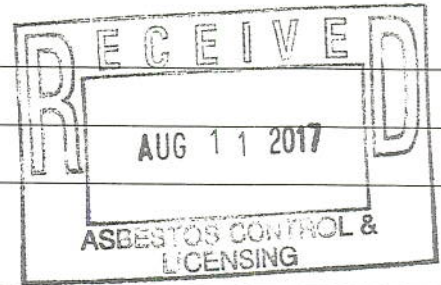


**State of New Jersey**  
**NOTIFICATION OF ASBESTOS ABATEMENT**  
(Pursuant to N.J.A.C. 8:60 and 12:120)



Date of Notification (1) 08-09-2017		Name of Building Owner / Operator (2) Rider University	
Agencies Notified	Type Notification	Street Address 2083 Lawrenceville Road	
<input checked="" type="checkbox"/> EPA	<input type="checkbox"/> Initial	City, State & Zip Code Lawrenceville, NJ 08648	
<input type="checkbox"/> DEP	<input checked="" type="checkbox"/> Amended: 3 <sup>rd</sup> Amendment = decreased & increased Scope	Name of Contact Mr. Walter Eddy	
<input checked="" type="checkbox"/> DOL	<input type="checkbox"/> Emergency	Phone Number	
<input checked="" type="checkbox"/> DOH	<input type="checkbox"/> Cancellation		
<input checked="" type="checkbox"/> DCA			

**FACILITY INFORMATION**

Name of Facility Where Abatement is Taking Place (3) Rider University—Maurer Physical Education Building—1 <sup>st</sup> floor offices/classrooms			Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 2083 Lawrenceville Road			Square Feet 25,000		
City (5) Lawrenceville, NJ 08648			County (6) Mercer		County Code (7)
			# of Floors 2		Bldg. Age 57
Name of Monitoring Firm Hired by Building Owner (8) Pennoni & Associates			ASCM No. 00102		
Street Address 515 Grove Street			Name of Abatement Contractor (9) Resource Management Group, LLC		
City, State & Zip Code Haddon Heights, NJ 08035			Street Address 2115 Hamilton Avenue, Suite 202		
Project Manager for Monitoring Firm Brian Clark			Telephone Number 856-547-0505		License Number 01185
Telephone Number 856-547-0505			Telephone Number 609-977-6159		License Number 01185
Scheduled Start Date (10) 8/7/2017		Scheduled Completion Date (11) 8/28/2017		Name of OSHA Monitor J&S Environmental Laboratories Inc	
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input checked="" type="checkbox"/> Abatement Performed during Normal Hours 1 <sup>st</sup> Shift Describe: 8:00AM – 4:30PM Monday-Sunday– including weekends <input checked="" type="checkbox"/> Facility Occupied During Abatement			Street Address 2333 Route 22 West		
			City, State & Zip Code Union, NJ 07083		

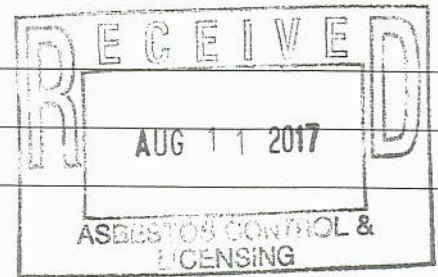
Scope of Work (Check all that apply)

<input type="checkbox"/> ≥3 sf or ≥3 lf	<input checked="" type="checkbox"/> Renovation	<input checked="" type="checkbox"/> Full Containment with Negative Pressure
<input checked="" type="checkbox"/> ≥160 sf ≥260 lf	<input type="checkbox"/> Demolition	<input type="checkbox"/> Mini-Enclosure
		<input type="checkbox"/> Glove Bag Procedures
		<input type="checkbox"/> Non-Exempted and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsula	Enclosure
Class rooms: 127, 126, 125, 124, 122-124, 110, 0109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sheetrock & Joint Compound	5,470 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms: 127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fissure Ceiling Tile	6,470 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms: 127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cove base mastic	534 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms: 127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Floor tile/mastic(grey streaks)	4976 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms(#127, 126 & 109)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chalkboard Glue Dots	150 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Resource Management Group, LLC		0035218	TBD	Grows Landfill
City, State Hamilton, NJ 08619		Disposal Date TBD	City, State Morrisville, PA	
Completed By (Print or Type) Brian Haney		Title: President	Signature	Date 08-9-2017

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



Date of Notification (1) 08-04-2017		Name of Building Owner / Operator (2) Rider University	
Agencies Notified <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL  <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DCA	Type Notification <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended: 2 <sup>nd</sup> Amendment = Start date & increased Scope <input type="checkbox"/> Emergency <input type="checkbox"/> Cancellation	Street Address 2083 Lawrenceville Road City, State & Zip Code Lawrenceville, NJ 08648	
		Name of Contact Mr. Walter Eddy	

**FACILITY INFORMATION**

Name of Facility Where Abatement is Taking Place (3) Rider University—Maurer Physical Education Building-1 <sup>st</sup> floor offices/classrooms			Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 2083 Lawrenceville Road			Square Feet 25,000	# of Floors 2	Bldg. Age 57
City (5) Lawrenceville, NJ 08648	County (6) Mercer	County Code (7)	Current Use (Prior if being demolished) Physical Education Building		
Name of Monitoring Firm Hired by Building Owner (8) Pennoni & Associates		ASCM No. 00102	Name of Abatement Contractor (9) Resource Management Group, LLC		
Street Address 515 Grove Street		Street Address 2115 Hamilton Avenue, Suite 202			
City, State & Zip Code Haddon Heights, NJ 08035		City, State & Zip Code Trenton, NJ 08619			
Project Manager for Monitoring Firm Brian Clark		Telephone Number 856-547-0505	Telephone Number 609-977-6159	License Number 01185	
Scheduled Start Date (10) 8/7/2017		Scheduled Completion Date (11) 8/28/2017		Name of OSHA Monitor J&S Environmental Laboratories Inc	
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input checked="" type="checkbox"/> Abatement Performed during Normal Hours 1 <sup>st</sup> Shift Describe: 8:00AM – 4:30PM Monday-Sunday- including weekends <input checked="" type="checkbox"/> Facility Occupied During Abatement			Street Address 2333 Route 22 West		
			City, State & Zip Code Union, NJ 07083		

Scope of Work (Check all that apply)

- ☐ ≥3 sf or ≥3 lf  
☒ ≥160 sf ≥260 lf

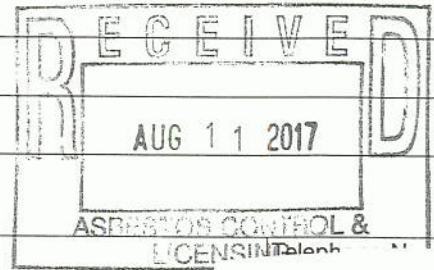
- ☒ Renovation  
☐ Demolition

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

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsula	Enclosure
Class rooms:127,126,125,124,122-124,110,0109,108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sheetrock & Joint Compound	8,960 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fissure Ceiling Tile	5,850 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cove base mastic	1,022 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Floor tile/mastic(grey streaks)	2,550 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms(#127, 126 & 109)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chalkboard Glue Dots	270 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Resource Management Group, LLC		0035218	TBD	Grows Landfill
City, State Hamilton, NJ 08619		Disposal Date TBD	City, State Morrisville, PA	
Completed By (Print or Type) Brian Haney		Title: President	Signature 	Date 08-4-2017

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



Date of Notification (1) 07-28-2017		Name of Building Owner / Operator (2) Rider University	
Agencies Notified <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL  <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DCA	Type Notification <input checked="" type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended((start date&Scope) <input type="checkbox"/> Emergency <input type="checkbox"/> Cancellation		Street Address 2083 Lawrenceville Road
			City, State & Zip Code Lawrenceville, NJ 08648
			Name of Contact Mr. Walter Eddy

**FACILITY INFORMATION**

Name of Facility Where Abatement is Taking Place (3) Rider University-Maurer Physical Education Building-1 <sup>st</sup> floor offices/classrooms			Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)		
Street Address 2083 Lawrenceville Road			Square Feet 25,000	# of Floors 2	Bldg. Age 57
City (5) Lawrenceville, NJ 08648	County (6) Mercer	County Code (7)	Current Use (Prior if being demolished) Physical Education Building		
Name of Monitoring Firm Hired by Building Owner (8) Pennoni & Associates		ASCM No. 00102	Name of Abatement Contractor (9) Resource Management Group, LLC		
Street Address 515 Grove Street		Street Address 2115 Hamilton Avenue, Suite 202			
City, State & Zip Code Haddon Heights, NJ 08035		City, State & Zip Code Trenton, NJ 08619			
Project Manager for Monitoring Firm Brian Clark		Telephone Number 856-547-0505	Telephone Number 609-977-6159	License Number 01185	
Scheduled Start Date (10) 8/8/2017	Scheduled Completion Date (11) 9/8/2017		Name of OSHA Monitor J&S Environmental Laboratories Inc		
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input checked="" type="checkbox"/> Abatement Performed during Normal Hours Describe: 8:00AM – 6:00PM Monday-Sunday- including weekends <input checked="" type="checkbox"/> Facility Occupied During Abatement			Street Address 2333 Route 22 West		
			City, State & Zip Code Union, NJ 07083		

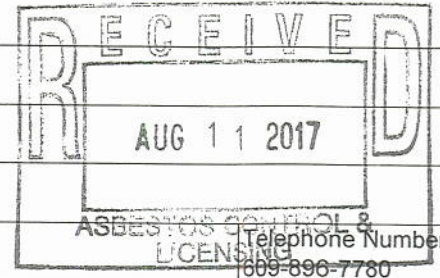
Scope of Work (Check all that apply)

<input type="checkbox"/> ≥3 sf or ≥3 lf	<input checked="" type="checkbox"/> Renovation	<input checked="" type="checkbox"/> Full Containment with Negative Pressure
<input checked="" type="checkbox"/> ≥160 sf ≥260 lf	<input type="checkbox"/> Demolition	<input type="checkbox"/> Mini-Enclosure
		<input type="checkbox"/> Glove Bag Procedures
		<input type="checkbox"/> Non-Exempted and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsula	Enclosure
Class rooms:127,126,125,124,122-124,110,0109,108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sheetrock & Joint Compound	2,910 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fissure Ceiling Tile	3,300 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cove base mastic	624 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Floor tile/mastic(grey streaks)	3,306 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms(#127, 126 & 109)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chalkboard Glue Dots	190 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

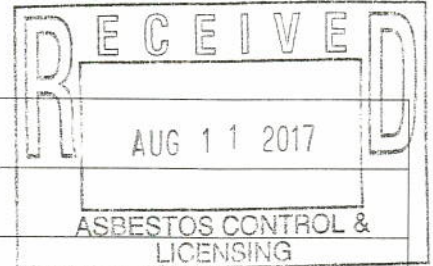
Resource Management Group, LLC		0035218	TBD	Grows Landfill	
City, State Hamilton, NJ 08619		Disposal Date TBD		City, State Morrisville, PA	
Completed By (Print or Type) Brian Haney		Title: President	Signature 	Date 07-28-2017	

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



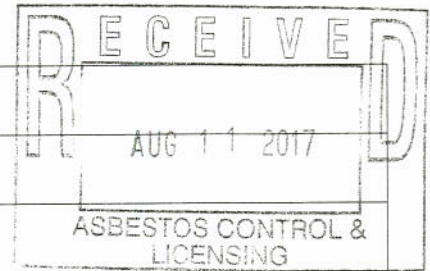
Date of Notification (1) 07-18-2017		Name of Building Owner / Operator (2) Rider University							
Agencies Notified <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DEP <input type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DCA	Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Emergency <input type="checkbox"/> Cancellation	Street Address 2083 Lawrenceville Road City, State & Zip Code Lawrenceville, NJ 08648 Name of Contact Mr. Walter Eddy							
<b>FACILITY INFORMATION</b>									
Name of Facility Where Abatement is Taking Place (3) Rider University-Maurer Physical Education Building-1 <sup>st</sup> floor offices/classrooms		Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 2083 Lawrenceville Road		Square Feet 25,000	# of Floors 2						
City (5) Lawrenceville, NJ 08648	County (6) Mercer	Bldg. Age 57							
Current Use (Prior if being demolished) Physical Education Building									
Name of Monitoring Firm Hired by Building Owner (8) Pennoni & Associates		ASCM No. 00102	Name of Abatement Contractor (9) Resource Management Group, LLC						
Street Address 515 Grove Street		Street Address 2115 Hamilton Avenue, Suite 202							
City, State & Zip Code Haddon Heights, NJ 08035		City, State & Zip Code Trenton, NJ 08619							
Project Manager for Monitoring Firm Brian Clark		Telephone Number 856-547-0505	Telephone Number 609-977-6159						
License Number 01185									
Scheduled Start Date (10) 7/31/2017	Scheduled Completion Date (11) 8/31/2017	Name of OSHA Monitor J&S Environmental Laboratories Inc							
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input checked="" type="checkbox"/> Abatement Performed during Normal Hours Describe: 8:00AM – 6:00PM Monday-Sunday– including weekends <input checked="" type="checkbox"/> Facility Occupied During Abatement		Street Address 2333 Route 22 West							
		City, State & Zip Code Union, NJ 07083							
Scope of Work (Check all that apply)									
<input type="checkbox"/> ≥3 sf or ≥3 lf <input checked="" type="checkbox"/> ≥160 sf ≥260 lf <input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glove Bag Procedures <input type="checkbox"/> Non-Exempted and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsula	Enclosure
Class rooms:127,126,125,124,122-124,110,0109,108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sheetrock & Joint Compound	8,960 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fissure Ceiling Tile	5,850 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cove base mastic	1,022 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms:127, 126, 125, 122-124, 110, 111, 109, 108 & Hallway by rooms 111-118	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Floor tile/mastic(grey streaks)	1,500 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class rooms(#127, 126 & 109)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chalkboard Glue Dots	270 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class room 124	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Floor tile/mastic	200 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resource Management Group, LLC		0035218		TBD	Grows Landfill				
City, State Hamilton, NJ 08619				Disposal Date TBD	City, State Morrisville, PA				
Completed By (Print or Type) Brian Haney		Title: President		Signature 			Date 07-18-2017		

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



Date of Notification (1) 08/08/17		Name of Building Owner/Operator (2) Bristol-Myers Squibb							
Agencies Notified	Type Notification	Street Address 1 Squibb Drive							
<input type="checkbox"/> EPA <input checked="" type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL  <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DCA	<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended Amendment # 1 <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	City, State, Zip Code New Brunswick, NJ							
		Name of Contact Philip DeSpirito							
<b>FACILITY INFORMATION</b>									
Name of Facility Where Abatement is Taking Place (3) Bristol-Myers Squibb		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1 Squibb Drive		Square Feet	# of Floors 3						
City (5) New Brunswick		Bldg. Age 100							
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Laboratory							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Health Investigations		ASCM No. 00104	Name of Abatement Contractor (9) Advanced Specialty Contractors						
Street Address 655 West Shore Trail		Street Address 2400 Main St. Extension Suite 10							
City, State, Zip Code Sparta, NJ 07871		City, State, Zip Code Sayreville, NJ 08872							
Project Manager for Monitoring Firm Bill Kerbel		Telephone No. 973-729-5649	Telephone No. 732-525-0100						
License No. 00750									
Start Date (10) 08/23/17	Scheduled Completion Date (11) 10/18/17	Name of OSHA Monitor Environmental Tactics, Inc.							
Occupancy Status During Abatement (Check Only One) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe:		Street Address 64 Broad Street							
		City, State, Zip Code Matawan, NJ 07747							
Scope of Work (Check All That Apply)									
<input checked="" type="checkbox"/> ≥3 sf or ≥3 lf <input checked="" type="checkbox"/> ≥160 sf or ≥260 lf		<input type="checkbox"/> Renovation <input checked="" type="checkbox"/> Demolition  <input checked="" type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Building 80/84 North		x		Floor Tile VAT	2000 SF				
-		x		Pipe Insulation	170 LF				
-		x		Cont. Ceiling Plaster	1625 SF				
-		x		Metal Walls	4010 SF				
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 10,000	Name of Registered Landfill Grows Landfill					
City, State Freehold, NJ			Disposal Date 10/18/17	City, State Tullytown, PA					
Completed by Kurt Nale		Title Branch Manager	Signature 	Date 08/08/17					

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



Date of Notification (1) 08/08/17		Name of Building Owner/Operator (2) Bristol-Myers Squibb							
Agencies Notified	Type Notification	Street Address 1 Squibb Drive							
<input checked="" type="checkbox"/> EPA <input checked="" type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL  <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DCA	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended Amendment # _____ <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	City, State, Zip Code New Brunswick, NJ							
		Name of Contact Philip DeSpirito							
<b>FACILITY INFORMATION</b>									
Name of Facility Where Abatement is Taking Place (3) Bristol-Myers Squibb		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1 Squibb Drive		Square Feet	# of Floors 3						
City (5) New Brunswick		Bldg. Age 100							
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Laboratory							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Health Investigations		ASC No. 00104	Name of Abatement Contractor (9) Advanced Specialty Contractors						
Street Address 655 West Shore Trail		Street Address 2400 Main St. Extension Suite 10							
City, State, Zip Code Sparta, NJ 07871		City, State, Zip Code Sayreville, NJ 08872							
Project Manager for Monitoring Firm Bill Kerbel		Telephone No. 973-729-5649	Telephone No. 732-525-0100						
License No. 00750									
Start Date (10) 08/23/17	Scheduled Completion Date (11) 10/18/17	Name of OSHA Monitor Environmental Tactics, Inc.							
Occupancy Status During Abatement (Check Only One) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe: _____		Street Address 64 Broad Street							
		City, State, Zip Code Matawan, NJ 07747							
Scope of Work (Check All That Apply)									
<input checked="" type="checkbox"/> ≥3 sf or ≥3 lf <input checked="" type="checkbox"/> ≥160 sf or ≥260 lf		<input type="checkbox"/> Renovation <input checked="" type="checkbox"/> Demolition							
		<input checked="" type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Building 80/84 South		x		Floor Tile VAT	8000 SF				
-		x		Pipe Insulation	170 LF				
-		x		Window Caulking	3500 LF				
-		x		Roof Flashing Tar Paper	1200 SF				
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939		Cubic Yards of Waste 10,000	Name of Registered Landfill Grows Landfill				
City, State Freehold, NJ				Disposal Date 10/18/17	City, State Tullytown, PA				
Completed by Kurt Nale		Title Branch Manager		Signature 	Date 08/08/17				