State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:130)

Date of Notification (1)
4/23/14

Name of Building Owner/Operator (2)
PSEG

Agencies Notified
☐ EPA
☐ DEP
☐ DOL
☐ DOH
☐ DCA

Type Notification
☐ Initial
☐ Amended
☐ Amendment #
☐ Emergency (including justification)
☐ Cancellation

Street Address
440 Eagle Rock Rd

City, State, Zip Code
Roseland, NJ 07068

Name of Contact
Dawn Neville

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement Is Taking Place (3)
Saddle Brook Substation

Street Address
392 Jefferson St

City (5)
Saddle Brook, NJ 07663

County (6)
Bergen County

County Code (7) (STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
N/A

ASCM No.

Name of Abatement Contractor (9)
WRS Environmental Services, Inc.

Street Address
17 Old Dock Rd

City, State, Zip Code
Yaphank, NY 11980

Project Manager for Monitoring Firm
N/A

Telephone No.
631-924-8111

License No.
33039

Start Date (10)
4/22/14

Scheduled Completion Date (11)
4/22/14

Name of OSHA Monitor
WRS Environmental Services, Inc.

Street Address
17 Old Dock Rd

City, State, Zip Code
Yaphank, NY 11980

Occupancy Status During Abatement (Check Only One)
☒ Facility Closed/Vacated During Entire Period of Abatement
☒ Abatement Performed Outside of Normal Facility Hours
☐ Other – Describe:

Scope of Work (Check All That Apply)
☒ >25 sf or ≥3 If
☒ ≥150 sf or ≥260 If

Location of Asbestos-Containing Material (ACM) TO BE ABATED
In Facility

(13)

Is Location Normally Used Solely by Maintenance/Custodial Staff?
☐ Yes
☐ No
☐ N/A

Description of Asbestos Containing Material (ACM)
(I.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)
1 LF

Abatement Type
☐ Removal
☒ Repair
☐ Encapsulate
☐ Enclosure

Name of Registered Waste Hauler
Veolia ES Technical Solutions

NJDEP Waste Hauler ID No.
20071

Cubic Yards of Waste
1/4

Name of Registered Landfill
Wayne Disposal

Disposal Date
4/24/14

City, State
Belleville, MI 48111

Completed by
Michael DiMaria

Title
Project Manager

Signature

Date
4/23/14

* Do not use this form for asbestos licensure exempted activities.
**NOTIFICATION OF ASBESTOS ABATEMENT**

**State of New Jersey**

(Pursuant to NJAC 8:60 and 12:120)

**Date of Notification:** 4/23/14

**Name of Building Owner/Operator:** PSEG

**Agencies Notified:**
- [ ] EPA
- [ ] DEP
- [x] DOL
- [ ] DOH
- [ ] DCA

**Type Notification:**
- [ ] Initial
- [ ] Amended
- [ ] Emergency (including justification)
- [x] Cancellation

**Street Address:**

- **440 Eagle Rock Rd**
- **Roseland, NJ 07068**

**City, State, Zip Code:**

**Name of Contact:** Dawn Neville

<table>
<thead>
<tr>
<th><strong>FACILITY INFORMATION</strong></th>
<th><strong>Type of Facility (4)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Facility Where Abatement is Taking Place (3)</td>
<td>□ School (K-12)</td>
</tr>
<tr>
<td>Hudson Switching Station</td>
<td>□ Subchapter 8 (Other than K-12)</td>
</tr>
<tr>
<td>Street Address</td>
<td>□ Other (i.e., private &amp; commercial buildings, homes, etc.)</td>
</tr>
<tr>
<td>164 Van Keuren Ave</td>
<td>☑</td>
</tr>
<tr>
<td>City (5)</td>
<td>Square Feet</td>
</tr>
<tr>
<td>Jersey City, NJ 07097</td>
<td>N/A</td>
</tr>
<tr>
<td>County Code (7)</td>
<td># of Floors</td>
</tr>
<tr>
<td>Hudson County</td>
<td>N/A</td>
</tr>
<tr>
<td>County Code (7)</td>
<td>Bidg. Age</td>
</tr>
<tr>
<td>(STATE USE ONLY)</td>
<td>N/A</td>
</tr>
<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
<td>Current Use (Prior if being demolished)</td>
</tr>
<tr>
<td>ASCM No.</td>
<td>N/A</td>
</tr>
<tr>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Name of Abatement Contractor (6)</td>
<td>Street Address</td>
</tr>
<tr>
<td>WRS Environmental Services, Inc.</td>
<td>17 Old Dock Rd</td>
</tr>
<tr>
<td>Street Address</td>
<td>City, State, Zip Code</td>
</tr>
<tr>
<td>N/A</td>
<td>Yaphank, NY 11980</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Telephone No.</td>
</tr>
<tr>
<td>N/A</td>
<td>631-924-8111</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>License No.</td>
</tr>
<tr>
<td>N/A</td>
<td>33039</td>
</tr>
<tr>
<td>Name of OSHA Monitor</td>
<td>Street Address</td>
</tr>
<tr>
<td>WRS Environmental Services, Inc.</td>
<td>17 Old Dock Rd</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Yaphank, NY 11980</td>
</tr>
<tr>
<td>Scope of Work (Check All That Apply):</td>
<td></td>
</tr>
<tr>
<td>≥ 3 sf or ≥ 3 ft</td>
<td>☑ Renovation</td>
</tr>
<tr>
<td>≥ 180 sf or ≥ 260 ft</td>
<td>☑ Demolition</td>
</tr>
<tr>
<td>Other – Describe:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exterior Trenching</td>
<td>☑</td>
<td>Transite Pipe</td>
<td>4 LF</td>
<td>☑</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>NJDEP Waste Hauler ID No.</th>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veolia ES Technical Solutions</td>
<td>20071</td>
<td>1/4</td>
<td>Wayne Disposal</td>
</tr>
<tr>
<td>City, State</td>
<td>Disposal Date</td>
<td>City, State</td>
<td>Date</td>
</tr>
<tr>
<td>1 Eden Lane, Flanders NJ 07836</td>
<td>4/24/14</td>
<td>Belleville, MI 48111</td>
<td>4/23/14</td>
</tr>
</tbody>
</table>

**Completed by:**

Michael DiMaria

**Title:** Project Manager

**Signature:**

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
Pursuant to NJAC 8:59 and 12:120

Date of Notification (1)  4/23/14
Name of Building Owner/Operator (2)  PSEG

Agencies Notified  
- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification  
- Initial
- Amended
- Amendment #
- Emergency (including justification)
- Cancellation

Street Address  440 Eagle Rock Rd
City, State, Zip Code  Roseland, NJ 07068

Name of Contact  Dawn Neville

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  Intersection of Ackerman Ave & Route 21 - Excavation (Non structure)
Street Address  Intersection of Ackerman Ave & Route 21
City (5)  Clifton, NJ 07011
County (6)  Passaic County

Square Feet  N/A  # of Floors  N/A  Bldg. Age  N/A

County Code (7)  (STATE USE ONLY)  

Current Use (Prior if being demolished)  N/A

Name of Monitoring Firm Hired by Building Owner (8)  ASCM No.  
N/A  

Street Address  
N/A
City, State, Zip Code  
N/A

Name of Abatement Contractor (9)  WRS Environmental Services, Inc.
Street Address  17 Old Dock Rd
City, State, Zip Code  Yaphank, NY 11980

Type of Facility (4)  
- School (K-12)
- Subchapter 6 (Other than K-12)
- Other (i.e. private & commercial buildings, homes, etc.)  

Occupancy Status During Abatement (Check Only One)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other – Describe:  

Scope of Work (Check All That Apply)  
- ≥3 sf or ≥3 If
- ≥160 sf or ≥260 If
- Renovation
- Demolition  
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure  
- Non-Exempted (*) and Non-Firable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
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Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/4</td>
</tr>
</tbody>
</table>

Amount (Speckly SF or LF)  

Abatement Type  

Endorse

<table>
<thead>
<tr>
<th>Transite Pipe</th>
</tr>
</thead>
</table>
| 2 LFT  

Name of Registered Waste Hauler  Veodila ES Technical Solutions  N.J. DEP Waste Hauler ID No. 20071
City, State  1 Eden Lane, Flanders NJ 07836

Name of Registered Landfill  Wayne Disposal
City, State  Belleville, MI 48111

Disposal Date  4/24/14

Completed by  Michael DiMaria  Title  Project Manager
Signature  

Date  4/23/14

* Do not use this form for asbestos licensure exempted activities.
STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7)
ANNUAL NOTIFICATION

Date of Notification (1) 04/28/14

Name of Building Owner / Operator (2)
MARS SNACK FOODS

Agencies Notified
☐ EPA
☐ DEP
☐ DOH
☐ DOL
☐ DCA

Type of Notification
☐ Initial
☐ Amended
☐ Amendment # __
☐ Emergency w/ Justification
☐ Cancellation

Street Address
700 HIGH STREET

City, State, Zip Code
HACKETTSTOWN, NJ 07840

Name of Contact
JON VANDERWAL

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
MARS CHOCOLATE

Square Feet
800,000

# Of Floors
3

Building Age
40+

Current Use (Prior if being demolished)
MANUFACTURING

Name of Monitoring Firm Hired by Bldg. Owner (8)
ASCM NO

AET

LVI Demolition Services Inc.

Street Address
907 DOOLITTLE DRIVE
BRIDGEWATER, NJ 08807

City, State, Zip Code
32 Williams Parkway

Name of Abatement Contractor (9)

ERIK HOUSEKNECHT

Telephone Number
908-218-1109

Telephone Number
East Hanover, NJ 07936

License Number
973-772-3660 00860

Name of OSHA Monitor
LVI Demolition Services Inc.

Occupancy Status During Abatement (Check Only 1)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe:
☐ Other - Describe: __ 7:00AM - 3:30PM

Scheduled Start Date (10) 05/13/14
Scheduled Completion Date (11) 05/19/14

Scope of Work (Check All That Apply)
☐ Demolition
☐ Renovation
☐ Full Containment with Negative Pressure
☐ Other - Describe:
☐ >3sf or ≥3lf
☐ >180 sf or ≥260 lf
☐ Mini - Enclosure
☐ Glovebag Procedure
☐ Non-Exampted (*) and Non-Friable Procedure

Location of Asbestos Containing Material (ACM)

TO BE ABATED

in Facility

(13)

Is Location
Location
Normally Used
Solery by Maintenance/Custodial Staff

Description of Asbestos - Containing Material (ACM)
(I.e., thermal systems insulation, surfacing, Vat, or other miscellaneous)

Amount
(Specify SF or LF)

Abatement Type
R E M O V A L
R E P A I R
E N C L O S U R E

TANK FARM
☐ ☐ ☐ ☐ TANK INSULATION

200 SF

TANK FARM
☐ ☐ ☐ ☐ PIPE INSULATION

7 LF

Name of Registered Waste Hauler
NEWARK CARTING

NJ DEP Waste Hauler ID No.
4509 of Waste

Name of Registered Landfill

I.E.S.I.

City, State
NEWARK, NJ

Disposal Date

City, State
BETHLEHEM, PA

Completed by (Print or Type)
STEVE STILES

Title
PROJECT MANAGER

Signature

Date
04/28/14
STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 5:60-7 AND 12:120-7)

Date of Notification (1) 2014-02-26

Agencies Notified
- EPA
- DEP
- DOH
- DOL
- Initial
- Amended
- Amendment #
- Emergency w/ justification
- Cancellation

Name of Building Owner / Operator (2) First Energy
Street Address 76 South Street
City, State, Zip Code Akron, Ohio 44308
Name of Contact Jim Halsey
Telephone Halsey

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Street Address
321 MAIN STREET
City (6) SAYREVILLE
County (6) Middlesex
County Code (7)
Square Feet
# Of Floors
Building Age
Current Use (Prior if being demolished)
Telephone Pole

Name of Monitoring Firm Hired by Bldg. Owner (8)
Environmental Health Investigations
ASCM NO

Street Address
655 West Shore Trail
City, State, Zip Code Sparta, NJ 07871
Name of OSHA Monitor LVI Demolition Services Inc.
Street Address
32 Williams Parkway
City, State, Zip Code East Hanover, NJ 07936
Telephone Number 212-682-9271
License Number 973-884-8682

Name of Registered Waste Hauler
NEWARK CARTING
NJDEP Waste Hauler ID No. 4509
Cubic Yards of Waste

Completed by (Print or Type)
Title Steven Stiles
Signature
Date 04/28/14
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:50 and 5:16)

**Date of Notification:** 01/15/14  
**Name of Building Owner/Operator:** Princeton University-Office of Design and Construction

### Agencies Notified
- [ ] EPA  
- [ ] DOLWD  
- [x] DHSS  
- [ ] DCA  
- [ ] NJAC 5:23-8

### Type Notification
- [ ] Initial  
- [x] Amended  
- [ ] Amendment #5-4/25/14  
- [ ] Emergency (including justification)  
- [ ] Cancellation

### Street Address
- 200 Elm Dr.
- City, State, Zip Code: Princeton, NJ 08544

### Name of Contact
- Robert Ortega  
- Telephone Number

### FACILITY INFORMATION

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place</th>
<th>Type of Facility</th>
</tr>
</thead>
</table>
| Princeton University-Firestone Library | [ ] School (K-12)  
| | [ ] Subchapter 8 (Other than K-12)  
| | [x] Other (i.e., private and commercial buildings, homes, etc.)

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Washington Rd</td>
<td></td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>County Code</th>
<th>Current Use (Prior to being demolished)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MERCER</td>
<td>Library</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner</th>
<th>ASCM No.</th>
<th>Name of Abatement Contractor</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATC Associates Inc.</td>
<td></td>
<td>BRISTOL ENVIRONMENTAL, INC.</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Telephone No.</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Three Terri Center</td>
<td>609-386-8860</td>
<td>00509</td>
</tr>
</tbody>
</table>

### Project Manager for Monitoring Firm
- Michael Keen

### Start Date
- 02/05/14  
### Scheduled Completion Date
- 05/02/14

### Name of OSHA Monitor
- BRISTOL ENVIRONMENTAL, INC.

### Street Address
- 1123 BEAVER STREET
- City, State, Zip Code: BRISTOL, PA 19007

### Occupancy Status During Abatement
- [ ] Facility Closed/Vacated During Entire Period of Abatement  
- [ ] Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 6:30AM - 3:00PM

### Scope of Work
- [ ] ≥3 sf or ≥3 if  
- [x] ≥150 sf or ≥260 sf

### Is Location Normally Used Solely by Maintenance/ Custodial Staff?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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### Location of Asbestos-Containing Material (ACM) TO BE ABATED

<table>
<thead>
<tr>
<th>IN Facility</th>
<th>Description of Asbestos Containing Material (ACM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(13)</td>
<td>(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</td>
</tr>
<tr>
<td>(12)</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,465 SF</td>
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</tbody>
</table>

### Abatement Type
- [ ] Full Containment with Negative Pressure  
- [ ] Mini-Enclosure  
- [ ] Glovebox Procedure  
- [ ] Non-Exempted (*) and Non-Fireable Procedure

### Throughout Levels C, B and A
- [ ] Floor tile and mastic  
- [ ] Duct work

### Cubic Yards of Waste
- [ ] Office A-7J  
- [ ] 96 LF

### Name of Registered Waste Hauler
- SERVICE TRANSPORT GROUP INC

<table>
<thead>
<tr>
<th>Name of Registered Landfill</th>
<th>Disposal Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>G.R.O.W.S. NORTH LANDFILL</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Name of Registered Waste Hauler ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEW CASTLE, DE</td>
<td>20990</td>
</tr>
</tbody>
</table>

### Completed By (Print or Type)
- Brian Scaife
- Title: Estimator

---

**Note:** Please use this form for asbestos fibers to be removed and/or destroyed.
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)  
01 / 15 / 14

Name of Building Owner/Operator (2)  
Princeton University-Office of Design and Construction

Agencies Notified  
☐ EPA  
☐ DOLWD  
☒ DHSS  
☐ DCA  
(NJAC 5:23-8)

Type Notification  
☒ Initial  
☐ Amended  
☐ Amendment #4-4/16/14  
☐ Emergency (including justification)  
☐ Cancellation

Street Address  
200 Elm Dr.

City, State, Zip Code  
Princeton, NJ 08544

Name of Contact  
Robert Ortega

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  
Princeton University-Firestone Library

Street Address  
Washington Rd

City (5)  
Princeton

County (6)  
MERCER

County Code (7)(STATE USE ONLY)  

Current Use (Prior if being demolished)  
Library

Name of Monitoring Firm Hired by Building Owner (8)  
ATC Associates Inc.

ASCM No.  

Name of Abatement Contractor (9)  
BRISTOL ENVIRONMENTAL, INC.

Street Address  
1123 BEAVER STREET

City, State, Zip Code  
BRISTOL, PA 19007

Project Manager for Monitoring Firm  
Michael Kehoe

Telephone No.  
609-386-8800

Telephne No.  
215-786-6040

License No.  
00509

Start Date (10)  
2 / 5 / 14

Scheduled Completion Date (11)  
4 / 25 / 14

Occupancy Status During Abatement (Check only one)  
☐ Facility Closed/Vacated During Entire Period of Abatement  
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:30AM-5:00PM/ PM- AM

Scope of Work (Check all that apply)  
☐ ≤3 sf or ≤3  ft  
☒ ≥150 sf or ≥260 ft

☒ Renovation  
☐ Demolition  
☐ Full Containment with Negative Pressure

☐ Mini-Enclosure  
☐ Glovebag Procedure  
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED  
IN Facility (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)  
Yes  ☒ No  ☐ N/A  ☐

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  
Floor tile and mastic  
1,465 SF  
☐ ☐ ☐ ☐ ☐

Window Caulk  
98 LF  
☒ ☐ ☐ ☐ ☐

Duct work  
1,775 SF  
☐ ☐ ☐ ☐ ☐

Name of Registered Waste Hauler  
SERVICE TRANSPORT GROUP INC

NJDEP Waste Hauler ID No.  
20990

Cubic Yards of Waste  

Name of Registered Landfill  
G.R.O.W.S. NORTH LANDFILL

City, State  
MORRISVILLE, PA 19067

Completed By (Print or Type)  
Brian Scahiro  
Title  
Estimator

Signature  
[Signature]  
Date  
4/16/14
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

**Date of Notification (1)**
01 / 15 / 14

**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**

**Name of Facility Where Abatement is Taking Place (3)**
Princeton University-Firesite Library

**Street Address**
Washington Rd

**City (5)**
Princeton

**County (6)**
Mercer

**County Code (7)/(STATE USE ONLY)**

**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

**Name of Monitoring Firm Hired by Building Owner (8)**
ATC Associates Inc.

**ASCM No.**

**BRISTOL ENVIRONMENTAL, INC.**

**Street Address**
1123 BEAVER STREET

**City, State, Zip Code**
Bristol, PA 19007

**Telephone No.**
215-788-6040

**License No.**
00509

**Name of Abatement Contractor (9)**
BRISTOL ENVIRONMENTAL, INC.

**Project Manager for Monitoring Firm**
Michael Keehn

**Telephone No.**
609-386-8800

**Start Date (10)**
2 / 5 / 14

**Scheduled Completion Date (11)**
4 / 18 / 14

**Occupancy Status During Abatement (Check only one)**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:30AM-3:00PM PM: AM

**Scope of Work (Check all that apply)**
- ≥3 sf or ≥3 if
- ≥160 sf or ≥260 if
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

**Description of Asbestos Containing Material (ACM)**
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED (13)</th>
<th>Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout Levels C, B and A</td>
<td>Yes</td>
<td>1,465 SF</td>
</tr>
<tr>
<td>Office A-7J</td>
<td>No</td>
<td>96 LF</td>
</tr>
<tr>
<td>Throughout Levels C, B and A</td>
<td>N/A</td>
<td>1776 SF</td>
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</table>

**Name of Registered Waste Hauler**
SERVICE TRANSPORT GROUP INC

**NJDEP Waste Hauler ID No.**
20890

**Cubic Yards of Disposal Site**
Name of Registered Landfill
G.R.O.W.S. NORTH LANDFILL
City, State
MORRISVILLE, PA 19067

**Disposal Date**

**Completed By (Date or Time)**
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:80 and 5:10)

**Date of Notification (1)**
01 / 15 / 14

**Name of Building Owner/Operator (2)**
Princeton University-Office of Design and Construction

**Agencies Notified**
- [x] EPA
- [x] DOLWD
- [x] DMSS
- [x] DCA (NJAC 5:23-8)

**Type Notification**
- [x] Initial
- [x] Amended
- [x] Amendment #2-3/12/14
- [x] Emergency (including justification)
- [ ] Cancellation

**Street Address**
200 Elm Dr.

**City, State, Zip Code**
Princeton, NJ 08544

**Name of Contact**
Robert Ortega

**Telephone Number**

---

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**
Princeton University-Firestone Library

**Street Address**
Washington Rd

**City (5)**
Princeton

**County (6)**
MERCE

**County Code (7)/STATE USE ONLY**

**Current Use (Prior if being demolished)**
Library

**Name of Monitoring Firm Hired by Building Owner (8)**
ATC Associates Inc.

**ASCM No.**

**Name of Abatement Contractor (9)**
BRISTOL ENVIRONMENTAL, INC.

**Street Address**
1123 BEAVER STREET

**City, State, Zip Code**
BURLINGTON, NJ 08016

**Licenses No.**
00509

**Name of OSHA Monitor**
BRISTOL ENVIRONMENTAL, INC.

**Street Address**
1123 BEAVER STREET

**City, State, Zip Code**
BRISTOL, PA 19007

---

**Start Date (10)**
2 / 5 / 14

**Scheduled Completion Date (11)**
4 / 4 / 14

**Occupancy Status During Abatement (Check only one)**
- [x] Facility Closed/Vacated During Entire Period of Abatement
- [x] Abatement Performed Outside of Normal Facility Hours - Describe
  Time of Abatement: 8:30AM-3:00PM, 4:00PM-8:00AM

**Scope of Work (Check all that apply)**
- [x] 20-50 SF or 50-250 SF
- [ ] 2 SF or 250 SF
- [ ] Renovation
- [x] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (1) and Non-Friable Procedure

**Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)**
- Floor tile and mastic: 1,465 SF
- Window Caulk: 86 LF
- Duct work: 1,776 SF

**Name of Registered Waste Hauler**
SERVICE TRANSPORT GROUP INC

**Cubic Yards of Waste**

**Name of Registered Landfill**
G.R.O.W.S. NORTH LANDFILL

**Disposal Date**

**City, State**
NEW CASTLE, DE

**MORRISVILLE, PA 19067**
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:30 and 5:16)

**Date of Notification (1)**
01 / 15 / 14

**Name of Building Owner/Operator (2)**
Princeton University-Office of Design and Construction

**Name of Facility Where Abatement is Taking Place (3)**
Princeton University-Firestone Library

**Type of Facility (4)**
- School (K-12)
- Subchapter 6 (Other than K-12)
- Other (i.e., private and commercial buildings, homes, etc.)

**City (5)**
Princeton

**County (6)**
MERCE

**County Code (7)**
STATE USE ONLY

**Name of Monitoring Firm Hired by Building Owner (8)**
ATC Associates Inc.

**ASCM No. (9)**
NAME OF ABATEMENT CONTRACTOR
BRISTOL ENVIRONMENTAL, INC.

**Street Address (10)**
Three Ten Center
Burlington, NJ 08016

**Telephone No. (11)**
609-398-8800

**License No. (12)**
00609

**Name of OSHA Monitor (13)**
BRISTOL ENVIRONMENTAL, INC.

**Current Use (Prior if being demolished)**
Library

**Square Feet (14)**
8 of Floors

**Occupancy Status During Abatement (Check only one)**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe
- Time of Abatement: 7:00AM-3:30PM & 6:00PM-9:00AM

**Start Date (15)**
OFF SITE, 4/4/14

**Scheduled Completion Date (16)**
4/4/14

**Location of Asbestos-Containing Material (ACM)**

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (14)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout Levels C, B and A</td>
<td>X</td>
<td>Floor tiles and mastic</td>
<td>1,465 SF</td>
<td>X</td>
</tr>
<tr>
<td>Office A-TJ</td>
<td></td>
<td>Window Caulk</td>
<td>96 LF</td>
<td>X</td>
</tr>
<tr>
<td>Throughout Levels C, B and A</td>
<td></td>
<td>Duct work</td>
<td>1775 SF</td>
<td>X</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**
SERVICE TRANSPORT GROUP INC

**P municpality Number**
20980

**Disposal Date**

**Name of Registered Landfill**
G.R.O.W.S. NORTH LANDFILL

**City, State**
MORRISVILLE, PA 18067
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 8:16)

Date of Notification (1) 01 / 15 / 14
Name of Building Owner/Operator (2)
Princeton University-Office of Design and Construction

Agencies Notified
☐ EPA
☐ DOLWD 15L2
☐ DSHS 1579
☐ DCA (NJAC 5:23-6)
Type Notification
☐ Initial
☐ Amended
☐ Amendment #____
☐ Emergency (including justification)
☐ Cancellation
Street Address
200 Elm Dr.
City, State, Zip Code
Princeton, NJ 08544
Name of Contact
Robert Ortega
Telephone Number

Name of Facility Where Abatement is Taking Place (3)
Princeton University-Firestone Library

FACILITY INFORMATION

Street Address
Washington Rd
City (5)
Princeton
County (6)
MERCER
County Code (7) STATE USE ONLY

Name of Monitoring Firm Hired by Building Owner (8)
ATC Associates Inc.
ASCM No.

BRISTOL ENVIRONMENTAL, INC.

Name of Abatement Contractor (9)

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e., private and commercial buildings, homes, etc.)

Square Foot
9 of Floors
βldg. Age

Current Use (Prior if being demolished)
Library

Project Manager for Monitoring Firm
Michael Keehn
Telephone No.
609-394-2000

License No.
06009

Name of OSHA Monitor

BRISTOL ENVIRONMENTAL, INC.

Street Address
1123 BEAVER STREET
City, State, Zip Code
BRISTOL, PA 19007

Double Occupancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe
Time of Abatement: 7:00AM-3:30PM____PMT 5:00PM____AM

Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 ft
☐ ≥1800 sf or ≥2600 ft
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)
TO BE ABATED
IN Facility (13)

Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)
☐ Yes
☐ No
☐ N/A

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount
(Specify SF or LF)

Abatement Type

Removal
Repair
Encapsulate
Encapsulate

Throughout Levels C, B and A
☐ ☐ ☐ Floor tile and mastice 1,465 SF
☐ ☐ ☐ Window Caulk 96 LF
☐ ☐ ☐ Duct work 1775 SF

Office A-71
☐ ☐ ☐

Throughout Levels C, B and A
☐ ☐ ☐

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP INC
NJDEP Waste Hauler ID No. 20000

Cubic Yards of Waste

Name of Registered Landfill
G.R.O.W.S. NORTH LANDFILL

Disposal Date
City, State
NEW CASTLE, DE

MORRISVILLE, PA 19007
State of New Jersey

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>01 / 15 / 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td></td>
</tr>
<tr>
<td>Princeton University-Office of Design and Construction</td>
<td></td>
</tr>
<tr>
<td>Street Address</td>
<td></td>
</tr>
<tr>
<td>200 Elm Dr.</td>
<td></td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td></td>
</tr>
<tr>
<td>Princeton, NJ 08544</td>
<td></td>
</tr>
<tr>
<td>Name of Contact</td>
<td></td>
</tr>
<tr>
<td>Robert Ortega</td>
<td></td>
</tr>
<tr>
<td><strong>FACILITY INFORMATION</strong></td>
<td></td>
</tr>
<tr>
<td>Name of Facility Where Abatement is Taking Place (3)</td>
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</tr>
<tr>
<td>Princeton University-Firestone Library</td>
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<td>Street Address</td>
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<td>County Code (7)</td>
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<td>MER</td>
<td>00</td>
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<tr>
<td>Name of Monitoring Firm HIred by Building Owner (8)</td>
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</tr>
<tr>
<td>ATC Associates Inc.</td>
<td></td>
</tr>
<tr>
<td>ASCM No.</td>
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<tr>
<td>00098</td>
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<tr>
<td>Name of Abatement Contractor (9)</td>
<td></td>
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<tr>
<td>BRISTOL ENVIRONMENTAL, INC.</td>
<td></td>
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<tr>
<td>Street Address</td>
<td></td>
</tr>
<tr>
<td>1123 BEAVER STREET</td>
<td></td>
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<tr>
<td>City, State, Zip Code</td>
<td></td>
</tr>
<tr>
<td>Burlington, NJ 08016</td>
<td></td>
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<tr>
<td>Project Manager for Monitoring Firm</td>
<td></td>
</tr>
<tr>
<td>Michael Keehn</td>
<td></td>
</tr>
<tr>
<td>Telephone No.</td>
<td></td>
</tr>
<tr>
<td>609-356-8800</td>
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<tr>
<td>Scheduled Completion Date (11)</td>
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<tr>
<td>2 / 5 / 14</td>
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<tr>
<td>Occupancy Status During Abatement (Check only one)</td>
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<tr>
<td>Facility Closed/Vacated During Entire Period of Abatement</td>
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<tr>
<td>No</td>
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</tr>
<tr>
<td>Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:30AM-3:00PM/3:00PM-11:30AM</td>
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<tr>
<td>Yes</td>
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<tr>
<td>Scope of Work (Check all that apply)</td>
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</tr>
<tr>
<td>Renovation</td>
<td></td>
</tr>
<tr>
<td>Demolition</td>
<td></td>
</tr>
<tr>
<td>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</td>
<td></td>
</tr>
<tr>
<td>Throughout Levels C, B and A</td>
<td></td>
</tr>
<tr>
<td>Floortile and mastic</td>
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</tr>
<tr>
<td>71,198 SF</td>
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<tr>
<td>Throughout Levels C, B and A</td>
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<tr>
<td>Pipe Insulation</td>
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<tr>
<td>4,680 SF</td>
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<td>Throughout Levels B and A</td>
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<td>Joint Compound</td>
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<td>24,690 SF</td>
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<td>Throughout Level B</td>
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<td>Pipe Fittings</td>
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<td>20 LF</td>
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<tr>
<td>Name of Registered Waste Hauler</td>
<td></td>
</tr>
<tr>
<td>SERVICE TRANSPORT GROUP INC</td>
<td></td>
</tr>
<tr>
<td>NJDEP Waste Hauler ID No.</td>
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</tr>
<tr>
<td>20990</td>
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<tr>
<td>Cubic Yards of Waste</td>
<td></td>
</tr>
<tr>
<td>Name of Registered Landfill</td>
<td></td>
</tr>
<tr>
<td>G.R.O.W.S. NORTH LANDFILL</td>
<td></td>
</tr>
<tr>
<td>City, State</td>
<td></td>
</tr>
<tr>
<td>NEW CASTLE, DE</td>
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<tr>
<td>Disposal Date</td>
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<tr>
<td>City, State</td>
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<tr>
<td>MORRISVILLE, PA 19067</td>
<td></td>
</tr>
<tr>
<td>Completed By (Print or Type)</td>
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</tr>
<tr>
<td>Brian Scafiro</td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td></td>
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<tr>
<td>Estimator</td>
<td></td>
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<tr>
<td>Signature</td>
<td></td>
</tr>
<tr>
<td>Brian Scafiro</td>
<td></td>
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<tr>
<td>Date</td>
<td></td>
</tr>
<tr>
<td>4/25/14</td>
<td></td>
</tr>
</tbody>
</table>

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>01 / 15 / 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Princeton University-Office of Design and Construction</td>
</tr>
<tr>
<td>Name of Facility Where Abatement is Taking Place (3)</td>
<td>Princeton University-Firestone Library</td>
</tr>
<tr>
<td>Street Address</td>
<td>200 Elm Dr.</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Princeton, NJ 08544</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Robert Ortiga</td>
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<tr>
<td>FACILITY INFORMATION</td>
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<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
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<tr>
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<tr>
<td>Name of Abatement Contractor (9)</td>
<td>BRISTOL ENVIRONMENTAL, INC.</td>
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<tr>
<td>Project Manager for Monitoring Firm</td>
<td>Michael Keehn</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>609-386-6800</td>
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<td>Start Date (10)</td>
<td>2 / 5 / 14</td>
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<tr>
<td>Scheduled Completion Date (11)</td>
<td>4 / 25 / 14</td>
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<tr>
<td>Scope of Work (Check all that apply)</td>
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<td>Demolition</td>
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<td>2 or 3</td>
<td>Full Containment with Negative Pressure</td>
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<td>2 or 3</td>
<td>Mini-Enclosure</td>
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<tr>
<td>2 or 3</td>
<td>Glovebag Procedure</td>
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<tr>
<td>2 or 3</td>
<td>Non-Exempted (1) and Non-Rifiable Procedure</td>
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<tr>
<td>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</td>
<td></td>
</tr>
<tr>
<td>Is Location Normally Used Solely by Maintenance/Custodial Staff?</td>
<td>Yes</td>
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<tr>
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<td>N/A</td>
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<tr>
<td>Amount (Specify SF or LF)</td>
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<td>SERVICE TRANSPORT GROUP INC</td>
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<tr>
<td>NJ/DEP Waste Hauler ID No.</td>
<td>20990</td>
</tr>
<tr>
<td>Cubic Yards of Waste</td>
<td>20 LF</td>
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<tr>
<td>Name of Registered Landfill</td>
<td>G.R.O.W.S. NORTH LANDFILL</td>
</tr>
<tr>
<td>City, State</td>
<td>MORRISVILLE, PA 19067</td>
</tr>
<tr>
<td>Completed By (Print or Type)</td>
<td>Brian Scafiro</td>
</tr>
<tr>
<td>Title</td>
<td>Estimator</td>
</tr>
<tr>
<td>Signature</td>
<td>Brian Scafiro</td>
</tr>
<tr>
<td>Date</td>
<td>4/16/14</td>
</tr>
</tbody>
</table>
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:63 and 6:16)

Date of Notification (1)

Name of Building Owner/Operator (2)
Princeton University-Office of Design and Construction

Agencies Notified
- EPA
- DOLWD
- DHSS
- DCA (NJAC 5:23-8)

Type Notification
- Initial
- Amended
- Amendment #5-4/3/14
- Emergency (including justification)
- Cancellation

Street Address
200 Elm Dr.

City, State, Zip Code
Princeton, NJ 08544

Name of Contact
Robert Ortega

Facility Information

Name of Facility Where Abatement is Taking Place (3)
Princeton University-Firestone Library

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

Name of Monitoring Firm Hired by Building Owner (8)
ATC Associates Inc.

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.
215-789-8040

License No.
00509

Occupancy Status During Abatement (Check only one)
Facility Closed/Vacated During Entire Period of Abatement
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:30AM-3:00PM/3:00PM-11:30AM

Scope of Work (Check all that apply)
- ≥3 sf or ≥3 if
- ≥160 sf or ≥260 if
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)
TO BE ABATED
IN Facility

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
Amount (Specify SF or LF)

Abatement Type

Endure

Repair

Encapsulate

Endure

Endure

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP INC

City, State
NEW CASTLE, DE

NUDEP Waste Hauler ID No.
209890

Cubic Yards of Waste

Name of Registered Landfill
G.R.O.W.S. NORTH LANDFILL

City, State
MORRISVILLE, PA 19067

Completed By (Print or Type)
Rahman Saeed

Title

Signature

Date
<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>01</th>
<th>/</th>
<th>15</th>
<th>/</th>
<th>14</th>
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<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
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<td></td>
<td></td>
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<tr>
<td>City, State, Zip Code</td>
<td>Princeton, NJ 08544</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Robert Onta</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement is Taking Place (3) | Princeton University-Firestone Library |
| Street Address | Washington Rd |
| City (5) | Princeton |
| County (6) | MERCER |

| Name of Monitoring Firm Hired by Building Owner (8) | ATC Associates Inc. |
| Street Address | Three Terr Center |
| City, State, Zip Code | Burlington, NJ 08016 |
| Project Manager for Monitoring Firm | Michael Kuehn |
| Telephone No. | 609-386-8900 |

| Start Date (10) | 2 / 5 / 14 |
| Scheduled Completion Date (11) | 4 / 4 / 14 |

| Occupancy Status During Abatement (Check only one) |
| ☐ Facility Closed/Vacated During Entire Period of Abatement |
| ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:30AM-3:00PM, 6:00PM-11:30AM |
| ☒ Double Shift 8/5/14 - 3/4/14 |

| Scope of Work (Check all that apply) |
| ☐ ≥3 sf or ≥3 ft |
| ☒ 150 sf or ≥200 ft |
| ☒ Renovation |
| ☐ Demolition |

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility**

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout Levels C, B and A</td>
<td>☒</td>
<td>Flooirtile and mastie</td>
<td>71,198 SF</td>
<td>☒</td>
</tr>
<tr>
<td>Throughout Levels C, B and A</td>
<td>☒</td>
<td>Pipe insulation</td>
<td>4,660 SF</td>
<td>☒</td>
</tr>
<tr>
<td>Throughout Levels B and A</td>
<td>☒</td>
<td>Joint Compound</td>
<td>24,680 SF</td>
<td>☒</td>
</tr>
<tr>
<td>Throughout Level B</td>
<td>☒</td>
<td>Pipe Fittings</td>
<td>20 LF</td>
<td>☒</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**

<table>
<thead>
<tr>
<th>SERVICE TRANSPORT GROUP INC</th>
</tr>
</thead>
</table>

| City, State | NEW CASTLE, DE |

<table>
<thead>
<tr>
<th>NJDEP Waste Hauler ID No.</th>
<th>20980</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cubic Yards of Waste</td>
<td></td>
</tr>
<tr>
<td>Name of Registered Landfill</td>
<td>G.R.O.W.S. NORTH LANDFILL</td>
</tr>
<tr>
<td>Disposal Date</td>
<td></td>
</tr>
<tr>
<td>City, State</td>
<td></td>
</tr>
</tbody>
</table>

**Abatement Type**

| Type of Abatement (4) |
|☐ School (K-12) |
|☐ Subchapter 8 (Other than K-12) |
|☐ Other (i.e., private and commercial buildings, homes, etc.) |
|☐ Emergency (including justification) |
|☐ Cancellation |

| Current Use (Prior if being demolished) |
|☐ Library |
|☐ School |
|☐ Private/Commercial Buildings |
|☐ Other |

| License No. | 00509 |
| Telephone No. | 215-708-6040 |
| Street Address | 1123 BEAVER STREET |
| City, State, Zip Code | BRISTOL, PA 19007 |

**Name of Abatement Contractor (9)**

<table>
<thead>
<tr>
<th>BRISTOL ENVIRONMENTAL, INC.</th>
</tr>
</thead>
</table>

| Telephone No. | 609-886-8900 |
| License No. | 00509 |
| Street Address | 1123 BEAVER STREET |
| City, State, Zip Code | BRISTOL, PA 19007 |

**Name of OSHA Monitor**

<table>
<thead>
<tr>
<th>BRISTOL ENVIRONMENTAL, INC.</th>
</tr>
</thead>
</table>

| Telephone No. | 609-886-8900 |
| License No. | 00509 |
| Street Address | 1123 BEAVER STREET |
| City, State, Zip Code | BRISTOL, PA 19007 |
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 8:16)

Date of Notification (1) 01 / 15 / 14

Name of Building Owner/Operator (2)
Princeton University-Office of Design and Construction

Name of Facility Where Abatement is Taking Place (3)
Princeton University-Firestone Library

FACILITY INFORMATION

Street Address
Washington Rd

City (5)
Princeton

County (6)
MERcer

Name of Monitoring Firm Hired by Building Owner (8)
ATC Associates Inc.

ASCM No. 00098

Name of Abatement Contractor (9)
BRISTOL ENVIRONMENTAL, INC.

Street Address
Three Terri Center

City, State, Zip Code
Burlington, NJ 08016

Telephone No.
609-396-8900

Telephone No.
216-798-8940

Name of OSHA Monitor
BRISTOL ENVIRONMENTAL, INC.

Street Address
1123 BEAVER STREET

City, State, Zip Code
BRISTOL, PA 19007

Start Date (10) 2 / 5 / 14

Scheduled Completion Date (11) 4 / 4 / 14

Occupancy Status During Abatement (Check only one)

☐ Facility Closed/ Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:30AM - 3:30PM 4/3 - 4/4/14

Scope of Work (Check all that apply)

☐ ≥ 300 sf or ≥ 300 ft
☐ ≥ 1600 sf or ≥ 280 ft

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP INC

NJDEP Waste Hauler ID No. 20880

Cubic Yards of Waste 20

Name of Registered Landfill
G.R.O.W.S. NORTH LANDECK

Location Normally Used Solely by Maintenance/ Custodial Staff? (12)

Yes ☒ No ☐ N/A ☐

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount ($ or EFL)

Abatement Type

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

Summation

Throughout Levels C, B and A ☐ ☐ ☐ Floo tile and mast ic ☒ 74,180 SF ☐ ☐ ☐

Throughout Levels B and A ☐ ☐ ☐ Pipe insulation 4,880 SF ☐ ☐ ☐

Throughout Level B ☐ ☐ ☐ Joint Compound 24,690 SF ☐ ☐ ☐

Throughout Levels C, B and A ☐ ☐ ☐ Pipe Fittings 20 LF ☐ ☐ ☐
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 8:16)

**Date of Notification (1)**
- 01 / 16 / 14

**Name of Building Owner/Operator (2)**
- Princeton University-Office of Design and Construction

**Name of Facility Where Abatement is Taking Place (3)**
- Princeton University-Princeton Library

**Street Address**
- Washington Rd

**City (5)**
- Princeton

**County (6)**
- MERCER

**Name of Monitoring Firm Hired by Building Owner (8)**
- ATC Associates Inc.

**ASCM No.**
- 00088

**Name of Abatement Contractor (9)**
- BRISTOL ENVIRONMENTAL, INC.

**Street Address**
- 1123 BEAVER STREET

**City, State, Zip Code**
- BRISTOL, PA 19007

**Project Manager for Monitoring Firm**
- Michael Keenan

**Telephone No.**
- 609-386-8900

**License No.**
- 00008

**Start Date (10)**
- 02 / 05 / 14

**Scheduled Completion Date (11)**
- 04 / 04 / 14

**Occupancy Status During Abatement**
- [ ] Facility Closed/Vacated During Entire Period of Abatement
- [x] Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 8:00AM-2:00PM
- [ ] PM-6:00AM
- [ ] AM-8:00AM

**Scopes of Work (Check all that apply)**
- [x] Demolition
- [ ] Renovation
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebox Procedure
- [ ] Non-Exempted (*) and Non-Flammable Procedure

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)**

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Floo tile and mastic</td>
<td>71,198 SF</td>
</tr>
<tr>
<td>Pipe insulation</td>
<td>4,880 SF</td>
</tr>
<tr>
<td>Joint Compound</td>
<td>24,680 SF</td>
</tr>
<tr>
<td>Pipe Fittings</td>
<td>20 LF</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**
- SERVICE TRANSPORT GROUP INC

**City, State**
- City of Princeton, NJ 08544

**Telephone Number**
- 201-799-6040

**Name of Contact**
- Robert Ortiza

**Square Feet**
- 6 of Floors

**Building Age**
- 00008
## Notification of Asbestos Abatement

### (Pursuant to NJAC 8:90 and 8:10)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>01 16 14</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Princeton University Office of Design and Construction</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
</tr>
<tr>
<td>DOHWD</td>
<td>Amended</td>
</tr>
<tr>
<td>DHSS</td>
<td>Amendment 01-12-14</td>
</tr>
<tr>
<td>DCA (NJAC 8:23-6)</td>
<td>No</td>
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</table>

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Princeton University: Firestone Library</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FACILITY INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Type (4)</td>
</tr>
<tr>
<td>School (K-12)</td>
</tr>
<tr>
<td>Subchapter 8 (Other than K-12)</td>
</tr>
<tr>
<td>Other (i.e., private and commercial buildings, homes, etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATC Associates Inc.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥30 ft. or ≥30 f.</td>
</tr>
<tr>
<td>≥160 ft. or ≥280 ft.</td>
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<table>
<thead>
<tr>
<th>Description of Asbestos-Containing Material (ACM)</th>
</tr>
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<tbody>
<tr>
<td>I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Amount (Specify SF or L.F.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>71,180 SF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>Mini-Enclosure</td>
</tr>
<tr>
<td>Non-Demolition Procedures</td>
</tr>
<tr>
<td>Non-Permissible Enforcement</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of ACM to be Abated (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout Levels C, B and A</td>
</tr>
<tr>
<td>Throughout Levels C, B and A</td>
</tr>
<tr>
<td>Throughout Levels B and A</td>
</tr>
<tr>
<td>Throughout Level B</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>SERVICE TRANSPORT GROUP INC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone Number</th>
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<tbody>
<tr>
<td>609-329-9800</td>
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<tr>
<th>License No.</th>
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<tr>
<td>00509</td>
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<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michael Keown</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Start Date (10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(OFF SITE UNIL) 4/4/14</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Abatement Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRISTOL ENVIRONMENTAL, INC.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of CEPA Monitor</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRISTOL ENVIRONMENTAL, INC.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County Code (7)</th>
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</thead>
<tbody>
<tr>
<td>BERK</td>
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<table>
<thead>
<tr>
<th>License No.</th>
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<tbody>
<tr>
<td>00509</td>
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<table>
<thead>
<tr>
<th>Contact Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert Cortina</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone Number</th>
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<tbody>
<tr>
<td>609-828-9000</td>
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<table>
<thead>
<tr>
<th>Status during Abatement (Check only one)</th>
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</thead>
<tbody>
<tr>
<td>Facility Closed/ Vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>Abatement Performed Outside of Normal Facility Hours - Describe</td>
</tr>
<tr>
<td>Time of Abatement: 7:00AM-3:00PM, Pm-AM</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of ACM to be Abated (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout Levels C, B and A</td>
</tr>
<tr>
<td>Throughout Levels C, B and A</td>
</tr>
<tr>
<td>Throughout Levels B and A</td>
</tr>
<tr>
<td>Throughout Level B</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>SERVICE TRANSPORT GROUP INC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 LF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Laboratories</th>
</tr>
</thead>
<tbody>
<tr>
<td>NDEP Waste Hauler ID No.</td>
</tr>
<tr>
<td>Cubic Yards of Waste</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description of ACM (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Floortile and mastic</td>
</tr>
<tr>
<td>Pipe insulation</td>
</tr>
<tr>
<td>Joint Compound</td>
</tr>
<tr>
<td>Pipe Fittings</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>Mini-Enclosure</td>
</tr>
<tr>
<td>Non-Demolition Procedures</td>
</tr>
<tr>
<td>Non-Permissible Enforcement</td>
</tr>
</tbody>
</table>
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:50 and 8:60)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>01 / 15 / 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency Notified</td>
<td>EPA 1442, DOLM 2562, DMSS 6519, DCA 1944 (NJAC 8:23-6)</td>
</tr>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Princeton University-Office of Design and Construction</td>
</tr>
<tr>
<td>Street Address</td>
<td>200 Eiman Dr.</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Princeton, NJ 08544</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Robert Grzezko</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>609-452-8000</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement Is Taking Place (3)</th>
<th>Princeton University-Princeton Library</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>Washington Rd</td>
</tr>
<tr>
<td>City (8)</td>
<td>Princeton</td>
</tr>
<tr>
<td>County (9)</td>
<td>MERCER</td>
</tr>
<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
<td>ATC Associates Inc.</td>
</tr>
<tr>
<td>Street Address</td>
<td>Three Terr Center</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Burlington, NJ 08010</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>Michael Kochen</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>609-386-8900</td>
</tr>
<tr>
<td>License No.</td>
<td>216-786-0040</td>
</tr>
<tr>
<td>Name of OSHA Monitor</td>
<td>BRUSTCL ENVIRONMENTAL, INC.</td>
</tr>
<tr>
<td>Street Address</td>
<td>1123 BEAVER STREET</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>BRUSTCL, PA 18097</td>
</tr>
</tbody>
</table>

**Scope of Work (Check all that apply)**

- [ ] 25 ft or 35 ft
- [ ] 100 ft or 250 ft
- [ ] Renovation
- [ ] Demolition

**Location of Asbestos-Containing Material (ACM)**

- Throughout Levels C, B and A
- Throughout Levels B and A
- Throughout Level D

**Description of ACM**

- Asbestos Containing Material (ACM), (i.e., thermal insulation, surfacing, VAT, or other miscellaneous)

**Abatement Type**

- Removal
- Repair
- Encapsulation

**Amount**

- 1,100 SF
- 4,800 SF
- 34,000 SF

**Abatement Type**

- Removal
- Repair
- Encapsulation

**Date of Notification**

- 01/15/14

**Street Address**

- 200 Eiman Dr., Princeton, NJ 08544

**Telephone Number**

- 609-452-8000

**License No.**

- 216-786-0040

**Name of OSHA Monitor**

- BRUSTCL ENVIRONMENTAL, INC.

**Street Address**

- 1123 BEAVER STREET, BRUSTCL, PA 18097
# State of New Jersey
## NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>4 / 24 / 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Mr. Daniel Bills / Job # 1404-1871 Chk. #</td>
</tr>
</tbody>
</table>

### FACILITY INFORMATION

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Residential Property</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>608 Lincoln Avenue</td>
</tr>
<tr>
<td>City (5)</td>
<td>Collingswood</td>
</tr>
<tr>
<td>County (6)</td>
<td>Camden</td>
</tr>
<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
<td>Horizon Environmental</td>
</tr>
<tr>
<td>ASCM No.</td>
<td></td>
</tr>
<tr>
<td>Name of Abatement Contractor (9)</td>
<td>Asbestos and Mold Services, Corp.</td>
</tr>
<tr>
<td>Street Address</td>
<td>3859 Sylon Boulevard</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Hainesport, NJ 08036</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>609-702-0400</td>
</tr>
<tr>
<td>License No.</td>
<td>00882</td>
</tr>
</tbody>
</table>

| Start Date (10) | 05 / 07 / 14 |
| Scheduled Completion Date (11) | 05 / 09 / 14 |

### Scope of Work (Check all that apply)

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

### Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)

| Attic | Vermiculite Insulation 230 SF |

### Name of Registered Waste Hauler
Freehold Cartage, Inc.

| Name of Registered Landfill | GROWS Landfill |

| City, State | Freehold, NJ |
| Disposal Date | 5/10/14 |
| City, State | Morrisville, PA 19067 |

### Completed By (Print or Type)
Kimberly A. Trumbetti
Title: Office Coordinator

*Do not use this form for asbestos licensure exempted activities.*
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification: 4/25/14

Name of Building Owner/Operator: Borough of Keansburg
Address: 39 Church St
City, State, Zip Code: Keansburg, NJ 07734
Name of Contact: Ed Streidl
Telephone Number

Name of Facility Where Abatement is Taking Place:
FEMA PPDR - Sandy-Related Demolition

Street Address: Sea Breeze Way
City: Keansburg
County: Monmouth

Type of Facility:
- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e., private & commercial buildings, homes, etc.)

Square Feet: 3000

# of Floors: 1
Bldg. Age: 70 yrs

Name of Monitoring Firm Hired by Building Owner:
Consulting Services of America, Inc.

ASCM No.

Name of Abatement Contractor: Yannuzzi Environmental Services
Address: 152 Rt 206 South
City, State, Zip Code: Hillsborough, NJ 08844
Name of OSHA Monitor:
Yannuzzi Environmental Services
Address: 152 Rt 206 South
City, State, Zip Code: Hillsborough, NJ 08844

Start Date: 4/26/14
Scheduled Completion Date: 5/7/14

Occupancy Status During Abatement:
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

Scope of Work:
- ≥3 sf or ≥3 if
- ≥160 sf or ≥260 if
- Renovation Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) in Facility:

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>H.A. Front Interior Porch Floor</td>
<td>X Tar Paper</td>
<td>70 SF</td>
</tr>
<tr>
<td>H.A. Exterior Wall Siding</td>
<td>X Transite Siding Shingles</td>
<td>20 SF</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler: Yannuzzi & Sons, Inc.
NJDEP Waste Hauler ID No.: 17467
Cubic Yards of Waste: 2
Disposal Date: 5/7/14
City, State: Hillsborough, NJ

Name of Registered Landfill: Grand Central Sanitation
Disposal Site: Pen Argyl, PA

Completed By: Marc Mayerson
Title: Project Manager
Signature: [Signature]
Date: 4/25/14

* Do not use this form for asbestos licensure exempted activities.
State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1):

Name of Building Owner/Operator (2):
mary ramsdell c/o jane certo

Street Address:

Agencies Notified:

EPA □ □ Initial
DEP □ □ Amended
DOL □ □ Amendment #:
DOH □ □ Emergency
DCA □ □ Cancellation

City, State, Zip Code:
RIDGEWOOD, NJ 07450

Name of Contact:
mary ramsdell c/o jane certo

Telephone Number:

FACILITY INFORMATION

Name of facility where abatement is taking place (3):
mary ramsdell c/o jane certo

County (6):
BERGEN

County Code (7) (State use only):

Type of Facility (4):
School (K - 12) □
Subchapter 8 (Other than K-12) □
Other (Private/Commercial Bldgs/Homes, etc.) X

Square Feet:

# of Floors:

Bldg. Age:

Current Use (Prior if being demolished):

Name of Abatement Contractor (9):
D & S RESTORATION, INC.

Street Address:
20 California Ave.

City, State, Zip Code:
Paterson, NJ 07503

License Number:
01169

Project Manager for Monitoring Firm:

Phone Number:
973-345-8020

Name of OSHA Monitor:
D & S Restoration, Inc.

Start Date (10):
05/05/14

Occupancy Status During Abatement (Check only one):
Facility closed/vacated during entire period of abatement.
Abatement performed outside of normal facility hours:
Other: NORMAL HOURS

Sched. Completion Date (11):
05/28/14

Scope of Work (check all that apply):
>2 sf or >3 if
20 sf or >260 sf
Renovation
Demolition

Location of asbestos-containing material (acm) to be abated in facility (15):

Yes No N/A

Location normally used solely by maintenance/custodial staff:

BASEMENT

Description of asbestos-containing material (ACM):

PIPE INSULATION

Amount (Specify SF or LF):
45 LF

Full Containment with negative pressure:

Mini-enclosure:

Glovebag procedure:

Non-Exempted (*) and Non-liable procedure:

Registered Waste Hauler:
D & S RESTORATION, INC.
NJDEP Hauler ID:
13506
Cubic Yards of Waste:
2 YDS
Name of Registered Landfill:
TULLY TOWN RESOURCE RECOVERY

City, State:
Paterson, NJ 07503

Disposal Date:
05/06/14

Completed by (Print or Type):
BOGDAN JOLDA
Title:
PRESIDENT
Signature:

Date:
04/23/2014
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)
04 / 25 / 14

Name of Building Owner/Operator (2)
Peter Moriello

Agencies Notified
☐ EPA
☐ DOLWD
☒ DOH
☐ DCA
(NJAC 5:23-8)

Type Notification
☐ Initial
□ Amended
□ Amendment #
□ Emergency (including justification)
□ Cancellation

Street Address
1117 Summit Terrace

City, State, Zip Code
Linden, NJ 07036

Name of Contact
Peter Moriello

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Residential House

Street Address
154/155 Mountain Avenue

City (5)
Springfield

County (6)
Union

Name of Monitoring Firm Hired by Building Owner (8)
J & S Environmental Laboratories, LLC

ASCM No.

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)

Name of Abatement Contractor (9)
ALL PRO MANAGEMENT LLC

Street Address
27 Outwater Lane

City, State, Zip Code
Garfield, NJ 07026

Name of OSHA Monitor
ALL PRO MANAGEMENT LLC

Start Date (10)
05 / 05 / 14

Scheduled Completion Date (11)
06 / 06 / 14

Occupancy Status During Abatement (Check only one)
☒ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-PM/PM-AM

Name of OSHA Monitors

Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 ft
☐ ≥160 sf or ≥260 ft
☐ Renovation
☒ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes ☒ No ☐ N/A ☐

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)
300 SF

Abatement Type
☐ Removal
☒ Regrout
☐ Encapsulation

Name of Registered Waste Hauler
ALL PRO MANAGEMENT LLC

NUDEP Waste Hauler ID No.
0034860

Cubic Yards of Waste
As Needed

Name of Registered Landfill
IESI Landfill

City, State
Garfield, NJ

Disposal Date
TBD

City, State
Bethlehem, PA

Completed By (Print or Type)
Zvonko Veskov

Title
President

Signature

Date
4/25/14

* Do not use this form for asbestos density exempted activities.
**State of NJ**  
**Notification of Asbestos Abatement**  
(Pursuant to NJAC 8:60-7 and 12:120-7)

**Former Gas Station**

**Name of Building Owner/Operator**: First Hartford Realty Corp.  
**Street Address**: 149 Colonial Road  
**City, State, Zip Code**: Manchester, Connecticut 06042  
**Name of Contact**: Steve Menzer

**FACILITY INFORMATION**

**Name of facility where abatement is taking place**: Former Gas Station

**Street Address**: 111 Speedwell Avenue  
**City (5)**: Morristown  
**County Code**: Morris

**Name of Abatement Contractor**: B & G Restoration, Inc.  
**Street Address**: 105 Ryerson Road  
**City, State, Zip Code**: Lincoln Park, NJ 07035  
**License Number**: 0378

**Scheduled Start Date**: 05/05/2014  
**Sched. Completion Date**: 05/30/2014

**Occupancy Status During Abatement**: Facility closed/vacated during entire period of abatement.

**Scope of Work**:  
- Demolition
- Exterior windows
- Exterior window units
- Exterior Metal Wall
- Exterior roof area

**Location of material to be abated**:

<table>
<thead>
<tr>
<th>Location</th>
<th>Is location normally used solely by maintenance/custodial staff?</th>
<th>Description of asbestos-containing material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>Removal</th>
<th>Repair</th>
<th>Encapsulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exterior windows</td>
<td>Yes</td>
<td>Exterior window glazing (1 window)</td>
<td>63 sf</td>
<td>🟠</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior window units</td>
<td>Yes</td>
<td>Window caulk (1 window)</td>
<td>20 sf</td>
<td>🟠</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior Metal Wall</td>
<td>Yes</td>
<td>Exterior wall panel caulk</td>
<td>388 sf</td>
<td>🟠</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior roof area</td>
<td>Yes</td>
<td>Perimeter roof flashing</td>
<td>1,297 sf</td>
<td>🟠</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Registered Waste Hauler**:  
**B & G Restoration, Inc.**  
**Hauler ID**: 19563  
**Disposal Date**: 5/5/2014 - 6/01/2014

**Name of Registered Landfill**: Tullytown Resource & Recovery Center  
**City, State**: Lincoln Park, PA

**Completed by**: Gordana Luna  
**Title**: Secretary/Treasurer  
**Signature**: Gordana Luna  
**Date**: 04/25/2014
State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #: 2014-65
Garage (rear of building)

Date of Notification (1)
1/24/14

Agencies Notified Type Notification
☐ EPA Initial
☐ DEP
☐ DOL Amendment
☐ DOH Cancellation
☐ DCA

Name of Building Owner/Operator (2)
First Hartford Realty Corp.

Street Address
149 Colonial Road

City, State, Zip Code
Manchester, Connecticut 06042

Name of Contact
Steve Menzer

Telephone Number

FACILITY INFORMATION

Name of facility where abatement is taking place (3)
Garage (rear of building)

Street Address
115 Spring Street

City, State, Zip Code
Morristown, NJ 07960

County Code (7) (State use only)
Morris

Name of Monitoring Firm Hired by Bldg. Owner (8)
N/A

Name of Abatement Contractor (9)
B & G Restoration, Inc.

Street Address
105 Ryerson Road

City, State, Zip Code
Lincoln Park, NJ 07035

Telephone Number
973-696-6869

License Number
0378

Name of OSHA Monitor
B & G Restoration, Inc.

Street Address
105 Ryerson Road

City, State, Zip Code
Lincoln Park, NJ 07035

Occupancy Status During Abatement (Check only one)
☐ Facility closed/vacated during entire period of abatement.
☐ Abatement performed outside of normal facility hours.

Describe:

Scope of Work (check all that apply)
☐ Demolition
☐ Renovation
☐ Full Containment w/negative pressure
☐ Mini-enclosure
☐ >100 sf or >260 sf
☐ <100 sf or <=260 sf
☐ Non-Friable procedure
☐ Wrap & cut

Location of asbestos-containing material to be abated in facility (13)

Exterior windows
Exterior window units
Exterior Door Units
Exterior roof area

Registered Waste Hauler
B & G Restoration, Inc.

Name of Registered Landfill
Tullytown Resource & Recovery Center

City, State
Lincoln Park, NJ 07035

Disposal Date
5/5/2014 - 6/1/2014

Completed by (Print or Type)
Gordana Luna

Title
Secretary/Treasurer

Signature

Date
04/25/2014
### FACILITY INFORMATION

<table>
<thead>
<tr>
<th>Name of facility where abatement is taking place (3)</th>
<th>Former Blockbuster store</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>117 Speedwell Avenue</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Morristown, NJ 07980</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Building Owner/Operator (2)</th>
<th>First Hartford Realty Corp.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>149 Colonial Road</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Manchester, Connecticut 06042</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Contact</th>
<th>Steve Menzer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Abatement Contractor (9)</th>
<th>B &amp; G Restoration, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>105 Ryerson Road</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Lincoln Park, NJ 07035</td>
</tr>
</tbody>
</table>

| License Number                    | 0378                        |

<table>
<thead>
<tr>
<th>Name of OSHA Monitor</th>
<th>B &amp; G Restoration, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>105 Ryerson Road</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Lincoln Park, NJ 07035</td>
</tr>
</tbody>
</table>

### Scope of Work (check all that apply)

- Demolition
- Renovation
- > 3 sf or > 3 if
- > 160 sf or > 260 if

### Scope of Work Description

Location of asbestos-containing material to be abated in facility (13)

<table>
<thead>
<tr>
<th>Location of asbestos-containing material to be abated in facility (13)</th>
<th>Is location normally used solely by maintenance/custodial staff (12)</th>
<th>Description of asbestos-containing material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>R E M O V E</th>
<th>R E P A I R</th>
<th>R E N O V A T I O N</th>
<th>E N C L O S E R</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exterior windows</td>
<td>x</td>
<td>Window glazing (33 windows)</td>
<td>924 lf</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior window units</td>
<td>x</td>
<td>Window caulking (38 windows)</td>
<td>654 lf</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior Brick Wall</td>
<td>x</td>
<td>Exterior Brick Wall</td>
<td>364 sf</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior roof areas</td>
<td>x</td>
<td>Exterior roof areas</td>
<td>2,040 sf</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registered Waste Hauler</td>
<td>x</td>
<td>Window caulking (38 windows)</td>
<td>924 lf</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Other-Describe:**

- Full Containment w/negative pressure
- Glovebag procedure
- Non-frangible procedure

### Disposal Date

City, State, Date

- Lincoln Park, NJ 07035
- Tullytown Resource & Recovery Center
- 5/5/2014 - 6/1/2014
- Tullytown, PA
- 04/25/2014

****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

Project start date: 05/05/2014

The following materials shall be abated:

<table>
<thead>
<tr>
<th>Location of asbestos-containing material to be abated in facility</th>
<th>Is location normally used solely by maintenance / custodial staff</th>
<th>Description of ACM</th>
<th>Amount (LF or SF)</th>
<th>Remove</th>
<th>Repair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>NO</td>
<td>Pipe insulation</td>
<td>20 LF</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>1st floor area</td>
<td>NO</td>
<td>Pipe insulation</td>
<td>30 LF</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>1st fl. carpet storage area</td>
<td>NO</td>
<td>VAT &amp; mastic</td>
<td>196 SF</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Carpet storage area</td>
<td>NO</td>
<td>Safes</td>
<td>2 safes</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
State of NJ  
Notification of Asbestos Abatement  
(Pursuant to NJAC 8:60-7 and 12:120-7)  
Check #6515

**Date of Notification (1)**  
04/12/11

**Name of Building Owner/Operator (2)**  
Myrna J Weissman

**Street Address**  
1611 Summit Avenue

**City, State, Zip Code**  
Hillside, NJ 07205

**Name of Contact**  
Myrna J Weissman

**Facility Information**

**Name of facility where abatement is taking place (3)**  
Myrna J Weissman

**Street Address**  
1611 Summit Avenue

**City (5)**  
Hillside, NJ 07205

**County (6)**  
Union

**County Code (7)**  
(State use only)

**Type of Facility (4)**  
☑ Other (Private/Commercial Bldgs./Homes, etc.)

**Square Feet**  

**# of Floors**  

**Bldg. Age**  

**Current Use (Prior if being demolished)**  
residential

**Type of Abatement Contractor (9)**  
B & G Restoration, Inc.

**Street Address**  
105 Ryerson Road

**City, State, Zip Code**  
Lincoln Park, NJ 07035

**Telephone Number**  
973-696-6869

**License Number**  
0378

**Name of OSHA Monitor**  
B & G Restoration, Inc.

**Street Address**  
105 Ryerson Road

**City, State, Zip Code**  
Lincoln Park, NJ 07035

**Occupancy Status During Abatement (Check only one)**  
☑ Facility closed/vacated during entire period of abatement.

**Facility closed/vacated during entire period of abatement.**

**Other-Describe:**

**Scope of Work (check all that apply)**  

**Demolition**  

**Renovation**  

**≥3 sf or ≥3 if**  

**≥160 sf or ≥260 if**

**Location of asbestos-containing material to be abated in facility (13)**  
basement  
X  pipe insulation

**Description of asbestos-containing material (ACM)**  

**Amount (Specify SF or LF)**  
52 if

**Removal**  

**Repair**  

**Encapsulation**  

**Registered Waste Hauler**  
B & G Restoration, Inc.

**NJDEP Hauler ID #**  
19563

**Cubic Yards of Waste**  
1

**Name of Registered Landfill**  
Tullytown Resource & Recovery Center

**City, State**  
Lincoln Park, PA

**Disposal Date**  
05/07/2014

**Completed by (Print or Type)**  
Gordana Luna

**Title**  
Secretary/Treasurer

**Signature**  
Gordana Luna

**Date**  
04/25/2014
**State of NJ**
**Notification of Asbestos Abatement**
(Pursuant to NJAC 8:60-7 and 12:120-7)

**Date of Notification (1)**

| 104125114 |

**Name of Building Owner/Operator (2)**

| Daniel Miller | APR 10 2014 |

** Agencies Notified**

- [ ] EPA
- [ ] DEP
- [x] DOL
- [ ] DOH
- [ ] DCA

**Type Notification**

- [x] Initial
- [ ] Amendment
- [ ] Cancellation

**Street Address**

| 60 Lake Road |

**City, State, Zip Code**

| Basking Ridge, NJ 07920 |

**Name of Contact**

| Daniel Miller |

**FACILITY INFORMATION**

**Name of facility where abatement is taking place (3)**

| Daniel Miller |

**Street Address**

| 60 Lake Road |

**City (5)**

| Basking Ridge, NJ 07920 |

**County (6)**

| Somerset |

**County Code (7)**

| (State use only) |

**Name of Monitoring Firm Hired by Bldg Owner (8)**

| N/A |

**ASCM No.**

| |

**Name of Abatement Contractor (9)**

| B & G Restoration, Inc. |

**Street Address**

| 105 Ryerson Road |

**City, State, Zip Code**

| Lincoln Park, NJ 07035 |

**Telephone Number**

| 973-696-6869 |

**License Number**

| 0378 |

**Type of Facility (4)**

- [ ] School (K-12)
- [x] Subchapter B (Other than K-12)
- [x] Other (Private/Commercial Bldgs/Homes, etc.)

**Square Feet**

| |

**# of Floors**

| |

**Bldg Age**

| |

**Current Use (Prior if being demolished)**

- [ ] Residential

**Occupancy Status During Abatement (Check only one)**

- [x] Facility closed/vacated during entire period of abatement.
- [ ] Abatement performed outside of normal facility hours.

**Description:**

| |

**Scheduled Start Date (10)**

| 05/05/2014 |

**Sched. Completion Date (11)**

| 05/06/2014 |

**Scope of Work (check all that apply)**

- [ ] Demolition
- [x] Renovation

**>3 sf or >3 If**

- [x] ≥160 sf or ≥260 If

**Location of asbestos-containing material to be abated in facility (13)**

<table>
<thead>
<tr>
<th><strong>Yes</strong></th>
<th><strong>No</strong></th>
<th><strong>N/A</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>crawlspace</strong></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>garage area</strong></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>2nd floor bedroom</strong></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Description of asbestos-containing material (ACM)**

| **pipe insulation** | 72 If |
| **pipe insulation** | 36 If |
| **VAT** | 150 sf |

**Accounting of Material Removal (Specify SF or LF)**

<table>
<thead>
<tr>
<th><strong>Removal</strong></th>
<th><strong>Repair</strong></th>
<th><strong>Encap</strong></th>
<th><strong>Enc</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Location of Waste Hauler**

<table>
<thead>
<tr>
<th>B &amp; G Restoration, Inc.</th>
<th>NJDEP Hauler ID#</th>
<th>Cubic Yards of Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>19563</td>
<td>2 ½</td>
<td></td>
</tr>
</tbody>
</table>

**Name of Registered Landfill**

| Tullytown Resource & Recovery Center |

**City, State**

| Lincoln Park, NJ 07035 |

**Disposal Date**

| 05/07/2014 |

**Completed by (Print or Type)**

| Gordana Luna |

**Title**

| Secretary/Treasurer |

**Signature**

| Gordana Luna |

**Date**

| 04/25/2014 |
## NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

### FACILITY INFORMATION

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Verizon Waverly CO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>224-240 Lyons Ave.</td>
</tr>
<tr>
<td>City (5)</td>
<td>Newark</td>
</tr>
<tr>
<td>County (6)</td>
<td>Essex</td>
</tr>
<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
<td>USA Environmental</td>
</tr>
<tr>
<td>Name of Abatement Contractor (9)</td>
<td>AbateTech, Inc.</td>
</tr>
<tr>
<td>Street Address</td>
<td>8436 Enterprise Ave.</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Philadelphia, PA 19153</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>Mark Jenkins</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>215-365-5910</td>
</tr>
<tr>
<td>Start Date (10)</td>
<td>05/05/14</td>
</tr>
<tr>
<td>Scheduled Completion Date (11)</td>
<td>05/06/14</td>
</tr>
<tr>
<td>Occupancy Status During Abatement (Check only one)</td>
<td></td>
</tr>
<tr>
<td>☐ Facility Closed/Vacated During Entire Period of Abatement</td>
<td></td>
</tr>
<tr>
<td>☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-PM/FM-PM: 5:00PM-1:30AM</td>
<td></td>
</tr>
<tr>
<td>Scope of Work (Check all that apply)</td>
<td></td>
</tr>
<tr>
<td>☒ Renovation</td>
<td></td>
</tr>
<tr>
<td>☒ Demolition</td>
<td></td>
</tr>
<tr>
<td>☐ Full Containment with Negative Pressure</td>
<td></td>
</tr>
<tr>
<td>☒ Mini-Enclosure</td>
<td></td>
</tr>
<tr>
<td>☒ Glovebag Procedure</td>
<td></td>
</tr>
<tr>
<td>☐ Non-Exempted (*) and Non-Friable Procedure</td>
<td></td>
</tr>
</tbody>
</table>

### Location of Asbestos-Containing Material (ACM) TO BE ABATED

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED</th>
<th>IN Facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td></td>
</tr>
<tr>
<td>Pipe Insulation</td>
<td></td>
</tr>
</tbody>
</table>

### Description of Asbestos Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

| Amount (Specify SF or LF) | 15 LF |

### Abatement Type

<table>
<thead>
<tr>
<th>Removal</th>
<th>Repair</th>
<th>Encapsulate</th>
<th>Enclose</th>
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</thead>
<tbody>
<tr>
<td>☐</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
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</table>

### Name of Registered Waste Hauler
AbateTech, Inc.

<table>
<thead>
<tr>
<th>NJDEP Waste Hauler ID No.</th>
<th>18750</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
<th>10</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Landfill</th>
<th>G.R.O.W.S. Landfill</th>
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</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Lumberton, NJ</th>
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<table>
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<tr>
<th>Disposal Date</th>
<th>5/6/14</th>
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</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Tullytown, PA</th>
</tr>
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### Completed By (Print or Type)
Jennifer Piraine

<table>
<thead>
<tr>
<th>Title</th>
<th>Operations Coordinator</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
</thead>
</table>

| Date | 4/25/14 |

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)
04 / 25 / 14

Name of Building Owner/Operator (2)
AtlantiCare Hospital / Job #1404-4753 Check #6140

Agencies Notified
☐ EPA
☐ DOLWD
☐ DHSS
☐ DCA (NJAC 5:23-8)

Type Notification
☐ Initial
☐ Amended
☐ Amendment # ____________
☐ Emergency (including justification)
☐ Cancellation

Street Address
65 Jimmie Leeds Road
City, State, Zip Code
Pomona, NJ 08205

Name of Contact
Frank Casper

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
AtlantiCare Hospital - Pac-W Building

Street Address
72 W. Jimmie Leeds Road
City (5)
Galloway
County (6)
Atlantic

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)
Hospital

Name of Monitoring Firm Hired by Building Owner (8)
TTI Environmental, Inc.

Name of Abatement Contractor (9)
AbateTech, Inc.

Street Address
1253 North Church Street
City, State, Zip Code
Mooriestown, NJ 08057

Street Address
30 Maple Ave. PO Box 25
City, State, Zip Code
Lumberton, NJ 08048

Project Manager for Monitoring Firm
James A. Giuliani
TelephoneNumber
609-314-1683

Telephone No.
609-265-2107
License No.
00529

Start Date (10)
04 / 28 / 14
Scheduled Completion Date (11)
04 / 29 / 14
Name of OSHA Monitor
EMSL Analytical

Occupancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe
Time of Abatement: AM_PM_PM_AM

Location of Asbestos-Containing Material (ACM)
TO BE ABATED
IN Facility
13

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes No N/A

Description of Asbestos Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type
Removal Repair Encapsulate Endicure

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

Location of Exterior Windows
☐ ☐ ☒ Window Caulk

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Name of Registered Waste Hauler
AbateTech, Inc.

NJDEP Waste Hauler ID No.
18750

Cubic Yards of Waste
20

Name of Registered Landfill
G.R.O.W.S. Landfill

Disposal Date
4/29/14
City, State
Tullytown, PA

Completed By (Print or Type)
Jennifer Piraine
Title
Operations Coordinator
Signature

Date
11/30/14

* Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

State of New Jersey

Date of Notification (1)
04/23/14

Name of Building Owner / Operator (2)
NJ DPMC

Agencies Notified

<table>
<thead>
<tr>
<th>Agency</th>
<th>Type Notification</th>
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<tbody>
<tr>
<td>EPA</td>
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<tr>
<td>DEP</td>
<td>Amended #10</td>
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<tr>
<td>DOL</td>
<td>Emergency</td>
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<tr>
<td>DOH</td>
<td></td>
</tr>
<tr>
<td>DCA</td>
<td></td>
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</tbody>
</table>

Street Address
PO Box 034
City, State & Zip Code
Trenton, NJ 08625
Date: APR 30 2014

Name of Contact
Georgette Bunch

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
NJ Training School for Boys

Street Address
1 State Street

City (5)          County (6)          County Code (7)
Jamesburg         Middlesex          Middlesex

Name of Monitoring Firm Hired by Building Owner (8)
Environmental Connection, Inc.

ASCM No.

Name of Abatement Contractor (9)
AbateTech, Inc.

Street Address
PO Box 25
City, State & Zip Code
Lumberton, NJ 08048

Telephone Number
609-265-2107
License Number
00529

Name of OSHA Monitor
EMSL Analytical

Current Use (Prior if being demolished)
Training School

Occupancy Status During Abatement (Check-only-one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Hours
- Facility Occupied During Abatement

Scheduled Start Date (10)
5/29/13
Scheduled Completion Date (11)
5/30/14

Description of Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)

<table>
<thead>
<tr>
<th>Location</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
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<tbody>
<tr>
<td>Building #9 Basement Mechanical Room</td>
<td>Pipe Fittings (75 total)</td>
</tr>
<tr>
<td>Building #9 1st &amp; 2nd Floor</td>
<td>Pipe Fittings (285 total)</td>
</tr>
<tr>
<td>Building #7</td>
<td>Plaster (10 SF)</td>
</tr>
<tr>
<td>Building #7 Perimeter</td>
<td>Window Caulk (12 LF)</td>
</tr>
<tr>
<td>Building #31 Basement Office</td>
<td>Pipe Insulation (20 LF)</td>
</tr>
<tr>
<td>Building #32</td>
<td>Window/Door Glazing (30 SF)</td>
</tr>
</tbody>
</table>

Location Normally Used Solely by Maintenance or Custodial Staff? (12)
- Yes
- No
- N/A

Building #9 Basement Mechanical Room
- Yes
- No
- N/A

Cubic Yards of Waste
12

Abatement Type
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glove Bag Procedures
- Non-Exempted and Non-Friable Procedure

Name of Registered Waste Hauler
AbateTech, Inc.

NJDEP Waste Hauler ID No.
18750

City, State
Lumberton, NJ

Disposal Date
5/30/14

Name of Registered Landfill
TRRF Landfill

City, State
Tullytown, PA

Completed By (Print or Type)
Jennifer Piraine

Title
Opps. Coord.

Signature

Date
4/23/14
**State of New Jersey**  
**NOTIFICATION OF ASBESTOS ABATEMENT**  
**Pursuant to N.J.A.C. 8:60 and 12:120**

<table>
<thead>
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<th>Date of Notification (1)</th>
<th>4/23/14</th>
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</thead>
<tbody>
<tr>
<td>Name of Building Owner / Operator (2)</td>
<td>NJ DPMC</td>
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<tr>
<td>Agencies Notified</td>
<td>EPA</td>
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<tr>
<td>Type Notification</td>
<td>Initial, Amended #10</td>
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<tr>
<td>Street Address</td>
<td>PO Box 034</td>
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<tr>
<td>City, State &amp; Zip Code</td>
<td>Trenton, NJ 08625</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Georgette Bunch</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>APR 30</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement is Taking Place (3) | NJ Training School for Boys |
| Street Address | 1 State Street |
| City (5) | Jamesburg |
| County (6) | Middlesex |
| County Code (7) | ASCM No. |
| Name of Abatement Contractor (9) | AbateTech, Inc. |
| Street Address | 120 North Warren Street |
| City, State & Zip Code | Trenton, NJ 08608 |
| Telephone Number | 609-392-4200 |
| License Number | 00529 |
| Name of OSHA Monitor | EMSL Analytical |
| Street Address | 108 Haddon Ave. |
| City, State & Zip Code | Westmont, NJ 08108 |
| Scheduled Start Date (10) | 5/29/13 |
| Scheduled Completion Date (11) | 5/30/14 |

**Occupancy Status During Abatement (Check only one)**  
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Hours
- Facility Occupied During Abatement

**Scope of Work (Check all that apply)**  
- ≥3 sf or ≥3 lcf
- ≥160 sf ≥250 lcf
- Renovation
- Demolition

**Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)**

- Building #8
- Power House

**Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)**

- Yes
- No
- N/A

**Description of Asbestos-Containing Material (ACM)**  
(i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)

<table>
<thead>
<tr>
<th>Building Type</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plaster</td>
<td>10 SF</td>
<td>Spot Repair</td>
</tr>
<tr>
<td>Pipe Insulation</td>
<td>9 LF</td>
<td>Encapsulate</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**

<table>
<thead>
<tr>
<th>AbateTech, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State</td>
</tr>
<tr>
<td>NJDEP Waste Hauler ID No.</td>
</tr>
<tr>
<td>Name of Registered Landfill</td>
</tr>
<tr>
<td>Disposal Date</td>
</tr>
<tr>
<td>City, State &amp; Zip Code</td>
</tr>
<tr>
<td>Completed By (Print or Type)</td>
</tr>
<tr>
<td>Title</td>
</tr>
<tr>
<td>Signature</td>
</tr>
<tr>
<td>Date</td>
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</tbody>
</table>
**State of New Jersey**
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 5:16)

**Date of Notification (1)** 4/23/14

**Name of Building Owner/Operator (2)** Trustees of Princeton / Job #1403-4737 / Check

**Street Address** Trustees of Princeton University E.A. MacMillan Bldg.

**City, State, Zip Code** Princeton, NJ 08544

**Name of Contact** Robert Ortega, P.E.

**Telephone Number**

---

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)** Sayre Hall

**Street Address** 300 Forrestal Road, Princeton University Forrestal Campus

**City (5)** Princeton

**County (6)** Middlesex

**Name of Monitoring Firm HIred by Building Owner (8)** ATC Associates

**ASCM No.** 00098

**Name of Abatement Contractor (3)** AbateTech, Inc.

**Street Address** 30 Maple Ave. PO Box 25

**City, State, Zip Code** Lumberton, NJ 08048

**Telephone No.** 609-386-8800

**License No.** 00529

**Name of OSHA Monitor** EMSL Analytical

**Street Address** 200 Route 130 North

**City, State, Zip Code** Cinnaminson, NJ 08077

---

**Start Date (10)** 3/31/14

**Scheduled Completion Date (11)** 5/02/14

---

**Scope of Work (Check all that apply)**

- Full Containment with Negative Pressure
- Renovation
- Demolition
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

---

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)**

**1st Floor**

- Pipe and fitting insulation
- 1,150 LF

**2nd Floor**

- Floor tile and Mastic
- 1,280 SF

**Attic**

- Pipe and fitting insulation
- 1,020 LF

**Name of Registered Waste Hauler** AbateTech, Inc.

**City, State** Lumberton, NJ

**Waste Hauler ID No.** 18758

**Cubic Yards of Waste** 150

**Name of Registered Landfill** G.R.O.W.S. Landfill

**City, State** Tullytown, PA

**Disposal Date** 09/20/14

**Completed By (Print or Type)** Jennifer Piraine

**Title** Operations Coordinator

**Signature** [Signature]

**Date** 4/23/14

---

*Do not use this form for asbestos licensure exempted activities.*
<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (AOM) TO BE ABATED in Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)</th>
<th>Description of Asbestos-Containing Material (AOM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
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</thead>
<tbody>
<tr>
<td>Attic</td>
<td>No</td>
<td>roof rafter insulation</td>
<td>8,500 SF</td>
<td>Repair</td>
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<tr>
<td>Attic</td>
<td>No</td>
<td>Cement Asbestos Board</td>
<td>8 SF</td>
<td>Repair</td>
</tr>
<tr>
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<tr>
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<td>No</td>
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<td>Repair</td>
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</table>
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

State of New Jersey

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
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<tbody>
<tr>
<td>04 / 23 / 14</td>
<td>PSE&amp;G / Job #1403-4735 Check</td>
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</tbody>
</table>

Agencies Notified
- ☒ EPA
- ☒ DOLWD
- ☒ DHSS
- ☐ DCA (NJAC 5:23-8)
- ☐ Emergency (including justification)
- ☐ Cancellation

Type Notification
- ☐ Initial
- ☐ Amended
- ☒ Amendment #2

Street Address
- 80 Park Plaza
- Newark, NJ 07101

City, State, Zip Code
- New Jersey 07101

Name of Contact
- Steve Maginnis

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
- PSE&G Exterior Burlington Switch Station

Street Address
- Devlin Ave. & West Broad Street

City (5)
- Burlington

County (6)
- Burlington

Name of Monitoring Firm Hired by Building Owner (8)
- Health & Safety Services

ASCM No.
- 117

Name of Abatement Contractor (9)
- AbateTech, Inc.

Street Address
- 318 12th Street

City, State, Zip Code
- Hammonton, NJ 08037

Project Manager for Monitoring Firm
- Jim Proctor

Telephone No.
- 609-704-8850

License No.
- 00529

Start Date (10)
- 04 / 07 / 14

Scheduled Completion Date (11)
- 05 / 16 / 14

Name of OSHA Monitor
- ESMR Analytical

Occupancy Status During Abatement (Check only one)
- ☐ Facility Closed/Vacated During Entire Period of Abatement
- ☐ Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: AM PM PM AM

Scope of Work (Check all that apply)
- ☐ 2 - 3 sf or 2 - 3 if
- ☒ 160 sf or 260 if
- ☐ Renovation
- ☒ Demolition
- ☐ Full Containment with Negative Pressure
- ☐ Mini-Enclosure
- ☐ Glovebag Procedure
- ☒ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED
IN Facility

Yes No N/A

Exterior

Exterior Transite Conduit
- 1,500 LF

Abatement Type

Amount (Specify SF or LF)

Location of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

NJDEP Waste Hauler ID No.
- 1125

Disposal Date
- 5/16/14

Name of Registered Landfill
- G.R.O.W.S. Landfill

City, State
- Tullytown, PA

Name of Registered Waste Hauler: Waste

City, State
- Camden, NJ

Completed By (Print or Type)
- Jennifer Piraine

Title
- Operations Coordinator

Signature

Date
- 4/23/14

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