	en'ra			Yar	111177 E	nvironma	en to	u).	Sen	lices
Street Address J	Serviceso	, ,,, ,,	- reas			Street	Address		10 Days	(6)		
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City, State, Zip Code							State, Zip Code		12 10000	a.		
Aberdeen	, NJ 077	47				H://	sborough	,NJ 088	844	/		
Project Manager for M	Statement Statement of the Control o			elepho		Teleph	none No.	' License N	lo.			
Michael C	hain		7	32-9	21-923			012	18			
Start Date (10)		Schedule	ed Com	pletion	Date (11)	/	of OSHA Monitor	94.0	_		_	
-/	ring Abatement (Check	Only Or	[1]/	7			Address	romental.	<u>sen</u>	1168	5	-
							13:17:73:17:73:75	S. H.				
	acated During Entire Permed Outside of Norma			ent		City, S	L R+ 206 State, Zip Code	2001-1			-	
Other – Describe	:			-		1-1:1	Shorouch	, NJ 088	344			1
Scope of Work (Check	(All That Apply)			100000		1 1	333-3	/				
≥3 sf or ≥3 lf		□ F	Renovat	ion			Full Containm	ent with Negative F	Pressu	ге		
≥160 sf or ≥260 lf	f		Demolitio	on		F	Mini-Enclosur Glovebag Pro					
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Asbestos-Containi TO BE A			d Solel				Material (ACM) s insulation,	Amount (Specify	70		<u>m</u>	ш
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(1)	3)		(12)		other r	niscellar	neous)		oval	air.	Encapsulate	Enclosure
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State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

D&S Proj. #: 2014-164	_	(1 01000			5064650 450450 - 16 7			4DD 0	0 50			
Chill Cost)	Building Owner	(Operator (2)					APR 3	-3t -	11/1		-
Date of Notification (1) 0 4 / 2 3 / 1 4						4					ø	_
Agencies Notified Type Notification	Street Add	amsdell c/o ja dress	ine certo				1					
☐ EPA ☐ Initial		D. VAN DIE	N				#70.000#3#### #8					_
DEP Amended Amendment #:		e, Zip Code										
DOL Emergency	- RIDG	EWOOD, N.	07450							- Marie	and the same	
DOH (including justification)	Name of 0						Telephone	e Number				
DCA Cancellation	mary	ramsdell c/o	jane certo									_
Carlocilation		FACIL	LITY INFORMA	ATION								
Name of facility where abatement is t	taking place (3)					Тур	e of Facility (4)				
Name of facility where abatement is	aning place (e)							I (K - 12)	har the	n K-1	2)	
mary ramsdell c/o jane certo						11		apter 8 (Ot (Private/Co			-)	
Street Address							Bldgs./	Homes, et	c.		. A. a.c	
111 SO. VAN DIEN						So	uare Feet	# of Floors	S	D100	g. Age	Ĕ.
City (5)	County (6)				Code (7) use only)	-	urrent Use (P	rior if being	demo	lished	1)	
RIDGEWOOD	BERGEN											
Name of Monitoring Firm Hired by B			ASCM No.	IN	ame of Abateme	nt Cont	ractor (9)					
**************************************					D & S RESTO	RATIO	ON, INC.					_
Street Address				S	treet Address							
NOTE OF THE PARTY				_ -	20 California ity, State, Zip Coo							
City, State, Zip Code					Paterson, NJ							
District Manifesting Firm		Phone Numb	er	— T	elephone Number			License		er		
Project Manager for Monitoring Firm		T Hono Hame			973-345-802			0	1169			
Start Date (10)	Sched, Com	pletion Date (1	1)	N	Name of OSHA M		Tuo					
50 .03	200000000000000000000000000000000000000		ė.		D & S Restor	ration,	inc.					
05/05/14 Occupancy Status During Abatement	05/28/14	e)	- other distriction is	- `	20 California	Avenu	ie					
☐ Facility closed/vacated during	entire period of a	batement.			City, State, Zip Co							
Abatement performed outside Describe:	of normal facility	hours-		_11		07500	·2					
Other-Describe: NORMAL He	OURS			_	Paterson, NJ		The second result of the second second		nrono	uro		
Scope of Work (check all that apply		direction of					Containment i-enclosure	w/negative	e press	uic		
\boxtimes >3 sf or >3 lf	Renovation					Glo	vebag proced	ure				
≥160 sf or ≥260 lf	Demolition					Nor	n-Exempted (*) and Non	-friable	R	E	1
Location of	Is location norm	nally used sole e/custodial		tion of ac	bestos-containing	a	Amount		e m	e p	n c	E n
asbestos-containing material (acm) to be	staff(12)		- materia		Desios corramin		(Specify LF)	SF or	0 V	a	а	C
abated in facility (13)	Yes N	N/A	£# .				,		е	1	р	
BASEMENT		X	PIPE INS				45 L FT				片	붜
BASEMENT		X	BARE H	EATING	PIPES		100 L FT		井	N	片	ዙ
							-		╁	片	H	卅
			-						뉴	lo	宣	同
Company to the state of the sta	NJDEP H	auler ID# T	Cubic Yards o	f Waste	Name of Regist	ered La	ndfill					
Registered Waste Hauler D & S RESTORATION, INC.	13506		2 YDS		TULLYTOV	VN, RI	ESOURCE I	RECOVE	RY			
City, State		Disposal			City, State TULLYTO	WN D	Δ					
PATERSON, NJ 07503	T	05/06	/14 Signature		TOLLYTO	VVIN, P.	Α	Date	-			
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	Γ						04/2	3/2014	1		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Peter Moriello 25 14 04 Type Notification Agencies Notified Street Address ☐ EPA 1117 Summit Terrace □ DOLWD ☐ Amended City, State, Zip Code Amendment #_ **⊠** DOH Linden, NJ 07036 ☐ Emergency (including) ☐ DCA Name of Contact (NJAC 5:23-8) justification) ☐ Cancellation Peter Moriello FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Residential House Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 154/156 Mountain Avenue homes, etc.) # of Floors Square Feet Bldg. Age City (5) Springfield County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) County (6) Union Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ALL PRO MANAGEMENT LLC J & S Environmental Laboratories, LLC Street Address Street Address 27 Outwater Lane 2333 Route 22 West City, State, Zip Code City, State, Zip Code Union, NJ Garfield, NJ 07026 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 1188 908-206-0073 973-928-4888 Sherill Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) 06 / 06 / 14 ALL PRO MANAGEMENT LLC 05 / 05 / 14 Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-___PM/____PM-__ Garfield, NJ 07026 Scope of Work (Check all that apply) ☐ >3 sf or >3 lf ☐ Renovation Mini-Enclosure □ Demolition ≥ 160 sf or ≥ 260 lf Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Remova Encapsulate Enclosure Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (Specify TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? surfacing, VAT, or SF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A X \boxtimes Plaster Residue 300 SF \boxtimes П П Interior NJDEP Waste Cubic Yards of Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. Waste ALL PRO MANAGEMENT LLC IESI Landfill 0034860 As Needed City, State Disposal Date City, State TBD Bethlehem, PA Garfield, NJ Signature Completed By (Print or Type) Title Zvonko Veskov President

ASB-41 JAN 13

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

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2014-65	Noti (Pursu	fication of ant to NJ/	Asbestos A AC 8:60-7 ar	batement nd 12:120-7)	C	heck #6520	0		=	_	
Former Gas Station	Name of Building O	wner/Opera	tor (2)	20	\	†10a	COE	dd∀			
Date of Notification (1)	First Hartford F	Realty Co	rp.								37
O 1 4 / 2 5 / 1 1 4 Agencies Notified Type Notification	Street Address				1	1.			S045		
T] FDA	149 Colonial F	Road				⊒ El t a		1-			
DEP Initial	City, State, Zip Coo	de									
DOL Amendment	Manchester,	Connection	cut 06042		T	elephone Nur	nber				
	Name of Contact										
Cancellation	Steve Menze	er			يا					2-70-cm	
DCA DCA	11	FACILITY II	NFORMATION	No. 200	· · ·	F -10h (A)	9				
					Type of	Facility (4) School (K	- 12)				
Name of facility where abatement is taking	ig place (3)					Subchapte	r 8 (Other t	han K-	12)		
Former Gas Station					W	Other (Priv Bldgs./Hon	ate/Comme	ercial			
Street Address					Canati	e Feet # of	f Floors	Bl	dg. A	je	_
111 Speedwell Avenue				2 1- (7)							=
	County (6)			unty Code (7) ate use only)	Curre	nt Use (Prior	if being der	nolish	ed)		
City (5) Morristown, NJ 07960	Morris		(0		form	er gas stat	ion				=
44-20-20-20-20-20-20-20-20-20-20-20-20-20-		T AS	CM No.		tement Contract						
Name of Monitoring Firm Hired by Bldg	. Owner (o)			B&GRe	storation, Inc.				_		_
N/A		_		Street Addre							
Street Address		761-909-		105 Ryers	in Code						
					Park, NJ 0703	5					
City, State, Zip Code				Telephone N	lumber		License Nu	mber			
Project Manager for Monitoring Firm	Phon	e Number		973-696	-6869		0378				_
Ploject Manage				Name of OS	SHA Monitor						
Scheduled Start Date (10)	Sched. Completion	Date (11)		B & G F	Restoration, Inc	C.					30000
05/05/2014	05/30/2014		-option Pall Street		erson Road						<u> </u>
- Abstement	(Check only one)			City, State,	Zip Code						
		nent. 5-									¥0
Abatement performed dutates of	f normal facility ficulty			Lincoln	n Park, NJ 070	35	7 wrap 8	cut		=	
Describe:							Gloveba		cedur	- е	
Scope of Work (check all that apply)			[ment w/negative	pressure [✓ Non-fri	able pi	oced	ure	
Demonder	Renovation		[☐ Mini-enclos	ure		14011	R	R	E	E
☐ >3 sf or >3 lf	160 sf or ≥260 lf	used solely				Amount	9.3	e m	e p	n c	n
Location of	by maintenance/cus	todial	Description	of asbestos-co	ontaining	(Specify	SF or	0	a	а	C L
asbestos-containing material to be	staff(12)	T-	material (A	(CM)		LF)		V e	r	р	-
abated in facility (13)	Yes No	N/A		-lazing	(1 window)	63 lf			밐	ᆜ	片
			Exterior win	dow glazing ulk (1 windo	ow)	20 lf		M	님	片	#
Exterior windows Exterior window units		X	VVIndow Ca	ill panel cau	k	388 lf			片	片	卅
Exterior Metal Wall		X	Derimeter I	oof flashing		1,297 s	<u>f</u>	M	片	片	
Exterior roof area		X	T CHINGION	- Market State Control		150				1-	
	NJDEP Haule	ID# TO	Cubic Yards of \	Naste Name	of Registered La rtown Resourc	indfill e & Recove	ry Center				
Registered Waste Hauler	NJDEP Haule 19563	1 1011	20	Tully City, S	State						
B & G Restoration, Inc.	l=	Disposal	Date)14 - 6/01/20		ytown, PA				_		
City, State Lincoln Park, NJ 07035		5/5/20	Signature				04/2	5/20	14		
Completed by (Print or Type)	Title	urer	J.g.i.z.	Gorda	na Luna						
Gordana Luna	Secretary/Treas	ui oi	=								

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Check #6519 2014-65 B & G proj. #: Garage (rear of building) Name of Building Owner/Operator (2) Date of Notification (1) First Hartford Realty Corp. 10 4 1/12 5 1/11 4 Type Notification Street Address Agencies Notified 149 Colonial Road ☐ EPA Initial ☐ DEP City, State, Zip Code Manchester, Connecticut 06042 Amendment DOL V Telephone Number Name of Contact DOH Cancellation Steve Menzer ☐ DCA **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Garage (rear of building) Other (Private/Commercial Bldas./Homes, etc. Street Address Bldg. Age # of Floors Square Feet 115 Spring Street County Code (7) County (6) Current Use (Prior if being demolished) City (5) (State use only) Morristown, NJ 07960 Morris garage Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. N/A Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 Name of OSHA Monitor Sched, Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 05/30/2014 05/05/2014 105 Ryerson Road Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: wrap & cut Scope of Work (check all that apply) Glovebag procedure Full Containment w/negative pressure Renovation **Demolition** Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf $\square > 3 \text{ sf or } > 3 \text{ lf}$ E E Is location normally used solely е n Amount n m by maintenance/custodial P C Location of Description of asbestos-containing (Specify SF or C asbestos-containing 0 a a material (ACM) staff(12) LF) material to be N/A abated in facility (13) No Yes 300 If Exterior window glazing (7 windows Exterior windows 133 If Window caulk (7 windows) M Exterior window units 168 lf Door unit caulk (4 doors) Exterior Door Units 930 sf Perimeter roof flashing Exterior roof area Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Tullytown Resource & Recovery Center Registered Waste Hauler 15 19563 B & G Restoration, Inc. City, State Disposal Date City, State Tullytown, PA 5/5/2014 - 6/01/2014 Lincoln Park, NJ 07035 Signature Cordana Luna 04/25/2014 Completed by (Print or Type) Title Secretary/Treasurer Gordana Luna

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Check #6518 2014-65 B & G proj. #: Former Blockbuster Name of Building Owner/Operator (2) Date of Notification (1) First Hartford Realty Corp. 10 4 1/12 5 1/11 4 Street Address Type Notification Agencies Notified 149 Colonial Road EPA V Initial City, State, Zip Code DEP Manchester, Connecticut 06042 Amendment Telephone Number DOL Name of Contact DOH Cancellation Steve Menzer ☐ DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) Former Blockbuster store Other (Private/Commercial Bldgs./Homes, etc. Street Address Bldg. Age # of Floors Square Feet 117 Speedwell Avenue County Code (7) County (6) Current Use (Prior if being demolished) (State use only) City (5) former video store Morristown, NJ 07960 Morris Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. N/A Street Address 105 Ryerson Road Street Address City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number 0378 Project Manager for Monitoring Firm 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 05/30/2014 05/05/2014 105 Ryerson Road Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: wrap & cut Other-Describe: Glovebag procedure Scope of Work (check all that apply) Full Containment w/negative pressure Non-friable procedure Renovation Demolition Mini-enclosure ≥160 sf or ≥260 lf E E >3 sf or >3 lf e n Is location normally used solely n Amount m p C by maintenance/custodial Description of asbestos-containing Location of (Specify SF or 0 a a asbestos-containing material (ACM) staff(12) ٧ p material to be N/A No abated in facility (13) Yes 924 If Window glazing (33 windows) 654 If Window caulk (39 windows) Exterior windows 0 364 sf Exterior window units tart coating & silver paint 2.040 sf Exterior Brick Wall Roof perimeter roof flashing 470 sf Penetration roof flashing material Exterior roof areas Name of Registered Landfill Cubic Yards of Waste Exterior roof areas Tullytown Resource & Recovery Center NJDEP Hauler ID# Registered Waste Hauler 19563 B & G Restoration, Inc. City, State Disposal Date Tullytown, PA 5/5/2014 - 6/01/2014 City, State Date Lincoln Park, NJ 07035 Gordana Luna Signature 04/25/2014 Completed by (Print or Type) Secretary/Treasurer Gordana Luna

^{*****}See continuation sheet for additional locations & quantities*****

Re: One page attachment to 10-day notification dated 04/25/2014 for asbestos removal at:

Former Blockbuster, 117 Speedwell Avenue, Morristown, NJ 07960 3 0 20

Project start date: 05/05/2014

The following materials shall be abated:

Location of asbestos- containing material to be abated in facility	Is location normally used solely by maintenance / custodial staff	Description of ACM	Amount (LF or SF)	Remove	Repair
Basement	NO	Pipe insulation	20 LF	X	
1st floor area	NO	Pipe insulation	30 LF	X	
1 st fl. carpet storage area	NO	VAT & mastic	196 SF	X	
Carpet storage area	NO	Safes	2 safes	X	

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

2014-64 B & G proj. #: Check #6515 Date of Notification (1) Name of Building Owner/Operator (2) 10 | 4 | / | 2 | 5 | / | 1 | 4 | Myrna J Weissman 3 U Agencies Notified Type Notification Street Address EPA 1611 Summit Avenue Initial DEP City, State, Zip Code Amendment DOL Hillside, NJ 07205 Telephone Number Name of Contact DOH Cancellation Myrna J Weissman ☐ DCA FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Myrna J Weissman Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet 1611 Summit Avenue # of Floors County (6) County Code (7) City (5) Current Use (Prior if being demolished) (State use only) Hillside, NJ 07205 Union residential Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. N/A Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 05/07/2014 05/06/2014 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: wrap & cut Scope of Work (check all that apply) Glovebag procedure Full Containment w/negative pressure Demolition Renovation Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf >3 sf or >3 If Ε Is location normally used solely e е Location of by maintenance/custodial Amount п m Description of asbestos-containing p C (Specify SF or asbestos-containing C staff(12) 0 material (ACM) a material to be V abated in facility (13) N/A Yes pipe insulation 52 If basement Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 19563 B & G Restoration, Inc. Disposal Date City, State City, State Tullytown, PA 05/07/2014 Lincoln Park, NJ 07035 Signature Completed by (Print or Type) 04/25/2014 Secretary/Treasurer Gordana Luna

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

2014-62 B & G proj. #: Check #6516 Date of Notification (1) Name of Building Owner/Operator (2) 0 4 / 2 5 / 1 4 Daniel Miller APR 13 0 2014 Agencies Notified Type Notification Street Address ☐ EPA 60 Lake Road V Initial ☐ DEP City, State, Zip Code DOL. Amendment Basking Ridge, NJ 07920 DOH. Name of Contact Telephone Number Cancellation Daniel Miller ☐ DCA FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Daniel Miller Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 60 Lake Road Bldg. Age Square Feet # of Floors City (5) County (6) County Code (7) (State use only) Basking Ridge, NJ 07920 Current Use (Prior if being demolished) Somerset residential Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. N/A B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Project Manager for Monitoring Firm Phone Number Telephone Number 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 05/05/2014 05/06/2014 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) wrap & cut Demolition Renovation Full Containment w/negative pressure Glovebag procedure Mini-enclosure Non-friable procedure >3 sf or >3 lf ≥160 sf or ≥260 lf Is location normally used solely Ε Location of e by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m p staff(12) C (Specify SF or material to be material (ACM) C 0 a а abated in facility (13) v L Yes No N/A p 72 If M pipe insulation crawl space pipe insulation 36 If garage area X VAT 150 sf W 2nd floor bedroom Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler 19563 2 1/2 Tullytown Resource & Recovery Center B & G Restoration, Inc. Disposal Date City, State City, State 05/07/2014 Tullytown, PA Lincoln Park, NJ 07035 Signature Date Completed by (Print or Type) Title Gordana Luna 04/25/2014 Gordana Luna Secretary/Treasurer

Date of Notification (1)				Name	of Building	g Owner/Operator (2)						
04/25	/14			Veri	zon Con	nmunications	/ Job #1404	4-4754 Check #					
Agencies Notified Type No	tification			Street	Address		\$ 1	APR 3	0	1914		(6.7)	
				100	Greenw	ood Avenue							
☑ DOLWD ☐ Ame				City, S	tate, Zip C	Code					700		
	ndment #					PA 19046							
	rgency (ir ication)	cluding	1		of Contac		Telephone Number						
(NJAC 5:23-8) justif	A STATE OF THE PARTY OF THE PAR				k Baylor		•						
- June	Cilation					IFORMATION			**				
Name of Facility Where Abatemen	t is Takin	a Place	(3)	ГАС	JILIT IN	IFURIMATION	Type of Facility ((A)			2752		
Verizon Waverly CO	LIS TANIII	y Flace	(3)				School (K-12	1.78					
	-							(Other than K-12)					
Street Address							Other (i.e., pr	ivate and commer		ilding	S,		
224-240 Lyons Ave.							homes, etc.)						
City (5)							Square Feet	# of Floors	BIG	dg. A	ge		
Newark													
County (6)				Coun	ty Code (7)(STATE USE ONLY)		or if being demolis	hed)				
Essex		- Contract				21-22-	Offices						
Name of Monitoring Firm Hired by	Building (Owner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
USA Environmental						AbateTech, I	nc.						
Street Address						Street Address							
8436 Enterprise Ave.						30 Maple Ave	e. PO Box 25						
City, State, Zip Code					City, State, Zip Code								
Philadelphia, PA 19153						Lumberton, I	NJ 08048						
Project Manager for Monitoring Firm Tel					No.	Telephone No.		License No.					
Mark Jenkins			21	5-365	-5810	609-265-2107	1	00529					
Start Date (10)	Sche	duled C	omple	tion Da	te (11)	Name of OSHA N	Monitor						
05 /05 /14		05 /	06	_ / _	14	EMSL Analyt	ical						
Occupancy Status During Abateme	ent (Chec	k only o	one)			Street Address							
☐ Facility Closed/Vacated During						200 Route 13	0 North						
Abatement Performed Outside					cribe	City, State, Zip Co	ode						
Time of Abatement:AM	·	N/ <u>5:00</u>	PIVI-I	AIVI		Cinnaminsor	n, NJ 08077						
Scope of Work (Check all that app	ly)							. 5					
☐ ≥3 sf or ≥3 lf		⊠ Re	novati	on		☐ Full Con	tainment with Neg	gative Pressure					
⊠ ≥160 sf or ≥260 lf			molitic				g Procedure						
(A)			- 1			☐ Non-Exe	empted (*) and No	n-Friable Procedur	-				
		5.0	Local				Abatem					ent Type	
Location of	A C. A. A. \		Norma ed Sole		A a b a	Description of		Amount	Re	Re	ᄪ	四	
Asbestos-Containing Material (TO BE ABATED	ACIVI)		intena			estos Containing Ma e., thermal systems		(Specify	Removal	Repair	car	Clo	
IN Facility		Cus	todial	Staff?	(1.0	surfacing, VAT	, or	SF or LF)	Va	~	Encapsulate	Enclosure	
(13)		Yes	(12) No	N/A	-	other miscellane	eous)				ate		
		-		100000	Din a In			15 LF	12				
Basement	ļ.,				ripe in	sulation		15 LF		Ш			
		\Box	П							П	П		
Name of Registered Waste Hauler				JDEP \		Cubic Yards of	Name of Regis	stered Landfill	1-		_	1	
AbateTech, Inc.			100	lauler II	O No.	Waste	G.R.O.W.S						
10000000000000000000000000000000000000				18750)	10				- 22/2	3/45		
City, State						Disposal Date	City, State	DA					
Lumberton, NJ						5/6/14	Tullytown,						
Completed By (Print or Type)	Titl		• 200			Signature	D. D:	Da	ite	_].			
Jennifer Piraine		perat	ions	Coord	inator	Am	ger fuai	14 14	105	110	1		
ASB-41						- //	U		1	1	(1		

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

MAY 11

Date of Notification (1)					Name	of Buildin	g Owner/Operator (2	2)		17			-	
	25	/14			Atla	antiCare	Hospital /	Job #1404-475	3 Check	#6140				
Agencies Notified	Type No	tification			Street	Address		APR 3 0 2014						
⊠ EPA	☑ Initia	1			65 .	Jimmie L	eeds Road	4	, A	11. 0		- 14		
□ DOLWD	☐ Ame				City. S	ty, State, Zip Code								
☑ DHSS		ndment#			i concrete instruction	nona, N.			.5. *				-	
DCA		rgency (ir	cluding]		of Contac			Telenhan	e Minnesha				
(NJAC 5:23-8)		ication)							I GIAM		**			
	☐ Cano	eliation			Fra	nk Casp	er				-			100000000
					FAG	CILITY IN	FORMATION							
Name of Facility Where A	batemen	t is Takin	g Place	(3)				Type of Facility (4)					
AtlantiCare Hospita	I - Pac-	W Build	ng					School (K-12)						
Street Address								Subchapter 8						
72 W. Jimmie Leeds	Road							Other (i.e., pr homes, etc.)	ivate and o	commerc	ial bu	ilding	s,	
City (5)			1411,0/24					Square Feet	# of Flo	ors	Blo	ig. Ag	je	
Galloway														
County (6)					Cour	ty Code (7	7)(STATE USE ONLY)	Current Use (Pric	or if being	demolish	ed)			
Atlantic						, (.	,,	Hospital	o cog		,			
Name of Monitoring Firm I	Hired by	Building (Owner	(8) T	ASCM	No	Name of Abateme							-
TTI Environmental,		Dunumy .	J 111101	(0)	/ 100IVI	110.	AbateTech, II							
Street Address							Street Address	10.	_		×			
1253 North Church	Street						30 Maple Ave	PO Box 25						
City, State, Zip Code							City, State, Zip Co							
Moorestown, NJ 080)57					Lumberton, NJ 08048								
Project Manager for Monit		m		Tele	phone	No	Telephone No.		License	No.				
James A. Guilardi		**		7793	09-314		609-265-2107		0052					
Start Date (10)		Sched	duled C	omple	tion Da	te (11)	Name of OSHA M	lonitor	1					
04/28/	14_				9_ /		EMSL Analyti	ical						
Occupancy Status During	Abateme	ent (Chec	k only	one)			Street Address							
☐ Facility Closed/Vacated	d During	Entire Pe	riod of	Abate	ment		200 Route 13	0 North						
☐ Abatement Performed							City, State, Zip Co	ode						
Time of Abatement:	AM-	P	W/	PM·		AM	Cinnaminson							
Scope of Work (Check all	that appl	y)					1							
П.О.СОК					☐ Full Containment with Negative Pressure									
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Re	novat			☐ Mini-Enc							
△ ≥ 100 SI OI ≥200 II				anona	J11			bag Procedure xempted (*) and Non-Friable Procedure						
			Is	Loca	ion			1				ateme	ent Ty	vne
Location of	of		l	Norma	lly		Description o	f				_		
Asbestos-Containing N		ACM)		d Sole		Asbe	estos Containing Ma		Amo	unt	Ren	Repair	in C	nc.
TO BE ABA			11.000000000000000000000000000000000000	intena	ince/ Staff?	(i.€	e., thermal systems		(Spec		Removal	air	aps	Enclosure
IN Facility	y		Cus	(12)			surfacing, VAT,		SF or	LF)	<u>a</u>		Encapsulate	ure
(13)			Yes	No	N/A	1	other miscellane	ous)					te l	
Exterior Mindows						Minde			200				П	
Exterior Windows				Ш		vvindov	w Caulk		200	LF	\boxtimes	Ш	ш	Ц
-307-575											П	П	П	
Name of Registered Waste	a Hauler				JDEP I	Naste	Cubic Yards of	Name of Regist	ered Land	Ifill				Ц
AbateTech, Inc.	c i laulci			1650	lauler II		Waste	G.R.O.W.S.						
					18750)	20		Landini	-				
City, State							Disposal Date	City, State	D4					
Lumberton, NJ							4/29/14	Tullytown,	PA					
Completed By (Print or Ty	pe)	Title	9				Signature	1 A		Date	e]	0	1.	,
Jennifer Piraine		C	perat	ions	Coord	inator	WA A	ALL VIA	alma		11	75	11	1
ASB-41							7	D (019				+	
MAY 11		*	Do not	use th	is form	for asbes	tos licensure exemp	ted activities.						

MAY 11

1305-4638 Check#

Date of Notification (1) 04/23/14		me of Building (Owner / Operator	(2)					
Agencies Notified Type Notification	Stre	eet Address		7 ()	APR 3 0 2	014		1	
⊠ EPA		Box 034		*	1.	.017		-	
□ DEP □ Initial □ Amended #	and the second s	y, State & Zip C					i		
	1	enton, NJ 086 me of Contact	25	4	. VT	elephon	e Nur	her	-
□ DOH □ Emergency □ DCA □ Cancellatio		orgette Bunc	h			Cicpitoti	ic ivai	şibÇi	.5
Bert Bert					* -	-			
Name of Facility Where Abstract is 7		ACILITY INF	Type of Facilit	h. (4)					
Name of Facility Where Abatement is NJ Training School for Boys	raking Place (3)		School (k						
Street Address				ter 8 (Other tha	n K-12)				
1 State Street					mercial building	s, home	es, etc	:.)	
			Square Feet	# of Floo		ldg. Age			
City (5) Coun	ity (6) Coun	ty Code (7)							
	dlesex		Current Use (Prior if being de	emolished)		1,000		
			Training Sc	hool					
Name of Monitoring Firm Hired by Build	ding Owner (8)	ASCM No.		ement Contrac	tor (9)				
Environmental Connection, Inc.			AbateTech,						20
Street Address			Street Addres PO Box 25	S					
City, State & Zip Code			City, State & 2	7in Code					_
Trenton, NJ 08608		-	Lumberton,						
Project Manager for Monitoring Firm	Telepho	ne Number	Telephone Nu		License N	umber	_		
Jim Frisbee		2-4200	609-265-210			00529	9		
Scheduled Start Date (10) Sched	luled Completion 5/30/14		Name of OSH EMSL Analy						
Occupancy Status During Abatement (Street Addres						
Facility Closed/Vacated During	Entire Period of	Abatement	108 Haddon		*				
Abatement Performed Outside	of Normal Hours	City, State & 2	Zip Code						
Describe:			Westmont,	NJ 08108					
Facility Occupied During Abate	ement								
Scope of Work (Check all that apply)				☐ Full Con	tainment with N	egative l	Press	ше	
☐ ≥3 sf or ≥3 lf	⊠ F	Renovation		Mini-End		ogun v o i	1000	u. v	
≥160 sf ≥260 lf	<u> </u>	Demolition			ag Procedures				
					mpted and Non	-Friable	Proce	edur	е
Location of		cation	Description		Amount	Aba	temer	nt Ty	ре
Asbestos-Containing		lly Used	Asbestos-Cont		(Specify SF or LF)			m	
Material (ACM) TO BE ABATED		ely by nance or	Material (AC (i.e., thermal sy		31 01 11)	₽ Pe	70	nca	Enc
in Facility			nsulation, surfac	ing, VAT		Remova	Repair	Encapsula	Enclosure
(13)		(2)	or other miscella	aneous)		<u>a</u>	7	late	<u>=</u>
		lo N/A						7	$\overline{}$
Building #9 Basement Mechanical R			Pipe Fittin		75 total		뮈	╬	H
Building #9 1 st & 2 nd Floor			Pipe Fittin		285 total 10 SF		HH	╡	Η
Building #7			Plaster Window Ca		12 LF		뻐	╡┼	片
Building #7 Perimeter Building #31 Basement Office			Pipe Insula		20 LF		ĦĦ	#	Ħ
Building #32		COLUMN TWO IS NOT THE OWNER.	Window/Door		30 SF		Hi	Ħ	Ħ
Name of Registered Waste Hauler		NJDEP Waste	Cubic Yards		stered Landfill	1 8-3			_
AbateTech, Inc.		Hauler ID No. 18750	of Waste	TRRF Lands	ill				
City, State		.0.00	Disposal Date	City, State					
Lumberton, NJ			5/30/14	Tullytown, F	PA				
Completed By (Print or Type)		Title	Signature	^ .		Date			
Jennifer Piraine		Opps. Coord.	xxxlo	r Ivrai	we l	4/23	114		
			10 -110	- i viac					-

1305-4638 Check#

Date of Notification (1) 4/23/14		Name NJ D			Owner / Operato	or (2)		View View				
Agencies Notified Type Notification EPA			t Ad	dress							-	
☐ DEP ☐ Initial		City,	Stat	e & Zip (Code	- /	APR 30 °C	14		1		
□ DOL □ Amended #10				, NJ 08	625	110	AFII 3 0		46	1		
DOH Emergency Cancellation				Contact	ah		[1	elepho	ne N	umb	er	
Garcenation				te Bun	0.000.000.000							
Name of Facility Where Abatement is Taking P	loss (CIL	ITY INF	ORMATION	(i.e. /4)						
NJ Training School for Boys	race (3)			Type of Faci							
Street Address							an K-12)					
1 State Street								s, hon	nes, e	etc.)		
					Square Feet	# of Flo	oors B	ldg. Ag	е			
City (5) County (6)	Co	unty	Cod	e (7)								
Jamesburg Middlesex						1777	demolished)					
N. CM. III. III. III. III. III. III. III.					Training So							
Name of Monitoring Firm Hired by Building Own Environmental Connection, Inc.	ner (8)		A	SCM No	 Name of Aba AbateTech 		ctor (9)					
Street Address		Mercon			Street Addre					-	-	
120 North Warren Street					PO Box 25	00						
City, State & Zip Code					City, State &	Zip Code						
Trenton, NJ 08608				50.30	Lumberton							
Project Manager for Monitoring Eirm Jim Frisbee	609-	ohone 392-	420	0	Telephone N 609-265-21		License N		29			
Scheduled Start Date (10) Scheduled Con 5/29/13	mpletio 5/30		te (11)	Name of OSI EMSL Anal							
Occupancy Status During Abatement (Check o Facility Closed/Vacated During Entire F			aten	nent	Street Addre							
Abatement Performed Outside of Norm	al Ho	urs			City, State &							
Describe:					Westmont,							
Facility Occupied During Abatement												
Scope of Work (Check all that apply)							ntainment with N	o a o tivo	Droc	ouro		
☐ ≥3 sf or ≥3 lf	M	Rer	nova	ition				egalive	Pies	sure	E	
≥160 sf ≥260 If	H		nolit									
Location of	90000000	Locat			Description		Amount	Aba	ateme	ent T	ype	
Asbestos-Containing Material (ACM)		nally l olely l		d	Asbestos-Cor Material (A					_		
TO BE ABATED		tenan		or	(i.e., thermal s		SF OI LF)	Re	R	inca	E	
in Facility		odial S			insulation, surface	cing, VAT		mo	Repair	apsu	Enclosure	
(13)	\ <u></u>	(12)	1 11	_	or other miscell	laneous)		<u>a</u>	=	Encapsulate	ure	
Duilding 40	Yes	No	N/.	A		570	10.00				_	
Building #8 Power House	H	\boxtimes	F	-	Plaste				H	井	H	
Power nouse	H	A	+	1	Pipe Insula	ation	9 LF		H	H	H	
	H	H	i÷	-	7 202			ᆂ	H	+	H	
	H	Н	F	1				ᅢ	H	Ħ	H	
		Ħ	T	il				TH	Ħ	Ħ	Ħ	
Name of Registered Waste Hauler				Waste		Name of Reg	istered Landfill					
AbateTech, Inc.			uler 750	ID No.	of Waste	TRRF Land	fill					
City, State Lumberton, NJ					Disposal Date 5/30/14	City, State	License Number 0052: nitor de 108 Full Containment with Negative Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Amount (Specify SF or LF) AT S) 10 SF SP					
Completed By (Print or Type)		Titl	le	22	Signature			Date	- 27 C T S			
Jennifer Piraine		1/2/2018/		Coord.	Xmude	Luan	-l		/14			

page 1 of 2

Date of Notification (1)			100000			wner/Operator (2)	/ Job #140	3-4737 Check					
4/	23 / 1	4		Iruste	es of Pri	Inceton	7 000 11 10	APR 3	0 2014				
Agencies Notified	Type Notification	1		treet Ad			-ity E A MacM		0 (014				
⊠ EPA	☐ Initial						sity E.A. MacM	man blug.					
☑ DOLWD (#2)		City, State, Zip Code									
□ DHSS □ □ □ □ □ □ □ □ □ □ □ □	Emergency (Princeton, NJ 08544									
□ DCA (NJAC 5:23-8)	justification)	moraumg	N	Name of Contact Telephone Number									
(145) 10 0.20 0)	☐ Cancellation			Rober	t Ortego	, P.E.				1969			
				FACIL	ITY INFO	ORMATION							
Name of Facility Where A	Abatement is Taki	ng Place (3)				€	Type of Facility (4						
Sayre Hall							☐ School (K-12)	(Other than K-12)					
Street Address			0.00				Other (i.e., pri	vate and commerci	al buildings,				
300 Forrestal Road	, Princeton Un	iversity Fo	rres	stal Ca	mpus		homes, etc.)						
City (5)							Square Feet	# of Floors	Bldg. Age				
Princeton								is the second of	ad)				
County (6)				County	Code (7)(STATE USE ONLY)	Current Use (Prid	or if being demolish	lea)				
Middlesex							(6)						
Name of Monitoring Firm	Hired by Buildin	g Owner (8)	A	SCM N	0.		ent Contractor (9)						
ATC Associates				00098		AbateTech, I	nc.						
Street Address						Street Address	50 5 05		85				
3 Terri Lane							e. PO Box 25						
City, State, Zip Code						City, State, Zip Code							
Burlington, NJ 080	16					Lumberton, NJ 08048							
Project Manager for Mor	nitoring Firm			hone N		Telephone No.	-	00529					
Michael R. Keehn				9-386-	1	609-265-210		00323					
Start Date (10)	34 155	heduled Con				Name of OSHA							
3 / 31 /	14		02	_ / _	14	EMSL Analy	ticai						
Occupancy Status Durin	ng Abatement (Ch	eck only on	e)			Street Address							
☐ Facility Closed/Vaca	ted During Entire	Period of At	aten	nent		200 Route 1							
Abatement Performe	ed Outside of Nor 7:00AM-3:30PM	mal Facility I // <u>3:30</u> PM- <u>1</u>	10urs 2:00	AM	ribe	City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check	all that apply)					N Full Co.	ntainment with Ne	native Pressure					
The second secon		⊠ Ren	ovatio	on		☐ Mini-En	closure	gaavorijooda.e					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		☐ Dem				☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Z - 100 01 01 _ 200 11						☐ Non-Ex	empted (*) and No	JI-I Hable I Toccuu	Abateme	nt Type			
		17.00	ocat orma	100		Description	of			555			
Location		Head		ely by	Asbe	Description of sbestos Containing Material (ACM) Amoun			Repair	Enclosure Encapsulate			
Asbestos-Containin TO BE Al	g Material (ACM) BATED	Ivian		nce/	(i.e	thermal system	s insulation,	(Specify SF or LF)	ova	bsur			
IN Fac	cility	Custo	(12)	Staff?		surfacing, VA other miscellar	neous)	31 01 21)	-	late			
(13))	Yes	No	N/A		Curo, massa							
1 st Floor					Pipe ar	nd fitting insula	ation	1,150 LF					
2 nd Floor			\boxtimes		Floor ti	ile and Mastic		1,280 SF					
Attic				\boxtimes	Pipe ar	nd fitting insula	ation	1,020 LF					
see attached pag	e 2												
Name of Registered W				NJDEP '		Cubic Yards of		istered Landfill					
AbateTech, Inc.			H	Hauler II		Waste 150	G.R.O.W.	S. Landfill					
				1875		Disposal Date	City, State						
City, State						05/02/14	Tullytow	n, PA		32 33-3			
Lumberton, NJ	- Tuno	Title				Signature	Λ Ω		Date	lucio es			
Completed By (Print o Jennifer Piraine	r (ype)	Operati	ons	Coord	linator	gen		Mina	4 23	14			
AND THE OWNER OF THE PARTY OF T			-					2000		- *			

Princeton Sayre Hall - Notification

PAGE 2 OF 2

Location of Asbestos-Containing		on Normall y Maintena		Description of Asbestos-Containing	Amount (Specify	Abatement Type				
Material (ACM) TO BE ABATED in Facility	Custo	odial Staff?	(12)	Material (ACM) (i.e., thermal systems insulation, surfacing,	SF or LF)	Remo	Repair	Encap	Enclos	
(13)	Yes	No	N/A	VAT or other miscellaneous)		moval	ai.	capsulat	sure	
Attic				roof rafter insulation	8,500 SF	M				
Attic				Cement Asbestos Board	8 SF	\boxtimes				

APR 3 0 2014

Date of Notification (1)				Name	of Buildin	g Owner/Operator (2)				
/ /	14			PS	E&G		/ Job #1403-4	735 Check	1.7		
Agencies Notified Type Noti	fication			Stree	t Address						
☑ EPA ☐ Initial		_		80	Park Pla	za					1
☑ DOLWD ☑ Amend			\	City. S	State, Zip (Code		APR 3	0-2014		-
	iment#	10)	1000	wark, NJ						- 1
DCA Emerg (NJAC 5:23-8) justific		cluding	3		of Contac	The second secon		Telephone Num	hor	-	_[
Cance					ve Magir	1000		relephone Num		70	ì
		-				FORMATION			· -	-	
Name of Facility Where Abatement i	s Taking	Place	(3)	- IA	CILITI	TORMATION	Type of Facility ((4)			
PSE&G Exterior Burlington 5							School (K-12	330			
Street Address			3.3. R				☐ Subchapter 8	Other than K-12			
Devlin Ave. & West Broad St	reet						Other (i.e., pr homes, etc.)	rivate and comme	rcial buildin	gs,	
City (5)							Square Feet	# of Floors	Diale A		
Burlington							Square reet	# Of Floors	Bldg. A	\ge	
County (6)				10		W/07475 1105 011114			74		
70 707				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)		
Burlington						<u> </u>				200	
Name of Monitoring Firm Hired by B	uilding (Owner	(8)	ASCM	No.	Name of Abateme	5005				
Health & Safety Services				117		AbateTech, I	nc.				
Street Address			72			Street Address	5	3			
318 12 th Street						30 Maple Ave	e. PO Box 25				
City, State, Zip Code				- 1999		City, State, Zip Co	ode				
Hammonton, NJ 08037						Lumberton, N	NJ 08048				
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.			
Jim Proctor			1	09-704		609-265-2107		00529			
Start Date (10)	Sched	luled C	omple	etion Da	ite (11)	Name of OSHA M	lonitor				
04 / _07_ / _14	1			3 /	30 05 0	EMSL Analyt	C				
Occupancy Status During Abatemen		THE PERSON NAMED IN	- 12			Street Address					
☐ Facility Closed/Vacated During E				mont			0 N = -4h				
☐ Abatement Performed Outside of					cribe	200 Route 13	The Control of the Co				
Time of Abatement:AM						City, State, Zip Co					
Scope of Work (Check all that apply)			-								
☐ ≥3 sf or ≥3 lf						Full Cont	ainment with Neg	ative Pressure			
☑ ≥3 \$1 61 ≥3 11 ☑ >160 sf or >260 If		☐ Re	novat			☐ Mini-Enclosure ☐ Glovebag Procedure					
				*****				n-Friable Procedu	re		
		6337	Loca						Abatem	ent Ty	уре
Location of		5030 (0)(4)(4)	Norma	illy ely by		Description o	of T				
Asbestos-Containing Material (AC TO BE ABATED	اVI)		intena			stos Containing Ma ., thermal systems i		Amount (Specify	Removal	nca	ncic
IN Facility		Cust		Staff?	(1.6	surfacing, VAT,		SF or LF)	ir	Encapsulate	Enclosure
(13)			(12)	T		other miscellane	ous)			late	æ
		Yes	No	N/A							
Exterior				\boxtimes	Exterio	r Transite Condu	uit	1,500 LF			
						and Artistan					П
											$\overline{\Box}$
Name of Registered Waste Hauler				JDEP \		Cubic Yards of	Name of Regist	ered Landfill			
Waste			1333	lauler II		Waste	G.R.O.W.S.				
				1125		40		Landini			
City, State						Disposal Date	City, State				
Camden, NJ						5/16/14	Tullytown,	PA			
Completed By (Print or Type)	Title					Signature	<i>a</i> ·	Da	te j	1	
Jennifer Piraine	0	perati	ons	Coordi	inator	Drund	er finai	ni	1123	114	1
SD 41				-			- local	14	110.0	1 -	

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

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