CHECK CREDIT

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

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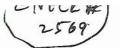
Date of Notification (1)	1.01		N	lame of I	Building	Owner/Operator	(2)	100 2012 DI	£ 2	1 1	Die	
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lame of Facility Where	Abatement is Takir	g Place (3	3)				Type of Facility					
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Project Manager for Mo	onitoring Firm	1.	. i elepr	none No.		856-77	9-0472	0044	14			
	T Sche	duled Cor	moletio	n Date ((11)	Name of OSHA	Monitor					
Start Date (10)		19	1	13				EMM			-,-	닉
Occupancy Status Dur	ing Abatement (Che	eck only o	ne)	an!		Street Address		LULE LUC.				
Facility Closed/Vaca	ated During Entire P	enod of A	Dateme	ent	}		2 1					
Abatement Performa	ed Outside of Norma	al Facility	nours		_	M.	APLES	IDDE N.	J . C	180	2.2	2
Scope of Work (Check	all that apply)					□ Eull Co	ontainment with Ne	egative Pressure				
		- Pan	ovation			☐ Mini-Er	nclosure	3				
≥3 sf or ≥3 lf		Derr				Glovet	pag Procedure	on-Friable Procedu	re			
≥160 sf or ≥260 lf		<u>a</u>				□ Non-E	xempled () and iv	OFF TRADIC T TOUCH	TA	bater	nent	
		A-70/17045	cation							Тур		
		Used	mally Solely I	by		Description	of					
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			1 212	DEP Wa	rde	Cubic Yards	Name of Re	gistered Landfill	<u> </u>			
Name of Registered W	~		Ha	uler ID N	ło.	of Waste.	C.r	1, C, M.U. A	1.			_
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City. State	E SIAD	DG,	Ni	7			luo	O7 BINE	11/7	_		-
						Signature		Date /2/	19	11:	2	65
Completed By	KLEMM -	~ V	1/6			Joen	res / Coli	m 1.21	17/	<u></u>	=	=

(CHECK#)
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) 2112 Dr

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Date of Notification (1)	1,01.	¥.		Name		LANDS	ONSTRUCT	2:58	•			
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D DOL	Amendment #		-	O.,, C	SFA	ISLE CI	TY, N.J.	08243				_
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County (6) CAPE	MAY			USE	ONLY)		1	CANT				=
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(8) W	/A	E/H					EMCO IN	JC,	_			=
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Project Manager for Mor	nitoring Firm		1	p. 2.1.5		856-7	19-0472	0045	14	_		
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Start Date (10) /13	300	7	7	13		20	SEPH KL	Enn		===		=
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Abatement Performer	d Outside of Norma	d Facilit	y Hou	rs		City, State, Zip	Code	41-	T (2 %	05	2
Other - Describe:						M.	APLESI	LODE, N.			=	=
Scope of Work (Check a	all that apply)				17	[] Full Co	ontainment with Ne	egative Pressure			S.	
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KLAMCO	INC,		_ '	179	04	5: 15:	City, State					
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MAPE	E SHAT		10	_		Signature		Date /2/	10	11	2	
Completed By Joseph K	/ L Espasa Tid	-	V/	P		Jour		m 16/	7/			=
JOSENN	- 10 m											



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(8)	VA							-			
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Sugar vooress											
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City, State, Zip Code			•.		MAR	PLE	SHOT				
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Project Manager for M	lonitoring Firm	\.\·\'			856-7	79 -	0472	1 _00	17		
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Other - Describe:											
Scope of Work (Chec	ck all that apply)				Full C	containm	ent with Ne	gative Pressu	4		
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NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

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[]DEP	Notificati	1 161	ty, State, 2	Zip Code	07079		SEESTA	2	L. 0	8	
[X]DOL	[]Amended Notificati		Short Hi	TIS'NO'	07076		W I Inn	Const	Fig. 83.		
[X] DOH	Notificati	Nat	me of Contac			Telephone	Number Ca	MISTERS	1101		
[]DCA	[X] EMERGENCY	E	Barbara	Van Vli	Let						
[]DCA	[]Cancellatio	n				1		37 I			
				TY INFORMA	TION	Type of Facilit	v (4)				
Name of Facility Wh	ere Abatement is	Taking	Place (3)			[]School (K					
Same as above	•					r 1Subchapte	r 8 (Other	than K	-12)		
Street Addres						[X]Other (i.	e., privat .ldings, ho	mes, et	mer-		
17 Woodland Rd.							# of Floor		g. A	je	
				County Co	de (7)	2400	2		928		
City (5	Cot	inty (6)	Essex	(STATE US	E ONLY)	Current Use (Pr	rior if bei	ing demo	lish	ed)	
Short Hills											- 23
			ASCM No.	Name	of Abate	ment Contractor	(9)		15		
Name of Monitoring	Firm hired by Bu	ilaing	ASCH NO.	AZ	TECH N	ANAGEMENT,	Inc.				
Owner (8) N/A					t Addres						
Street Address				86	Chris	stopher St.					
						Zip Code					
City, State, Zip C	ode			Mo	ntcla	ir, NJ 0704	2				
					hone Nu		1	icense	Numb	er	- V (5)
Project Manager fo	r Monitoring Firm		phone Numbe			4-8800		0037	1		
		N/E				Monitor					
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	ent Performed Outside			y City	, State,	Zip Code					
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[]other - De	scribe: «Other Occ	upancy	Descript»								
Scope of Work (Che	eck all that appl	λ)			[x]Fu	ll Containment w	ith Negati	ve Pres	sure		
[X]≥3 sf	or >3 lf		[]Renovation		[]Min:	i-Enclosure ebag Procedure					
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Montclair,	MO 01042		0		le:	40 111	1	Dat	e		
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Constantine	Vivian P	esid	ent		1	out ll		N			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) Mr. Dolma 2012 DEC 21 PM 2: 58 12-17-12 Agencies Notified Type Notification Street Address 283 Randolph Ave. [X] Initial []EPA Notification STOG COHTROL City, State, Zip Code []DEP []Amended; Rutherford, NJ, 07073 [X]DOL Notification Name of Contact Telephone Number [X] DOH []EMERGENCY Mr. Dolma []DCA []Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Same as above []School (K-12) []Subchapter 8 (Other than K-12) Street Addres [X]Other (i.e., private & commercial buildings, homes, etc.) Bldg. Age Square Feet # of Floors City (5 County (6) Essex County Code (7) 2200 2 100 (STATE USE ONLY) Current Use (Prior if being demolished) Name of Monitoring Firm hired by Building Name of Abatement Contractor (9) AZTECH MANAGEMENT, Inc. N/A Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 00371 N/A (973) 744-8800 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) N/A Month 12 Day 28 Year 2012 Month 12 Day 31 Year 2012 Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period []Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» []other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) []Full Containment with Negative Pressure $[X] \ge 3$ sf or ≥ 3 lf []Mini-Enclosure [X] Renovation []≥160 sf or ≥260 lf []Demolition [X]Glovebag Procedure []Non-Friable Procedure Abatement Type Location Location of Description of E ENCHOSD Normally NCAPSU Asbestos-Containing Amount Asbestos-Containing Used REPAIR EMOVAL Material (ACM) Solely By Main Material (ACM) (Specify SF or TO BE ABATED (i.e., thermal systems tenance/ In Facility insulation, surfacing, VAT, LF) Custodial (13)Staff (12) or other miscellaneous) Yes No N/A 220 Basement Pipe insulation X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste 2.0 AZTECH MANAGEMENT, INC. G.R.O.W.S.

City, State

Montclair, NJ 07042

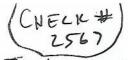
Completed By (Print or Type)
Constantine Vivian

Disposal Date
1-2-13

Morrisville PA 19067

Signature

Date
12-17-12



SINTE OF NEW JETTERY NOTIFICATION OF ASBESTOS ABATEMENT

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City State Zp Code			18					Timensa No	1.1
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Project Manager for M	outoning Firm	· , · [_				1111-1101			
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Cin State MAPLE	SHODE, N	J, (Sign	a our	410		12/11/1
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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

							<i>J</i> *1	Enan		-		
Date of Notification (1)	December 18, 20	12	7		Name of Building	Dwner/Ope Bob L	rator (2) erd 2012 D	FC -	to	210	3	3
Agencies Notified [x] EPA	L 1	tion Notifica ded Noti			Street Address		3 Virginia Avenue	4	2: 58)		*
[x]DOL [x]DOH	Amen	dment #_ gency (in			City, State, Zip Co	de Manas	quan, NJ 08736 L	ICENSING	ROL			
[] DCA	- A	cation) ellation			Name of Contact Bob L	ierd	Te	lephone Number				
				FACI	LITY INFORM	ATION						
Name of Facility Where R	Abatement is Taking esidence	Place (3)				Type of Facility (4) []	School (k-12) Subchapter 8 (otl	ner than	k12)		
Street Address	01-303 Virginia	Avenue	8 1				[x]	Other (i.e., privat homes, etc.)	e & coi	nmerc	ial buil	dings,
City	7 ⁴ *	County			County Code (7) (STATE USE ONL)	Y)	Square feet 1500 sf Current Use (Prior if	# of Floors 1 being demaished)		. Age	0	
Manasqua	n	Monn	nouth				Residence	ce	- 0			
Name of Monitoring Fir		Owner (8)	1 10	ASCM No.	Name of	Abatement Contractor ((9) n Contracting,	Inc.			
Street Address	I/A	. 1				Street Ac	ldress	ute 9, Unit 61			77 (2	
City, State, Zip Code					II	City, Sta	te, Zip Code Toms Ri	ver, New Jerse	ev 087	55-12	271	
Project Manager for Mo	onitoring Firm		Telephone Nur	mber	# N	Telephor	ne Number	License N 00624				Έ.
Scheduled Start Date (1 12/18/			Scheduled Cor 12/19/12	npletic	on Date (11)		OSHA Monitor	. Analytical				
Occupancy Status Durit		only one	e) Entire Period	of Aba	tement	Street Ac		elton Road				
[] A	batement Performed				and the second s	City, Sta	te, Zip Code Piscataw	ay, New Jerse	y 088	54		21
Scope of Work (Check	all that annly)					[]	Full Containment					
Scope of work (Check	an mac appry)	8.				[]	Mini-Enclosure					
	3 sf or ≥3 lf 160 sf or ≥260 lf			enovat emolit		[] [x]	Glovebag Procedu Non-Exempted (*)		Procedu	ire	9	
									Abat	ement	Туре	
Asbestos-Containing TO BE AI in faci	Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Custo Staff (12) YES NO					Description postos-Con Material (A., thermal ulation, su VAT, of er miscell	etaining ACM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R. E
Exterior -house			Х		Asbestos sidir	ng		1000 sf	X			
Exterior-garage	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		X		Asbestos sidir			400 sf	X			
			- 8				1					-
			JDEP Waste H	Invlar	ID No. Cubic V	ards of Was	te Name of Register	ed Landfill	L		L	1
Name of Registered Wa Guardian	ste Hauler Contracting, Inc.		202	23	3		T.R.R.F.					
City, State	er, New Jersey	14		Dispos 12/20	al Date /12	City, St Tullyt	ate own, Perfinsylvania	53			i , 1	- W
Completed by (Print or Nicholas F	Type)	Title Proje	ct Manager		Signature	hoot	For	1	Date 12/1	18/20	12	

Check 8432

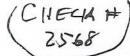
Date of Notification (1)		-/_	Name	of Build	ing Owner Operato	19(3)	- 4112 DE	0		1.	1
	12-19-12	_			1 1/	ich + S	165 & 1	121	۸.		7
Agency Notified	Type Notification	** *(=)** \	Street	Address	7 71	ten v 3	ons		M	2	~
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D DEP		Jest W	City, S	tate, Zip	Code	-11) =	- LIC	FALL	181		
DOL	Amendment #				Trento	NIT	186	2011	10	TO I	1
X DOH	Emergency (includia justification)	ng	Name	of Conta	act	7 14 3	Telephone Nu	mher			
	Cancellation		Ge	ry 1	line L		- Graphion Tto	iiiiooi			
	40 0			7	FORMATION		<u> </u>	-			P
Name of Facility Where Aba	atement is Taking Pla	cer(3)			- CHAIRTION	Type of Facility	· (4)				
		1:1	٠, ١				10 N S)				
Street Address	eanens	Vac	ent)		4	☐ School (K-1	2) 8 (Other than K-1	21			
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i 110-1	14 Sout	n v	LURRE	1	Theer	homes, etc.)				
Trento	A	17				Square Feet	# of Floors	Bldg.	Age	1 10	
	7 /	<u> </u>					l l	3	30	1	-
County (6)	4		ONLY)	Code (7) (STATE USE	100	rior if being demo	olished)	D.		
Merce	er					Day (cleaners	S			
Name of Monitoring Firm Hir		ASC	M No.			nent Contractor (9)				
(8) EPC Tect	nologies		MA		EPO	- Tech	nologies	T	00		
Street Address	7		-		Olicci Address			1			-
P.O. Box	55 t					P.O. Bo	× 337				
City, State, Zip Code	· VIT of			70.00	City, State, Zip C	Code	4				
New Egypt Project Manager for Monitori	F N7 08	3333	>		Vew Telephone No.	Equat	NJ	285	33		
Project Manager for Monitori	ng Firm			0.00	Telephone No.	311	License No.				
Steve Scher	1 Ker	6097	158-3	365	609-758-	-3365	0	039	Y		
Start Date (10)	Scheduled Cor	npletion D	Date (11)		Name of OSHA	Monitor			-		1155
12.29-12		4-1	3		EPC	Techn	ologies.	Inc			
Occupancy Status During Ab	atement (Check only	one)									
Facility Closed/Vacated Di	uring Entire Period of	Abatemer	nt ·		P. O City, State, Zip C	Box .	337				
☐ Abatement Performed Out ☐ Other – Describe:	side of Normal Facilit	y Hours	94		City, State, Zip C	ode				/55 T/K	
					Neω	Egypt	_N2 (085.	33		
Scope of Work (Check all that	it apply)					071	Negative Pressu				
28 ≥ 3 sf or ≥ 3 lf	×		☐ Renov		☐ Mini-E	Enclosure	Negative Pressu	re			
2 160 sf or ≥ 260 lf		,	Demo	lition		bag Procedure		- 7001206753			
			- Т		Non-E	exempted (*) and	Non-Friable Pro	cedure	AL	aten	
		Is Loca Norma	\$18.5000s*		9		9 5		10.27	асеп Турс	-
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City State	<u> </u>	- 1	700		Disposal Date	City, State					
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Completed by	.Title	-			Signature of	Monnis	ville				
Steve Schenke		den	-		ST.	School School	6.	Date /	10/	, -	2
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					onempted at	VIII 11100.					

Date of Notif	fication	(1) 12-14	-12				Nan	ne c	of B	Building	Owner / Opena d	172 62	21	DH o			1/2	77		
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☐ DEP ☐ DOL		_	Initia		5					& Zip	Code	& L	CEN	SINO	ēl.					
			Ame							, NJ 0	8362		07.147	SHEG					·	
DOH				gency		- 14				Contact						Tele	pho	one	Num	ber
LI DOM			Cario	eliation		-1	Bria		_											100
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Former Go	odma	1 Yard	Stor	e	lau	c (.	رد				Type of Fac									
Street Addre										-			Other	than K-1	12)					
Intersection	n of W	est Plu	ım S	treet and N	orth	S	eco	nd	St	t.	Other (i.e. priv	ate & c	ommer	ial buildin				etc.)	<u>a</u>
City (5)				County (6)	- 1	<u></u>			-1-	(7)	Square Fee	ī	# of F	loors		Bldg.	_			
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			eu b	y Building Ow	ner	(0)		ľ	AS	CM No	. Name of Ab									
Street Addres	SS										Street Addre							200.00		
City, State &	Zip Cod	de					Victoria.			-	City, State 8	Zip Co								
Project Mana	ger for	Monitori	ng F	irm	Те	lep	hon	e N	um	ber	Telephone I				License N	lumb	er			
	4						- 1				609-567-09	950					118	7		
Scheduled St 1-15-13	art Date	e (10)	1 8	Scheduled Co			n Da -13	ate	(11	1)	Name of OS EMSL Ana		nitor			7	150			
Occupancy S	tatus D	uring Ab	aten	nent (Check o					-	-	Street Addre						_	-	-	
	ty Close	ed/Vaca	ted D	uring Entire F	Perio	d d	of Ab				107 Haddo									4
		erforme	d Ou	tside of Norm	al F	Ιοι	ırs –	7a	m t	to 3pm	City, State 8					72				
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	or ≥3 ii sf ≥260	ı£				1		nov				-		nclosure						
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		(10)			Yes	3	No	N	I/A		or other miscel	laneous)				-		ate	9
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reehold Ca	rtage						1				30	G.R.C	.w.s.						100	
City, State						MILA					Disposal Date	City, S	tate					7		100
reehold, NJ	I										2-15-13	0.0113	sville,	PA						
Completed By	(Print o	r Type)			-		Titl	le			Signature		7			Date	2			-
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NO WEEK THUTT-

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

ete of Notification (1)	11-21-	12_	1	Building Owner/Operat		YUAN!	1019	121	No.
gency Notified	Type Notification	ι ·	Street Ad	dress 201 1	Mullic	CA Hell	1/200	<u>/</u>	32
DEP	Amended Amendment#		City, State	Zip Code	6. M.	1 0	02	4	20%
DOH DCA	justification) Cancellation	исилд .	Name of C	Contact		Telephone No	umber	•	
			FACILIT	YINFORMATION					
reet Address	Abatement is Taking I	49/1	1 // R	1	U School (K- U Subchapte U Other (Le. homes, etc.	12) 18 (Other than K-1 private & commerc	(2) Sial buildin	gs.	
ty (5) Glas	1.2	VJ			Square Feet	# of Floors	Bldg.	Age	-
ounty (6) (5/00	15ter		County Co.	de (7) (STATE USE	Current Use (Prior if being demo	Hished)		
	n Hired by Building Ow	ner AS	CM No.		ment Contractor			-	
set Address	+			Dt. 14.11	or hac		17		
1253 No.	nth Church			City Stein Zin (Carlo	gton An		1	
MORAR	stown N			Deli	Anco A	it aso	25		
ject Manager for Mor	illoring Firm		one No. -840-8800	Telephone No.	4 00/7/	License No.	 ک _ی ک		
rt Date (10)	" Scheduled (Completion i	Date (11) : '.			1. 1.		,	
11-21-12		30-1			• •				
Facility Closed/Vacate	g Abatoment (Check or od During Entire Period	of Abeterna	nt.	Street Address					
Voatement Performed Other — Describe:	Outside of Normal Fac	ality Hours		City, State, Zip C	ode				
pe of Work (Check al	I that apply)			. 0010					
3 sf or ≥ 3 lf : 160 sf or ≥ 260 lf			Ronovation Demolition	in di Mini-E	Endosure Šad Procedure	Negative Pressure			
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Asbestos-Containing TO BE AB IN Faci (13)	Material (ACM) ATED lity	Used Sol Maintens Custos Staff (12)	ince/ As	Description of bestos Containing Mat i.e., thermal systems in surfacing, VAT, other miscellance	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulato
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The state of the s	elanco No	T		Disposal Date (- 0	-	-
leted by	elence to	,		1	2	ollytorn	11	2.42	



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) CONSTRUCTIONS DET Date of Notification (1) Street Address Type Notification Agencies Notified 300 Initial DOL DOL City, State, Zip Code Amended U82 143 Amendment #_ SEA TYLE Emergency (including justification) Name of Contact ☐ DOH DUDITOI Cancellation FIDER 1 DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) RESIDENCE Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, Street Address homes, etc.) # of Floors Bldg. Age Square Feet City (5) Current Use (Prior if being demolished) County Code (7) (STATE County (6) USE ONLY) APE Name of Abatement Contractor (9) Name of Monitoring Firm Hjred by Building Owner ASCM No. LEMCD Street Address Street Address 369 City, State, Zip Code City, State, Zip Code MOPLE Telephone No. .Telephone No. 00444 Project Manager for Monitoring Firm -77 856 Name of OSHA Monitor Scheduled Completion Date (11) DSEPH Start Date (10) 12/28/12 Street Address Occupancy Status During Abatement (Check only one) 369 ☐ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure Renovation ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Demolition Abatement Type Is Location Normally Description of Used Solely by Amount Encapsulate Asbestos Containing Material (ACM) Enclosure Location of Maintenance/ (Specify Asbestos-Containing Material (ACM) Remova (i.e., thermal systems insulation, Custodial SF or LF) surfacing, VAT, or TO BE ABATED Staff? other miscellaneous) IN Facility (12)(13) N/A No Yes X 4004 TRANSITE Name of Registered Landfill Cubic Yards NUDEP Waste Name of Registered Waste Hauler Hauter ID No. of Waste Disposal Date SHADE Signature

Completed By

JOSEPH

RECK# 4684

Date of Notification (1) 12-18-2012					Building C Manag			(2)	•	in the	CIVE	D			
Agencies Notified	Type Notification			Street Ad		omone	-		2012 DE	1.2	PH 2				
_			- 1		uth Livi	ngstor	ı Ave.				PH 2	58			
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× DOL	Amendment		.	Livings	ton, NJ	07039	9		& L	ICE	ephone Nur	101			
⋉ DOH	Emergency (justification)	including	N	lame of	Contact	2000				Tele	phone Nur	nber			
DCA	Cancellation			John					а 1						
				FACIL	ITY INFO	RMATI	ON	_					ř.		
Name of Facility Where		g Place (3)						Type	of Facility (4	+)					
Lalor Gardens Uni	[# /33A	-							School (K-1: Subchapter		or than K-13	2)			
Street Address									Other (i.e. p				dings	home	es,
Stenton Court									etc.)	1 # 04	Cleam	Тр	lda		
City (5)								Squa	re Feet	# 01	Floors	200	ldg. / 50+	ige	
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County (6)				County C	ode (/) SE ONLY)				ent Use (Prio artment U		ng demonsi	ieu)			
Mercer	- I line of the Deciloises	Oran or (0)	Т.	ASCM	No		Namo		tement Con		(0)		_		
Name of Monitoring Firm	n Hirea by Building	Owner (8)		n/a	NO.		Total Control of the		ntracting,		(3)				
Street Address			_	11/a	127.77	-	Street							T	
n/a							22 T								
City, State, Zip Code					-1-4-10-25		Land State Control		ip Code	-					
n/a									ark, NJ 07	7035					
Project Manager for Mo	nitoring Firm		77	Telephon	e No.		Teleph				License N	0.			
n/a				n/a		¥	973-				01088				
Start Date (10)		Scheduled	Com	pletion D	Date (11)		Name	of OSI	HA Monitor			No.		21 100	
12-27-2012		12-28-20)12				Jada	ar Co	ntracting,	LLC					
Occupancy Status Duri	ng Abatement (Ched	k Only One)			E-101229 - 20-15		Street								
☐ Facility Closed/Va	cated During Entire	Period of Ab	atem	ent			22 T	roy L	ane.				a		
Abatement Perform	ned Outside of Norr	nal Facility H	lours						ip Code						
X Other – Describe:	9am - 5 pm					_	Linc	oln P	ark, NJ 0	7035				 	
Scope of Work (Check	All That Apply)		1201-120-				_	_							
≥3 sf or ≥3 lf			novat				×		II Containme		Negative F	Pressu	re		
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Jadar Contracting	LLC			auler ID 033137		of Wa			G.R.O.	W.S.	Landfill				
	City, State					E. Chickens	sal Date	1	City, Stat	e			-		-
	Lincoln Park, NJ 07035					TBD					A 19067				
Completed by	The state of the s							е		X		ate			
Lillie Lazarevich	4	Secre	tary	1		·	Signature	4 6	ten	1	1	2-18	-201	2	
							0-0		1					-	

RICK# 4683

Date of Notification (1) 12-18-2012			0.500		Building C Manag			(2)	2812.55		A Property Comments				
	Typo Notification			Street Ad		SHIGHT			CHIZDE	51	PM 2: 5				
	Type Notification Initial				aress outh Livi	ngston	Ave.	Å.	Saja£o.	r=	111 21	98			
DEP EPA	Amended Amendment		1	1.0 kg	e, Zip Coo ston, NJ)		& L	CEM	CBNTRE 3/NG ephone Num	L			
DOH L	Emergency (justification) Cancellation	including	1	lame of John	Contact					Tel	ephone Num	ber			
				FACIL	ITY INFO	RMATI	ON								
Name of Facility Where Ab		g Place (3)							of Facility (4	(5)					
Lalor Gardens Unit #	F 111B				eles eles				chool (K-1)		er than K-12	١			
Street Address Stenton Court								X C	other (i.e. p		commercia		lings,	home	es,
City (5)					-				tc.) e Feet	# of	Floors	В	dg. A	ge	-
Hamilton								•				5	0+		
County (6)				County C							ng demolish	ed)			
Mercer					SE ONLY)				tment Ur						
Name of Monitoring Firm F	lired by Building (Owner (8)		ASCM n/a	No.				ement Con tracting,		(9)				
n/a				n/a				Addres		LLC		-		-	4
Street Address								roy La							
City, State, Zip Code							0	tate, Zi	455-455-455-455-45-4				0.0740-0		
n/a									rk, NJ 07	7035			115499		
Project Manager for Monito	oring Firm		- 1	Telephon	e No.		4.5	one No		74.	License No).			
n/a				n/a				706-7			01088				
Start Date (10) 12-27-2012		Schedule 12-28-2		pletion E	Date (11)		100000000000000000000000000000000000000		A Monitor tracting,	LLC					
Occupancy Status During	Abatement (Chec		0.500.000					Addres							
Facility Closed/Vacate	ed During Entire I	Period of A	batem	ent			22 T	roy La	ane						
Abatement Performed	d Outside of Norm	nal Facility	Hours					tate, Zi							
Other – Describe: 9a							Linc	oln Pa	ark, NJ 0	7035					
Scope of Work (Check All	That Apply)	га <u>-</u>					Г	ا ـ ا			N6 D				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emoliti				×		i-Enclosure		Negative P	ressu	е		
							×		vebag Prod		d Non-Friabl	e Pro	redur	Α.	
		Т.			4444			1401	I-LXempter	ı () alı	d Non-i nabi			ement	
Location	o.f	1,000	Locati ormall	7.37.		De	scription	of						ре	
Asbestos-Containing N	Material (ACM)		d Solel			tos Cont	taining N	/laterial			mount	_		щ	m
TO BE ABAT			odial S		(i.e.	thermal surfa	system: cing, VA		tion,		Specify or LF)	Remova	Repair	cap	nclo
(13)	,		(12)				niscellar				1.	oval	air	Encapsulate	Enclosure
		Yes	No	N/A					4					Ō	
Kitcher	1			X			VAT			1	02 SF	X			
					1										
						- 10									
									10						
Name of Registered Waste	e Hauler		14 600	JDEP W		98887777777	Yards		Name of	Registe	ered Landfill				
Jadar Contracting LL	.C		34 - 822	auler ID 033137		of Wa					Landfill		ii.		
City, State	25			y		Dispo	sal Date		City, Stat		A 19067			(4)) 005-110 (2) (2) 01	
Lincoln Park, NJ 070	3 3	Title					Signature	е	Noms	rille, r	A 19007	te			
Completed by Lillie Lazarevich		Secr	etary			Ż	EUC	ie	Jaze	me	-	2-18-	2012	2	

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Date of Notification (1) 12/17/12 Ck:2411 \$200		T	Name of Senior	Building (Owner/Op state Ma	erator	(2) er CBF	RE Asset	3604	Ces,	*	n I	7		
Agencies Notified Type Notification EPA Initial		1 3	Street Ad	dress	mble Av			450	j	-64			58		1
DEP Amended Amendment				e, Zip Co own, Ne	de ew Jers	ey 07	960		& []	CENS	We I	18	IL.		
Emergency (justification) DCA Cancellation	ncluding		Name of Jeffrey	Contact L. Rap	paport					ephone N					
Name of Facility Where Abatement is Taking	Place (3)		FACIL	ITY INFO	ORMATIO	N	Type	of Facility (4)			_			
Abon Pharmaceuticals Street Address 140 Legrand Avenue								School (K-12 Subchapter & Other (i.e. pr	(Oth			ildi	ngs,	home	es,
City (5) Northvale, New Jersey 07647							— е	tc.) e Feet		Floors			dg. A		
County (6) Bergen			County C	ode (7) SE ONLY		_		nt Use (Prio maceutica			ished)				
Name of Monitoring Firm Hired by Building (Accredited Environmental Technology			ASCM	No.				ement Cont oration	tractor	(9)	7:				
Street Address 220 Church Road				X			Addres McBrid	s de Avenu	e		7"				
City, State, Zip Code Bridgewater, New Jersey 08807							state, Zi dland l	p Code Park, Nev	v Jer	sey 074	24				
Project Manager for Monitoring Firm Eric Houseknecht			Telephon 908-21	ne No. 8-1108			none No 225-8			License 01104				1110000	
Start Date (10)	Scheduled 01/07/12		pletion D	ate (11)				A Monitor onmental	Labs						1 82
Occupancy Status During Abatement (Chec							Addres Rout	s e 22 Wes	t			_		200020	G Stendies
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 4pm start	al Facility F	lours	ent		_	100 Carlot (100 Ca	state, Zi	p Code w Jersey	0708	3					
Scope of Work (Check All That Apply)							۹		200		_	-			
≥3 sf or ≥3 if ≥160 sf or ≥260 if	automorphia.	nova moliti				×	Min Glo	Containme i-Enclosure vebag Proc	edure						
	ls L	ocati	on				INOI	n-Exempted	() an	u Non-Fii	lable F	-		ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenar dial S (12)	ly by nce/ staff?	Asbes (i.e.	tos Conta	system ing, VA	Material s insula T, or	(ACM)	(5	mount Specify or LF)	Kemovai		Repair	Encapsulate	Enclosure
Mechanical Room	Yes	No	N/A			TSI	- X - S - S - S - S - S - S - S - S - S		4	0 LF	Х	1	•—		
										UNIANAS.		1			
Name of Registered Waste Hauler			JDEP W		Cubic \			Name of F			fill				
Lilich Corporation			auler ID 3724	NO.	of Was			G.R.O.V		andfill.					
City, State Woodland Park, New Jersey 07424	-				Dispos: 01/08/			City, State Morrisvi		ennsylv	/ania				
Completed by Tatiana Kalenikova	Title Vice P	ręsi	dent		Si	gnature	7	1	la		Date 12/17	/1:	2		

No meck

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

(Original) Check #1233

Date of Notification (2 Orig.	Amended November 1		18, 2012	Name	e of Buildin	ng Owner / Operator	(2)	(Criginal) C	711001	. ,,		
Agencies Notified EPA DEP DOL DOH DCA	Am Am	CY	‡ <u>2</u>	Pier City,	t Address 1, Bay 1 State & Zi Francisco	7012 p Code p, CA 94111	PDEC 21 PI	NG	elephor	ne Ni	umbe	er
		-	-	Mich	ael Oriola	(Arcadis)	*				_	
			51 (0)	F/	CILITY	INFORMATION						
Name of Facility Whe Prologis Street Address 495 Meadow Lane	re Abatemen	t is Taking	Place (3)			Other Square Feet	(K-12) apter 8 (Other that (i.e., private & c) # of F	commercial building	s, hor	,		
City (5) Carlstadt						Current Use Warehouse	(Prior if being de	2 emolished)		85	75	
County (5) Bergen			County Cod									
Name of Monitoring F Arcadis US Inc. Street Address					ASCM	Synatech, In Street Addre	ess	tor (9)				
10 Friends Lane, Sui City, State & Zip Code	ite 200					829 Radio R City, State 8					_	-
Newtown, PA 18940 Project Manager for M David Hilinski		n		elephone		Little Egg H Telephone N	arbor, NJ 0808 lumber	7 License Num				
Scheduled Start Date		Schedule	ed Complet		(11)	609-296-691 Name of OS			0081	7	-	
November 19 Occupancy Status Du		ent (Check	Janua only one)	ary 31, 20	013	Synatech, Ir Street Addre		*	V-10-			
Facility Close Abatement P Other – Desc	erformed Ou ribe:	tside of No	rmal Hour		ent	829 Radio R City, State & Little Egg H		7				
) If		Is Locati		on ally Used	Descript	Mini-Enclosure Glovebag Proce Non-Exempted tion of	I(*) and Non-Friable Pri	ocedu	re atem	ent 1	Гуре
	ABATED	(ACM)		y Maintei dial Staff	nance or ? (12)	Asbestos-C Material	(ACM)	Amount (Specify SF or LF)				
	facility 13)		Yes	No	N/A	(i.e., therma insulation, sur or other miso	facing, VAT		Removal	Repair	Encapsulate	Enclosure
Office Areas		10-			Х	Drywall Joint	CONTRACTOR OF THE CONTRACTOR O	9,800 SF	Х		П	
Office Areas			+-		Х	Floor Tile ar	nd Mastic	3,800 SF	X			
Name of Registered W Synatech, Inc. City, State	aste Hauler		NJDEP V Hauler ID 27		Cubic Y 600 Disposa	ards of Waste	Name of Regis Grows Landfil City, State					
Little Egg Harbor, NJ	08087	1			Februar	ry 1, 2013	Morrisville, PA	V San Care La				
Completed By Diane Aloia	1	Title	un Admir'	tuete =	Signatur	(e · /)/	1	Date				
Piarie Millid		Executiv	ve Adminis	trator	14	we Clor		December 18, 2012				- 1



My pour	and the			
1 / 100	1:5	115	4	
	** f.,	# 5	5 100	Pa

Date of Notification (1) 12/17/2012		Name of Mrs.	f Building Kubiti	Owner/Oper s Realty I	ator (2) LLC		2012 DEC	21	Die	See a f	al .
Agencies Notified Type Notification EPA X Initial	,		Pascac	k Rd			ASHES!	#.C.	1 11	2:	58
DEP Amended Amendmen Emergency		Wash	ate, Zip Conington	ode Townshi	p, NJ	07676	4 59637 & L/(DEN.	SINC	Re	11.
DOH justification Cancellatio		Geor	ge Kou	regalis			Telephone Nur	moen			
Name of Facility Where Abatement is Taki Commercial Building Street Address	ng Place (3)				Typ 		2) 8 (Other than K-12				
237-241 Closter Dock Rd					Squ	Other (i.e. p etc.) uare Feet	rivate & commerci		dings, ldg. A		s,
Closter, NJ		County	Code (7)				or if being demolish				
County (6) Bergen			USE ONLY					,,			
Name of Monitoring Firm Hired by Building Bio Terra Solutions	Owner (8)	ASCI	VI No.			batement Con Managen					
Street Address P.O. Box 1224					reet Add 27 Ou	ress water Lane	e, Ste., B		0.000111.130		
City, State, Zip Code Union, NJ 07083	<u> </u>					Zip Code Id, NJ 070)26				
Project Manager for Monitoring Firm Rick Eustaquio		Telepho 973-4	one No. 194-376		elephone 973-9	No. 28-4888	License N 01188				
Start Date (10) 12/29/2012	Scheduled 0 1/03/2		Date (11)	Na Na		SHA Monitor o Manage	ment LLC			~~~	
Occupancy Status During Abatement (Che	eck Only One)			St	reet Add		ne, Ste., B				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 7am to 5pm	Period of Aba mal Facility Ho	tement ours		_ Ci	ty, State,	, Zip Code eld, NJ 07					
Scope of Work (Check All That Apply) X ≥3 sf or ≥3 lf 2 160 sf or ≥260 lf		ovation nolition			X !	Mini-Enclosure Glovebag Prod				e	
	ls Lo	cation		-		ton Exempted	(/ 4/10 / 10/1 / 1/10	Ī	Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	mally Solely by enance/ ial Staff? 12)		Descriptos Containi thermal sys surfacing other misc	items ins	ulation, r	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes 1	No N/A	max				261.15	1			
Crawl Space		X	TSI	Annual Control			25LF	X		X	
Crawl Space	#	X	AC	M Dirt			140SF	X		X	
Name of Registered Waste Hauler Newark Carting	NJDEP \ Hauler IC 4509		Cubic Yar of Waste As Nee	ded	Grows	Registered Landfill					
City, State Newark, NJ				TBD		City, State Morri	sville, PA				
Completed by Zvonko Veskov	Title Gener	al Mana	ger	Sign Sign	ature FILL	0/1/2		2/17	/201	2	

Job #: 1212-1709 Check #: 2965

Date of Notification 12/19/12	(1)						Owner / Operate	or (2)	2612		D-			
Agencies Notified EPA	Type Noti	fication		Stree	et Add				TOILE	DEC 21 PM 2:	5ล			
□ DEP □ DOL	23	tial nended		City,	State	& Zip (Code		* <u>*</u>	STOS CONTR LICENSTHOIT	ÐL	t.		
□ DOH □ DCA		nergency incellation	7.0			ontact l o Pat	ernoster			TOPINGIT	elenho	ne N	umh	ər
2		j.		F.A	CILI	TY INF	ORMATION		7	1			99.00	
Name of Facility WI Residential Prop Street Address		ment is Taking I	Place (Type of Faci	(K-12)	Other th	nan K-12)	100			
242 Dogwood Dr	rive						Other (i. Square Feet		ate & co	mmercial building			etc.)	
City (5)		County (6)	Co	unty	Code	(7)	800		1		dg. Ag) year			
Bayville		Ocean					Current Use Residentia		f being		y car			
Name of Monitoring	Firm Hired	d by Building Ow	ner (8)		AS	CM No	. Name of Aba	atemen	t Contra	actor (9)				
Street Address	do						Street Addre	ss Blvd.						
City, State & Zip Co	ae		*				City, State & Hainesport							
Project Manager for	Monitoring	g Firm	Telep	ohon	e Num	ber	Telephone N 609-702-04	lumber		License N	umber 0086	2		
Scheduled Start Da 12/31/12	te (10)	Scheduled Co 12/31/12	mpletion	on Da	ate (11)	Name of OS EMSL Ana							
Abatement Describe:	sed/Vacate Performed	tement (Check of d During Entire I Outside of Norn	Period	of At	ateme	ent	Street Addre 107 Haddo City, State & Westmont,	n Ave Zip Co	de	10				
Scope of Work (Che		apply)												
≥3 sf or ≥3 l≥160 sf ≥26	f	арр ,у)			novati molitic				Mini-Er Glove I	ontainment with No nclosure Bag Procedures cempted and Non-				
	ocation of			Loca		Τ .	Descriptio	n of	.1102	Amount	Aba			
Mat TO E	tos-Contair erial (ACM BE ABATE n Facility (13))	S Main	olely tena	nce or Staff?		Asbestos-Cor Material (A (i.e., thermal s insulation, surfa or other miscel	ntaining CM) systems cing, V	s AT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclsoure
Exterior			Yes	No	N/A		otos Chinales		-	000 05	N			
Exterior			╁╫╴	H		ASD	estos Shingles	5	-	900 SF		H	H	H
			Ħ	H	X					1 2 2 2		H	Ħ	Ħ
		. 30-2-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3			\boxtimes							H	旹	
Name of Registered	Waste Ha	uler		N.	JDEP	Waste	Cubic Yards	Name	e of Rec	gistered Landfill				
Horizon Disposa				Ha	auler I 226		of Waste	GRO					(4)	
City, State Trenton, NJ							Disposal Date 12/31/12	City,	State risville,	DA				
Completed By (Print Kim Trumbett				100,000	^{tle} dmir	1.	Signature	WOOT	is ville,		Date 12/1	9/1:	2	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 12/20/12					Name of Buildin E.I. DuPont De	ng Owner/O Nemours						
Agencies Notified		Notification	Гуре		Street Address Rt 130		2012 DE	21 F	PM 2	: 58		
(X)EPA (X)DOL (X)DOH ()DCA		() Initial Not (X) Amend () Cancelle	ed Certificat	iion	City, State, Zip Deepwater, NJ		& Li	ES ES CENSI	NG NG	ROL		
()26.1					Name of Conta			T-I Nium	hor		1	
				FACILITY INF	ORMATION	-						
Name of Facility Where At Dupont Chambers Works	patement is Ta	aking Place (3	3)		Type of Facility () School (K-1	2) 8 (other tha	an K-12)	6	o ete			
Street Address Route 130				= :	(X) Other (i.e. Sq. Feet 3000				:S, EIC			
	0 + (0)		County Co	odo (7)	Sq. Feet 3000		# 011100	.o <u>L</u>				
City (5) Deepwater	County (6) Salem		(State Use		Bldg. Age 52_ Current Use (p	rior if being				ıfacturer		
Name of Monitoring Firm Harvard Environmental,	Hired by Bldg. Inc.	Owner (8)	ASCM No		201	2	Name of Cor NCM Demol			liation, L	Р	
Street Address 760 Pulaski Highway					Street Address 395 Turner Ind							
City, State, Zip Code New Castle, DE 19720					City State, Zipo Aston, PA 190		201		724 —			
Project Manager for Monit Wesley Morrison	Project Manager for Monitoring Firm Wesley Morrison Telephone Number 302-326-2333					mber		License 01006	Numb	er		
Scheduled Start Date (10 09/17/12	Date (11)	Name of OSH, EMSL Analytic										
Occupancy Status During (X) Facility Closed/Vaca () Abatement Performed	ted During En	tire Period of	Abatement		Street Address	2).						
Describe	- Caloide of the				City, State, Zig Westmont, NJ				V			
Other - Describe												
Source of Work (Check a	ll that apply)											
() Demolition (X) Re (X) Large Proj. (>160 SF (X) Full Containment wi	novation or >260 LF A	CM) ()M Pr	oj. (>25<160	0 SF or >10 <26	0 LF ACM) (Glovebag Proce		j. (<25 SF or	<10 LF AC	CM)			
Location of Asbestos-	Is Loc	ation Normall	v Used	Description of		Amount (Specify SF or	LF)	Abate	ment Ty	<u>pe</u>	
Containing Material (ACM Facility (13)		by Maint./Cu	stodial	thermal system surfacing, VAT	ns insulation,				Rem.	Rep.	Encan	Enclose
, , ,	YES	NO	NA	miscell.)		0404.05			X	Titop.	Г	T
Thru Out Facility	X			Mastics	tion	6484 SF 1015 SF			<u>^</u>		-	+
Thru Out Facility	Χ.	11		Thermal Insula		482 LF			X			-
Thru Out Facility	X			Pipe Insulation VAT/Mastic	1	608 SF		100	X	-	1.1	1
Thru Out Facility	X			Galbestos		1579 SF			X		1	
Thru Out Facility	X			Gaskets		814 SF			X			
Thru Out Facility Name of Reg. Waste Hat		NJDEP Wa	aste Hauler		Cubic Yards o	of Waste		Name o DuPon		Landfill nbers W	orks	
DuPont Company City, State Deepwater, NJ							Disp. Date 1/20/12			City, Sta Deepwal		
Completed by (Print or T Russell King	ype)	<u>Title</u>	Project Mana	ager	Signature	7/		<u>Date</u> 12/20/13	 2			
		l			1					77		-

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	Ittion or Renovation(continued)	ethodo to he Head.	Darboral of VAT mastic and
X. Description of Planned thermal systems insulation equipment, wet material,	Demolition or Renovation Work and Mon. Regulated work area, negative air co and double bag.	ontainments, glovebag	開始のval of VAT, mastic, and procedures, the pulltration 2:58
XI. Description of Engineer	ering Controls and Work Practices to be		
Demolition or Renovation	Site: Regulated work area, negative equipment, wet material and double ba	air containments, glov	vebag procedures, wet removal
XII. Waste Transporter#1	DuPont Company		
Address:			
City: Deepwater	County: Salem	State: NJ	Zip: 08069
Contact:		Telephone:	0.00
Waste Transporter#2	Same as #1		
Address		1	
City	County	State	Zip
Contact		Telephone	
	DuPont Chambers Works	EPA Certifica	ation Number: P0104984
Address:		To the control of the	
City: Deepwater	County: Salem	State: NJ	Zip: 08069
Contact:	I was a second	Telephone:	
	o Ordered by a Government Agency, Ple	ease Identify the Agend	y Below:
		Title	
Name Authority	•		
Date of Order (MM/DD/YY)		Date Ordered to Begin (MM/DE	O(YY)
	vations:		
XV. For Emergency Reno	1	(HH:MM)	
DATE and HOUR of Emergency: (I Description of SUDDEN, UNEXPE		(mm.wiwi)	
Explanation of how the Event cau	sed unsafe conditions, or a serious disruption of inc	dustrial operations	
XVI. Description of Proce Fiable Asbestos Material alert generator	dures to Be Followed in the Event that Becomes Crumbled, Pulverized or Red	Unexpected Asbestos uced to Powder Segre	is Found, or that Previously Nor gate area, wet matrials, post signs
Site During the Demolitio	vidual, Trained in the Provisions of this on or Renovation, and that Evidence tha able for Inspection During Normal Busin (Signature of	t the Required Training	g has Been Accomplished by
XVIII. I Certify that the Ah	ove Information is Correct		
A This I Cording that the Ab			
		16	
	(Signature of	Owner/Operator)	(Date) 12/20/12

Courtesy Notification

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

Job #: 1210-1683 Check # NA – Government Property

								10° 6"		110	3				
Date of Notification 10/25/12	(1)	* ***			e of B			er / Operato	or (2)	i bal		ч			
Agencies Notified	Type Notific	ation	- 5	Stree	et Add	ress		2012 DE	C 21	PM 2	: 58		Ŧ		
								rman Aver	nue	A 8.00 1000					
☐ DEP	☐ Initia		4.5		State			6.5 aE.	QTQC	rewr	高剧			,	
□ DOL		nded #1	-		Suire .				LICE						
□ DOH		rgency	18		e of C			62	LIVET	DINO		Telepho	ne Ni	umbe	er
☐ DCA	Cand	cellation	F	Rob	ert Ja	ques	;				· · ·				
					CILI	TY INI		MATION							
Name of Facility W			ace (3	3)			Ţ	ype of Facil							
McGuire Air Ford	ce Base Bu	ilding #2101				11-11-12-12-12-12-12-12-12-12-12-12-12-1		School (. حالم سر مالد	K 10)				
Street Address								Subchar			400 NA-600 NO 100 100 100 100 100 100 100 100 100 10	aa bam		101	
2101 West Arnol	a Avenue							Other (i. Square Feet		# of Flo	nmercial buildin	-		(C.)	
O:4. (E)		County (C)	Ica	. inti	Cada	(7)	_					Bldg. Ag	3		
City (5)		County (6)	100	unty	Code	(1)		3,000		2		1956			
Wrightstown		Burlington						Current Use	18		F				
NI	F: - (1:1)	D. IIII - O	(0)	_	TAG	CNANL	_	/acant-Cer	Charlesonia, mark	450V00751367 - 2007					
Name of Monitoring Horizon Environ		by Building Owr	ier (8)		AS	CM No	35	Name of Aba Asbestos a			vices, Corp.				
Street Address								Street Addre							
PO Box 316							3	8859 Sylon	Blvd.						
City, State & Zip Co	ode		1011-0-00-0					City, State &	Zip Coo	le					
Thorofare, NJ 08	3086						H	Hainesport	t, NJ 08	036					
Project Manager fo	r Monitoring	Firm			e Nun			Telephone N			License N	Number	2000		
Dave or Steven	Flanigan		856-	848	-0800		6	609-702-04	00			0086	2		
Scheduled Start Da 12/17/12	ate (10)	Scheduled Cor 2/17/13	npletio	on D	ate (1	1)		Name of OS EMSL Anal		itor					
Occupancy Status	During Abate		alv on	e)				Street Addre							
		During Entire P			batem	ent		107 Haddo				19			
		outside of Norm						City, State &		le					
Describe:	02						V	Westmont,	, NJ 08	108					
Scope of Work (Chec		Λ			- 1										
Coope of Work (once	ar an arac appry	,									tainment with Neg		ssure	&	
				ъ.						Negative Mini-Enc	Pressure Enclos	ures			
≥3 sf or ≥3 lf ≥160 sf ≥260					enovatio				0150000						
≥160 sf ≥260	J II		\boxtimes	De	emolitio	п		500			ag Procedures empted and Non-F	riahla Pr	redu	re	
	ocation of		Is	Loca	ation	T-		Descriptio	-	TOIT EXC	Amount		atem		vne
	stos-Containii	na			Used		A	sbestos-Cor			(Specify	7,00			ypc
The state of the s	iterial (ACM)	3		olely				Material (A			SF or LF)	_		Щ	m
	BE ABATED				ance o			e., thermal				Removal	Re	Encapsulate	Enclsoure
	in Facility		Cust		I Staff	?		lation, surfa			1 1	NO.	Repair	nsc	Sou
	(13)		Voc	(12			or (other miscel	llaneous)		<u> </u>		ate	6
Courth First			Yes	No		626	nite Of	ding Panels		-	13 000 CE	K2			
South End Interior Areas			H	⊠ ⊠				ding Panels ding Panels	7/12-1		13,000 SF 4,000 SF				
Electrical Panel/Circuit	Breaker Room					Floor	r Tile				350 SF				
Office Area	. Boom			⊠		Floor		ng Insulation	-		150 SF 300 SF		-		믐
Upper Level Laboratory Breech Stacks-Boiler #			-					ng insulation Iging Insulation	n		5,500 SF		H	H	님
Throughout Building	a de la companya de l	1012 2014	<u> </u>	×		Pipe	Fitting	s (elbows/tees fiberglass Pip	/valves/fla		625 each	Ø		ō	
Throughout Building				×		Pipe	Insula	tion		-	900 LF	Ø	口		
Throughout Building Name of Registered	Waste Houles				JDEP		Insulat	tion bic Yards of	Name	of Regio	400 LF stered Landfill				
Horizon Disposal	vvaste Haulei			100	lauler I		1000000	iste		/S Land					
City, State Trenton, NJ	0		- 177					posal Date 7/12	City, S Morris	tate ville, P	4				
Completed By (Print	or Type)	· ·		- 1 2	itle	*	Sig	nature i		``.	£1	Date	40		
Kim Trumbetti		55			\dmin.	15	A	DVIL				12/12	12		

Job #: 1211-1692 Check #: NA

RECEIVED

Date of Notification	(1)	***					Owner / Operat	or (2)	-	# t ha	· VeC. (1)	V 204 1	•		
11/27/12	Toma Nacc				T, LL				- 2	Alanc	<u> </u>		112-200-		
Agencies Notified EPA	Type Notific	cation	1,000		t Addr		-4.44000			ALT DE	C 21 P	'H 2:	58		
□ DEP	☐ Initia	a .			NI WHITE COLUMN	Alberta Souther Teath	et #1000								
DOL		ended #1	13.333			& Zip (š .0	095	788 C	HIR	MI.		
☑ DOH		ergency				ontact	002			_&_L	11 1- 21	INIO			
DCA		cellation	1000		m Na						11	elepho	ne N	umb	er
							ODILATION							- •	
Name of Facility Wh	ere Ahatem	ent is Taking D	lace (3)	FA	CILII	YINF	ORMATION	11:4 / 4	`		- 44	1.7			
Kindermorgan (K				1			Type of Faci								
Street Address		on = / ipproud				-			Other th	an K-12)				
78 Lafayette Ave	nue								vate & cor			s hom	es e	tc)	
							Square Feet		# of Flo			dg. Ag		,	
City (5)		County (6)	Cou	nty (Code	(7)	NA		NA		N.				
Cartaret		Middlesex		- 58		8 5	Current Use	(Prior		demolish					-
							Liquid Ter				/				
Name of Monitoring	Firm Hired	by Building Owi	ner (8)		ASO	CM No				ctor (9)					
Tiger Environme			, ,				Asbestos				Corp.				
Street Address							Street Addre								
234 20 th Avenue							3859 Sylor			4 4 5 4	-,				
City, State & Zip Co Brick, NJ	de						City, State &								
Project Manager for	Monitorina	Cirm	Talask		NI		Hainespor			444			dia .		
Kelly Walton	Monitoring	FIIII	Teleph 908-8			ber	Telephone N 609-702-04		er	L	icense Nu		•		
Scheduled Start Dat	e (10)	Scheduled Cor		0.00150.00.00		1	Name of OS		onitor			0086	2		
12/10/12	ic (10)	12/12/12	ripietioi	ı Da	10 (11	,	EMSL Ana								
Occupancy Status D	Ouring Abate	ement (Check o	nly one)			Street Addre		41				2		
Facility Clos	ed/Vacated	During Entire F	eriod o	f Aba	ateme	ent	107 Haddo		e.						
Abatement F	Performed C	outside of Norm	al Hour	s			City, State &	Zip C	Code						
Describe:							Westmont,	, NJ (08108						
Isolated Are	-				- 22		\$1 L	3		0.00	10				
Scope of Work (Che	ck all that a	pply)											1200		
☐ ≥3 sf or ≥3 lf				Don	novatio	20		H			nt with Ne	egative	Pres	sure	
≥160 sf ≥260			A		nolitio			片	Mini-En						- 1
	<i>3</i> II		ш	Dei	HOHLIO	41		씜	Glove B		and Non-	Erioblo	Dro	ood	
Lo	cation of		Isl	ocati	ion	T	Descriptio	n of	NOII-LX	T .	nount			ent T	
	os-Containir	ng	Norma				Asbestos-Cor		na	0303	pecify	Abe	iterne	211L I	ype
	erial (ACM)		Sol	lely l	by		Material (A	(CM)			or LF)			щ	m
	SE ABATED		Mainte				(i.e., thermal					en	Re	cap	nc
10	Facility (13)		Custo	ตเลเ (12)	Statt?		insulation, surfa or other miscel					Remova	Repair	Encapsulate	Enclsoure
	(10)			No	N/A	1	or other miscer	lialieu	us)			<u> </u>		ate	ē
Exterior	*		mt	П		Pine	Coverings	0.5		70 LF	2000				
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11-5			П	Ħ			The second secon			0 =====			H	H	H
F					Ø		Wase of					A	Ħ	H	州
Name of Registered	Waste Hau	ler			DEP \		Cubic Yards	Nan	ne of Reg	istered I	andfill			اب	
				На	uler II		of Waste								
Horizon Disposal		12	584.		2261	12	10	1000000	ows			6			
City, State Trenton, NJ							Disposal Date		, State	D.4					
	or Tues						12/13/12	INIO	rrisville,	PA .			8		
Completed By (Print Kim Trumbetti				Titl	e dmin		Signature		1			Date	014		
iziiii i i uiiibetti				AC	attillf		DAN/					12/1	3/12	2	

004φ21 D&S Proj. #: MS 12-431

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

RECEIVED

										Day 5.	,			
Date of Notification	1/12			ilding Own	er/Operator (2) EY			2012 D	EC 21	PM 2:	58			2000/10000
Agencies Notified EPA	Type Notificati Initial Amended	on S	treet Addre			í	É	1560	SIES LICE	Cantri Sing	ÐL			i
DEP	Amendment #:	1 1	ity, State, 2					No.	L II i'm MA	HHG-				
DOL	Emergency	-		URY, NJ	08512									
⊠ DOH	(including	N:	ame of Cor		00312				Telepho	ne Number				
_	justification)	11							rolopilo	iio iiaiiiboi				
☐ DCA	☐ Cancellation		DOROT	HY KEL	LEY	1								
				FAC	LITY INFORM	ATION							ð Emilioner	
Name of facility w	here abatement is	s taking pla	ce (3)					Type	of Facility	(4) ool (K - 12)				
DOROTHY K	ELLEY								=	hapter 8 (O	ther th	nan K	12)	
Street Address										(Private/C s./Homes, e		rcial		
1960 OSTWO	OD TERRACE	l		71	**************************************			Squa	re Feet	# of Floor	s	Blo	lg. Ag	je
City (5)		Cour	nty (6)			Cour	ity Code (7)							
UNION		UN	ION			(Stat	e use only)	Curr	ent Use (Prior if bein	g dem	olishe	ed)	
Name of Monitorin	ng Firm Hired by I	Bldg. Owne	er (8)		ASCM No.	' П	Name of Abatement	Contrac	tor (9)					
							D & S RESTOR	ATION	I. INC.					
Street Address							Street Address							
						- 11	20 California A	ve.						
City, State, Zip Coo	de						City, State, Zip Code							
Oity, Otato, Esp Co.	. • .					- 11	Paterson, NJ 07					60		
Project Manager fo	r Monitoring Firm		Ipi	none Numb	or .		Telephone Number	7505		License	Numb	er		
Project Manager ic	n Monitoring i inti	./h	- 1''	IONE NUME	-Ci		973-345-8020	í			1169			
							Name of OSHA Mor							
Start Date (10)		Sched	I. Completi	on Date (1	1)		D & S Restorat							
12/28/12		01/14	4/13			- 11	Street Address	ion, me	•					
Occupancy Status	During Abatemer						20 California A	venue						
	ed/vacated during			ement.			City, State, Zip Code				-11		_	
Abatement p	erformed outside	of normal					City, State, Zip Code							
Other-Descr	ibe: NORMAL H	IOURS				_	Paterson, NJ 07	7503						1000
Scope of Work (c		and the second second second						Full Con	tainment	w/negative	press	ure	_	
>3 sf or >3 lf		Renovation	n .					Mini-en						
	K7						\boxtimes		ag proced					
≥160 sf or ≥	260 If	Demolition						Non-Ex	empted (*) and Non-			-	
Location of			n normally enance/cus	used solely	1					100	R	R	E n	E
asbestos-co material (aci		staff(12)	, nance/cue	stodiai			bestos-containing		Amount (Specify	SF or	m	p	C	n
abated in fac		Yes	No	NI/A	material	(ACM)		- 1	LF)	01 01	O V	a	а	L
		165	INO	N/A							ě	r	р	
Basement			X		PIPE INSU	JLATI	ON & FITTINGS	24.	5 L FT		X			
					1									
					1						П	П	П	П
					1				-11		ī	$\overline{\Box}$	〒	
	_		_	#	1						H	H	Ħ	亍
Registered Waste	Hauler		EP Hauler	ID# I C	ubic Yards of	Waste	Name of Registered	Landfill			<u></u>			Щ.
D & S RESTOR			506		3 YDS		TULLYTOWN,			ECOVER	Y			
City, State				Disposal I	ate	_	City, State	- Q.					4	
PATERSON, N	NJ 07503		.5	12/31/1	2		TULLYTOWN	, PA					7	
Completed by (Prin	nt or Type)	Title			Signature				2	Date				7
BOGDAN JOI		PRESID	ENT							12/17/	12			
ASD 41		Do not us	e this form	for asbest	os licensure ex	empted	activities.			W		0.000		

D&S Proj. #	MS 12-430		. 30		0			" I C C E	IVER							
			(B) (U) 0	···nor/One	erator (2)		70	12 DEC 21	* 8 1 4 1 m²							
Date of Notification	(1)	- 11	of Building O		514101 (2)		C.	12 DFC 31	PM 2. =							<u>.</u>
1 12 1/11 14	Type Notification		N GOODE				35 m	F 9790	- C	0						
Agencies Notified	Initial			NI A 1/E	NILIE			ESTAS C & LICENS	SNIRM						_	_
DEP	Amended		JEFFERSO		NOL			Cho	ING	-					9	
	Amendment #:		ESTFIELD,		90											_
<u> Z</u>	Emergency (including		of Contact	143 070			7		Tele	phon	e _i Numbe	er				
□ DOH	justification)			NE.							ell'					_
☐ DCA	☐ Cancellation	FF	AN GOOD			TION	_									
			1	FACILITY	INFORMA	ATION			Type of Fa	cility	(4)					
Name of facility w	here abatement is ta	king place	3)							School	ol (K - 1					
										Subcl	hapter 8	(Other	than	K-12)		
FRAN GOOD	E								\boxtimes	Other Bldas	(Private	, etc.				
Street Address									Square F		# of Flo			Bldg.	Age	
116 JEFFERS	SON AVENUE		(0)			Count	ty Coo	de (7)					1_			_
City (5)		County	(6)			(State			Current	Use (Prior if b	eing de	molis	hed)		_
WESTFIELI)	UNIO			00MM=	110	Name	of Abatement C	Contractor	(9)						
Name of Monito	ring Firm Hired by Bl	dg. Owner (8)	A	SCM No.			s RESTOR								_
							Street	Address								
Street Address							20	California Av	ve.							_
						<u> </u>	City, S	State, Zip Code								
City, State, Zip C	ode						P	aterson, NJ 07	503		Higg	nse Nu	mhe			_
	for Monitoring Firm		Phone	Number			Telep	hone Number			Lice	011				
Project Manager	for Monitoring Firm					11		973-345-8020 e of OSHA Mon								_
		TSched.	Completion D	Date (11)				& S Restorat					_			
Start Date (10	,	12/28/						et Address								
12/19/12	tus During Abatemer							California A						===		-
	and/uncated during	entire perio	d of abateme	nt.			City,	State, Zip Code	•							
Abateme	nt performed outside	of normal fa	acility hours-				١.	Paterson, NJ 0	7503							
Describe	:NORMAL F	IOURS					1	aterson, NJ 0	Full Conta	ainme	ent w/nec	ative p	ressu	ıre		
Scope of Wor	k (check all that appl	y)			77			-	Mini-encl			,				
> <u>3</u> sf or			n					Ž.	Glovebag Non-Exe	proc	cedure	Non-fri	iahle	proce	dure	
≥160 sf		Demolition	i						Non-Exe	mpte	d (*) and	INOTI-III	K	R	E	E
		Is location	n normally us	ed solely			1	t containing		Amou	unt	- 1	e m	e p	n c	r
Location asbesto	s-containing	staff(12)	nance/custo	ulai	Descr	ription of rial (ACM	asbes 1)	stos-containing		(Spec	cify SF o	r	0 V	a	а	l i
material abated	l (acm) to be in facility (13)	Yes	No	N/A		88				,			е	-	р	+
asars					Duct Ins	sulation	i .		20	L FT			X	片	님	뷰
Basement		-			1					_			片	낶	ዙ	+
		-			1	10							片	뷰	片	#
		-			1								片	片	計	竹
		-			1			(5.11	rod Landfill				111	1-	1-	1.
Registered W	aste Hauler		EP Hauler II		Cubic Yards	s of Wast	te N	lame of Registe TULLYTOW	N, RESO	URC	E REC	OVER	Y			_
D & S RES	STORATION, INC	C. 13	506	Disposal	1 YD		_	City, State								
City State				12/20/			_	TULLYTOW	VN, PA			Dete	_			
	ON, NJ 07503	Title			Signatu	ire	-					Date 12/14	/12			
Completed b	y (Print or Type) N JOLDZIC	DDECT	DENT				nha d	octivities	- 4-1-4-							
DOUDAL		* Do not u	ise this form	for asbes	tos licensu	re exemp	pied a	ACTIVILIES.		7						7

ASB-41

REMEMB	ER - MA	JL IN Å	ARD CÔ	Dy (2) dr/Operator (2)			1	MAGOF	1	200	٠,	0	120
1 12 / 1 14 / 11 12 1			Hang'OM			TE		7/	196	2000	2/	ρ,	
Agencies Notified Type Notifica EPA Initial DEP Amended, Amendment		ireet Addi 116 JEF	6807	AVENUE			IM	MF	180		Car Car	·/ <	2. Sp
DOL Emergency	,—	WEST	FIELD, N.	T 07090		INI	VER	Altes	MED	1	G		2
DOH (Including lubtification)	ame of Co		14		3		Telepho	no Numbe	Ban .			
Cancellation	n U	FRAN	GOODE		AT1001	\$ 5 p = 7 7	Pe		+ ; .	_===	-		
Name of facility where abetement	in taking ol	100 /91	PAC	ILITY INFORM	AHON			ype of Facility	(4)				
FRAN GOODE	is rewing bis	109 (3)	7.					Scho	ol (K - 12)		hav. le	12)	
Stroot Address						74504 <u>-1</u> -1	-	⊠ Other	hapter 8 (C (Private/C	amme		12)	
116 JEFFERSON AVENUE	2						11-	Bldgs Square Feat	# of Floo	-	BI	dg. A	QB
City (5)		ity (6)	Table 1		Cour	ity Code (7)		4,					
WESTFIELD	IN	ION			(Stat	a use only)		Current Use (Prior if being	o den	olishe	ed)	
Name of Monitoring Firm Hired by				ASCM No.		Name of Abatem	ment Cor	ntractor (9)		-	-		
		apathy, a				D & S REE I	ORAT	ION, INC.			* .		
Street Address	7	1.				20 Californi	ia Avc.	57	1 7				
City, State, Zip Coda			•			City, State, Zip C					ti i są		32
Project Manager for Munitoring Fin	- 1 · .	Tip	hone Numb	inc		Paterson, N Telephone Number	-	3	Liconse	Nomi	or	IK-	
Project Manager of Montoring Par	IF #		INTERNATION INTERNATION	-01		973-345-3				1169			
Start Date (10)	School	Complet	ion Dato (1	1)	-	Name of OSHA D & S Roste		Inc	*	N			
12/19/12	12/28	3/12			_	Street Address	madon,	MK.		_			
Occupancy Status During Abateme						20 California		uc	present the	-			
Abatement performed outside pescribe:	of normal					City, State, Zip C							
Other-Describe NORMAL	77				-11	Paterson, N			whosetwo	DECAGO	1 HPO	-	
Scope of Werk (check all that app >3 sf or >3 if >160 sf or >260 if							Min Glo	Containment i-andosure vebag procedu n-Exempted (*	Tue			editte.	,
Location of asbatos-containing material (acm) to be		normally mance/ou	used solel stodial	1		bestos-contain :	a	Amount (Specify	SF or	Remo	Pr P	H c c	E n e
abated in facility (13)	Yes	No	N/A	I terrotat f	- CAIAI)		•	ĹF)		v	i	p	L
Basement		X		Duct Insula	tion			20 L FT	4,	X			口
	Sec.				,				-	ዙ	井	H	쓔
White the state of	-						GL.			日			宣
M-Carlotte - Carlotte													
Pagistared Wesle Hauler 1) & S RESTORATION, INC.		P Hauler		ubic Yarda of V 1 YD	Vaste	Name of Regist	erod Lar VN, RE	ndfill SOURCE K	ECOVER	Y			-
ty, Slate PATERSON, NJ 07503			Disposal L 12/20/1			City, State TULLYTO	1 4			- III	4		•
Completed by (Print or Type) ROGDAN JOLDZIC	Title PRESID			Signature			11		Dale 12/14/	12			
ASB-41	* Do not us	o this form	for asboot	os licensura oxe	mpted	activities.							

Date of Notification (1) 12/14/12		Pursuant to NJAC 8:60 Name of Building Own Ron Mcqued / Re	er/Operator sidence	(2) E CE	/ED	.~	
Agencies Notified	Type Notification	Street Address 14 Iowa	201	2 DEC 21 P	M 2: 5	e	9
EPA DEP DOL	Initial Amended Amendment #	City, State, Zip Code Tuckerton NJ 080	87 ⁶ 31	og - Too ca	NT液 病	1	
DOH DCA	Emergency (including justification) Cancellation	Name of Contact Ron		& LICENST	Tele	phone Numb	per
		FACILITY INFORM	ATION				
Name of Facility Where Ron Mcqued / Res Street Address 14 Iowa	Abatement Is Taking Place (3) idence	**************************************		Type of Facility School (K. Subchapte Other (i.e. etc.)	-12) er 8 (Other	r than K-12) commercial	buildings, homes,
City (5) Tuckerton NJ 0808	7	-		Square Feet 1000+	# of l	Floors	Bldg. Age 35+
County (6) · Ocean		County Code (7) (STATE USE ONLY)		Current Use (P Residence	rior if bein	g demolishe	d)
Name of Monitoring Firm N/A	Hired by Building Owner (8)	ASCM No.	1 PASSESSES 100 CO	of Abatement Co naco Inc	ontractor (9)	15
Street Address				t Address Box 329		e e	2
City, State, Zip Code				State, Zip Code st Berlin NJ 08	091		
Project Manager for Mo	nitoring Firm	Telephone No.		hone No. -753-9800		License No 00727	•
Start Date (10) 12/26/12	Scheduled 0 1/3/13	Completion Date (11)	Name Sam	e of OSHA Monito ne	or		
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:				t Address State, Zip Code		1	

						d (*) and Non-Fria	DIE Pro	ceaur	<u>e</u>	
			Locatio						ement pe	
	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Solel intenan todial S (12)	y by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A					6	L
	Exterior Siding			х	Exterior Siding	1000 Sf	x			
-		+					+	-	-	-
-		-					\neg		\vdash	

Cubic Yards

Disposal Date

Signature

of Waste

1/3/13

2

NJDEP Waste Hauler ID No.

22459

Title

President

Renovation Demolition

Mini-Enclosure

Glovebag Procedure

Anthony T Perna

United Containers

City, State Elm NJ

Completed by

Scope of Work (Check All That Apply)

Name of Registered Waste Hauler

≥3 sf or ≥3 lf

≥160 sf or ≥260 lf

Date

12/14/12

Name of Registered Landfill

City, State Morrisville PA 19067

G.R.O.W.S.

Full Containment with Negative Pressure

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

						3/10 0:00 7 and 12		for the second	Check	# 6973	3		
Date of Notification (1)	12/17/12					Operator (2) Education	RECE	t V & D					
Agencies Notified [] EPA	Type of Notificati [x] Initial	3000 300		ddress lley Ro	ad	1	2012 DEC 21	PM 2: 5	8				10
[] DEP [X] DOL [X] DOH	Notification [] Emergency [] Amended Notification	F-10000	•	ate, Zip Co clair, N		42	ASBESTOS & LICE	CONTRO NSING	L		8800		
[] DCA	[] Cancellation	1		f Contact aponal	a	22	. 1	elephone Nur	nber				
				F	ACILIT	Y INFORMATION					_		_
Name of Facility Where Hillside School Street Address	Abatement is Tak	ing Plac	ce (3)				Type of Facility [x] School [] Subcha [] Other ((K-12) pter 8 (Other .e. private an	than K-12) d commercial l	ouildin	gs,		
54 Orange Rd.							Square Feet	# of Floo	rs Bld	g. Age			
City (5) Montclair		County (T		unty Code (7) ATE USE ONLY)	120000 Current Use (Pri educational	3 or if being de	~ 7		-2.00		
Name of Monitoring Fin Detail Associates		g Owne		ASCM No.		2	ment Contractor (9) Jupiter Enviro	nmental S	ervices, In	c.			
Street Address 300 Grand Ave.							3 Lynn Court						
City, State, Zip Code Englewood, NJ 0		Tolon	hana	Number		City, State, Zip	Lincoln Park,	NJ 07035	License N	ımher	0		
Project Manager for Mo Stephen J. Scheduled Start Date (201	-569	Number 0-6708 Date (11)		Name of OSHA	973-709-0200)	License IV		85	2	_
12/26/1	2	12/	31/1	2		Street Address	J & S Environ	mental La	boratories	LLC	<u> </u>		
[] Abatement Per Descri	I/Vacated During E formed Outside of	ntire Pe Normal	riod c	of Abatem		The second secon	2333 Route 22 Code Union, NJ 070						_
Scope of Work (Check						<u></u>	[] Foll	Containment	with Negative	Droce	ıra		_
[] Demolition [x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥26	0 lf			[]	Renova	ition	[x] Min [] Glo	i – Enclosure vebag Proced n – Friable Pro					
Location Asbestos – Co Material (A TO BE ABA	ontaining CM)	Non S Maint		Used	-8	Asbestos Mate (i.e., the	cription of s – Containing rial (ACM) rmal systems surfacing, VAT,		Amount (Specify SF or LF)	Ab Tyr R E M		E N C	E N C L
In Facili		Yes	No	N/A			niscellaneous)			V A L	R	PS	0 S U
Basement and crawls	space		Х		Pipe in	nsulation			35 LF		x		_
						on and					-	+	_
Name of Registered Wa Jupiter Environm		s Ha	DEP Vuler II		1000	ubic Yards Waste 1/2	Name of Regis Minerva La						
City, State Lincoln Park, NJ	- W = 3	146				sposal Date /4/13	City, State Waynesbu	rg, OH					
Completed By (Print or Pane Repic	Type)	Title Gen	eral	Manag	er	Signature	Lu		Date 12/17/	12			

ASB-41

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

						NJAC 0.00-7 and 12.		mr.	Check	# 697	1		
Date of Notification (1)	/17/12					er/Operator (2) of Education			Check			-1000-020-04	
Agencies Notified Ty	pe of Notifica			Address alley R	oad		24	113 DEC 21	PM 2: 58				
[] DEP []	Amended	, C		ate, Zip clair, N		042	6:3	& LICEN	JOH TROL				
[X] DOH	Notificatio	n N	ame c	of Contac	ct c	-		Telephone N	Iumber				-
[] DCA	Cancellatio	n L	en S	Sapona	ara ,			Water Box					
					FACIL	ITY INFORMATION		٠					_
Name of Facility Where At Nishuane E. Schoo Street Address 32 Cedar Ave.		aking Pla	ce (3)	34			Type of Faci [x] Scl Sub Oth	lity (4) hool (K-12) ochapter 8 (Othe er (i.e. private a mes, etc.)	er than K-12) and commercial	buildir	ıgs,		
				- 9			Square Feet			lg. Ag	9		
^{City (5)} Montclair		County Essex				ounty Code (7) STATE USE ONLY)	90000 Current Use educational	3 (Prior if being o	demolished)	50			
Name of Monitoring Firm F Detail Associates, I		ing Owne		ASCM N	0.	Name of Abatem	ent Contractor		Services, Ir	IC.			
Street Address 300 Grand Ave.	110			JO		Street Address	S Lynn Cou		COLVICCO, II				_
City, State, Zip Code Englewood, NJ 076	31					City, State, Zip C		rk, NJ 0703	35				
Project Manager for Monito		Telep	ohone	Numbe	r	Telephone Numb	ber	*	License N				-
Stephen J.	161			9-6708			973-709-02	200		0	085	52	_
Scheduled Start Date (10) 12/26/12	Sche	ed. Comp 12/	1000 31/1		1)	Name of OSHA		onmental L	aboratories	, LLC)		
Occupancy Status During [] Facility Closed/Va [] Abatement Perform Describe:	cated During ned Outside	Entire Pe	eriod o	of Abater		City, State, Zip C			3				
[x] Other – Describe		ated					Union, NJ (07003		-			
Scope of Work (Check all t [] Demolition [x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥260 lf	hat apply)			[]	Renov	vation	[X] []	Full Containmei Mini – Enclosui Glovebag Proc Non – Friable F	edure	Press	ure		
		2504000	Locat mally			Desc	ription of			Ab Ty		men	t
Location of Asbestos – Conta Material (ACM TO BE ABATE In Facility (13)) -	Maint	olely enand		3 × y	Asbestos Materi (i.e., then insulation, s	— Containing ial (ACM) mal systems surfacing, VAT, iscellaneous)		Amount (Specify SF or LF)	R E M O V A L	R E P A I R	N C A P	
Dance classroom	3 30		Х			insulation			1 LF		x		
Principal's office			x		Pipe	insulation		*1	6 LF	×			
Name of Registered Waste Jupiter Environmen		es Ha	DEP \uler II			Cubic Yards Of Waste 1/2	Name of Re Minerva	egistered Landf Landfill	ill				
City, State Lincoln Park, NJ				74	1	Disposal Date 1/4/13	City, State Waynes	burg, OH				11	
Completed By (Print or Typ Pane Repic	e)	Title		Mana		Signature	1	/	Date 12/17	140			

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:60-7 and 12:120-7)

				(r ur.	Suaiit	to Non	C 6.00-7 and 12	D.	Conne		Che	eck#	6974	1		
Date of Notification (1	12/17/12						ducation									
Agencies Notified	Type of Notificat		0.00	Address			701	7 DE	TC 01 -							-
[] EPA	1,70001.10000			alley F			C0 1.2	LUC	C 21 PM 2:	58						
	[x] Initial		- Z- V	uno, i												
[] DEP	Notification	1 (City. S	tate, Zip	Code	·	- 200	y (Tan Otstare	0.751			-			
[X] DOL	[] Emergency [] Amended			clair, I				& 1	TES CONTR LICENSING	(UL						
[X] DOH	Notification		*10111	olali, i	10 0	1012			- IOTHOIM!							
	Troundation	1	lame	of Conta	ct				Tele	phone Nu	mber	1000				- 22
[] DCA	[] Cancellation	ו י	en S	Sapon	ara											
					FAC	ILITY I	NFORMATION									
Name of Facility Whe	re Abatement is Ta	king Pla	ace (3))				T	ype of Facility (4) [x] School (K	12)						
Mr. Hebron MS								1	[] Subchapte	r 8 (Other	than K-12)					
Street Address						- 68			[] Other (i.e. homes, et	private ar	nd commerc	ial bu	ildin	gs,		
173 Bellevue Av	/e.								nomes, co	. .,						
								S	quare Feet	# of Floo	ors	Bldg.	Age			
City (5)		County	(6)	14,			y Code (7)		140000	3		~ 80				
Montclair		Esse	X			(STAT	E USE ONLY)		urrent Use (Prior i	f being de	emolished)					
Name of Monitoring F	im Hirad by Buildin	20 Out		ASCM N		11	Name of Abaten		ducational		_				-	
	ente entre ell'infrateration constitueur production de la constitue de	ig Own	100		10.					antal C	`amilaaa	Ina				
Detail Associate	es, inc			00		4 1		Jup	iter Environm	ientai S	ervices,	inc.	8			
Street Address							Street Address	٠.								
300 Grand Ave.									ynn Court		(3)					
City, State, Zip Code							City, State, Zip C				es 00					
Englewood, NJ								Lin	coln Park, NJ	07035)					
Project Manager for M	Ionitoring Firm	1 - 12 - 13 - 10 - 10 - 10 - 10 - 10 - 10 - 10		Numbe			Telephone Numi				License	Nun				
Stephen J.				9-6708				973	3-709-0200			9	00	85	2	
Scheduled Start Date				Date (1	1)		Name of OSHA			71 E. 10 C.			1000000			
12/27/	12	1/3	31/13	3				J &	S Environme	ental La	aboratorio	es, l	LLC			
Occupancy Status Du	ring Abatement (Ch	neck on	y one) .		7 7	Street Address			200	4					
	ed/Vacated During I						2	233	3 Route 22 V	V						
	erformed Outside of	f Norma	I Faci	lity Hours	s –	1 1	City, State, Zip C									
Desc [x] Other – Desc	cribe: partially vaca	ted							ion, NJ 07083	3						
Scope of Work (Check			-											_	-	
ocopo di rrom (onco	· an inat apply)								[] Full Cor	ntainment	with Negati	ve Pr	essu	re		
[] Demolition				[]	Rend	ovation	1			Enclosure						
[x] ≥3 sf or ≥3 lf										ag Proced						
[] ≥160 sf or ≥2	60 If								[x] Non – F	Friable Pro	ocedure					
			Loca									T	Aba		nen	t
			mally				Desci					L	Тур	_	_	_
Location			Solely				Asbestos				Amount		R	200	E	
Asbestos – C Material (ce/Cus ff (12)			Materi (i.e., therr				(Specify SF or LF	320	E M	E P		N
TO BE AB		todi	ai Ola	11 (12)			insulation, s				01 01 11	'	Ö	A	2033	L
In Faci					1. 1		or other m						ν̈́	il	P	ō
(13)		Yes	No	N/A									A	R	S	S
													L		U	U
Classroom 111 and	Teachers room		X		Pipe	e insul	lation				3 LF			x		
Classroom 202			x		Wal	II plast	ter				1 SF			x		
1 st floor elevator lob	by	-	х		Floo	or tile	and mastic				100 SF	-	x	4	-	
Name of Desistant 111	lanta I I I - :	1	DE2:	N		0.1.	Vande	1.4	Inna of David	all contest				_	\perp	
Name of Registered W		10000	uler II	Waste		Of Wa	Yards		Name of Registere							
Jupiter Environm	iental Service	3	04782			OI WY	1/2	I,V	Minerva Land	TIII						
City, State						Dispo	sal Date	C	City, State							
Lincoln Park, NJ	W 2				1	1/4/			Naynesburg,	OH						
Completed By (Print or		Title	-				Signature		1		Date	77		-	-	
Pane Repic		2007	eral	Manag	ger		1		10	1	12/1	7/12	2			

ASB-41

State of New Jersey

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

				(i dio	uuni to 1	iorio olog r and iz	RECE	11 1 7 m m.	Check	(#69	72		
Date of Notification (1	(5)					Operator (2)	* The Bree	TYE!			mante		110000
	12/17/12				oard of	f Education	2012 000						_
Agencies Notified	Type of Notificat			Address	d		2012 DEC 21	PM 2: 5	ie.		70		
[] EPA	[x] Initial	2	.Z V	alley R	oau		A	- '	G				
[] DEP	Notification		ity St	ate, Zip (Code		- 430k3763	C. Ste bull i was		-	-		
[X] DOL	[] Emergency			1000 000	IJ 0704	42	& LICEN	SIMO	iL.				
[X] DOH	Notification			okanomia da Pode indepos		·-							
[] DCA	1, 2			of Contac			Telep	hone Numb	er				
11 2011	[] Cancellation	L	en S	Sapona	ara		100						
					FACILIT	Y INFORMATION					-		_
Name of Facility When	re Abatement is Tal	king Pla	ce (3)	100			Type of Facility (4)	04/1000		-			
Northeast School	ol						[x] School (K-	12) r 8 (Other th private and o	an K-12)				
Street Address							Other (i.e.	private and	commercial	buildi	ngs,		
603 Grove St.						8	homes, etc	5.)					
			1,6				Square Feet	# of Floors		dg. Ag	е		Sec. 1
City (5)		County				unty Code (7)	80000	2	·	70			
Montclair		Essex	<		(51	ATE USE ONLY)	Current Use (Prior if educational	being demo	olisnea)				
Name of Monitoring Fi	irm Hired by Buildin	g Owne	er	ASCM N	o.	Name of Abatem	nent Contractor (9)			1			
Detail Associate	s, Inc			00			Jupiter Environm	ental Ser	vices, Ir	IC.			
Street Address						Street Address		11.					
300 Grand Ave.						3	3 Lynn Court						
City, State, Zip Code		0. A Kentru An		Marine Commission		City, State, Zip C		20				100	
Englewood, NJ							Lincoln Park, NJ	07035					
Project Manager for M	lonitoring Firm	100000000000000000000000000000000000000		Number		Telephone Numb			License N				
Stephen J.	(ID)			9-6708			973-709-0200			0	08	52	_
Scheduled Start Date 12/27/				Date (11)	Name of OSHA		طما المام	t-ri- <i>c</i>		_		
		25252	31/1			Street Address	J & S Environme	iliai Labi	Jiatones	, LL	_	_	_
Occupancy Status Dur	d/Vacated During E				nent		2333 Route 22 W	i					
[] Abatement Pe	rformed Outside of					City, State, Zip C		<u> </u>					_
Desc [x] Other – Desc	ribe: :ribe: partially vacat	ed					Union, NJ 07083						
Scope of Work (Check				W									-
	an that apply)							tainment wit	h Negative	Press	ure		
[] Demolition		8		[]	Renovat	tion		nclosure	_				
[x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥26	SO If							ag Procedur riable Proce					
[] [100 01 01 [22	JO 11	le	Loca	tion						ΔΕ	ate	mar	+
		10 months (100)	mally	SWEETEN TO THE		Descr	iption of				pe	1101	•
Location			olely				- Containing		Amount	R	R	2000	E
Asbestos – C Material (/				ce/Cus ff (12)			al (ACM) nal systems		(Specify SF or LF)	E	E	N	N
TO BE AB		touit	ai Ola	(12)			urfacing, VAT,		or or Er,	O	A		C
In Facil						or other mi	iscellaneous)	80		V	1	Р	0
(13)		Yes	No	N/A						A L	R	S	S
Tunnel			Х		Pipe in	sulation		20) LF	+-	x	U	
													800,00
Name of Registered W		1000000		Naste	1 1000	bic Yards	Name of Registered						
Jupiter Environm	nental Services	3 1	uler II 04782		Of	Waste 1/2	Minerva Land	III					
City, State					Dis	sposal Date	City, State						
Lincoln Park, NJ						/4/13	Waynesburg,	ОН					
Completed By (Print or		Title	7			Signature	/	x=0515	Date				
Pane Repic		1 2 32 1 27	eral	Manag	aer		11		12/17	/12			
	4/201				2.00	1 /			1				

ASB-41

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

Pg I

W-							- 3		DEAR					
Date of Notification (1)	24 /	12					ng Owner/Op Jniversity-		2) of Design and C	onstruction			6	
Agencies Notified ⊠ EPA	Type Notifica	ation			Street	Address Elm Dr			2012 DEC 21	PM 2: 58	?			
⊠ DOLWD ⁽		1 200000 100	į.		City. S	State, Zip	Code	*	850E5785					
⊠ DHSS	Amendm			12		U22 W	NJ 08544		& LICEN	SUNTROL				
□ DCA (NJAC 5:23-8)	☐ Emergen justificati		ling	- 1		of Conta			06/	Telephone Nu	mber	200,000		
(110/10 0.20 0)	☐ Cancellat	6.0				bert Orte						63		
	.1	2000-200-200-200-200-200-200-200-200-20	3 1					ION			_			-
Name of Facility Where	Abstoment is 7	Fakina Dk	(2		FA	CILITY	NFORMAT	ION	T 45 - 112 /4					
			ice (3)				,	Type of Facility (4)				
Princeton Univers	ally-Sauwin n	all	4-						☐ School (K-12)☑ Subchapter 8 (Other than K-	12)			
Street Address Washington Rd.				94					Other (i.e., priv homes, etc.)			uildin	js,	
City (5) Princeton						4 628	14	. 1	Square Feet	# of Floors	В	dg. A	ge	
County (6)					Cour	nty Code (7)(STATE USE	ONLY	Current Use (Prior	r if being demo	lished)			
MERCER	977	ne 'kw			7	A Laborator					,			
Name of Monitoring Firm		ding Own	er (8)	1	ASCM	No.	Name of A	Abateme	ent Contractor (9)				1	
ATC Associates In	ıc.			1	0009	98	BRIST	OL EN	VIRONMENTAL,	INC.				
Street Address							Street Add	dress						
3 Terri Lane							1123 E	BEAVE	RSTREET					
City, State, Zip Code			ate			100	City, State	e, Zip Co	ode					o Tra
Burlington,NJ 080	16						BRIST	OL, PA	19007					
Project Manager for Mo	nitoring Firm		7	Telep	ohone	No.	Telephone	e No.		License No.	7			
Michael Keehn				60	9-386	-8800	215-78	8-6040		00509				
Start Date (10)8 /13 /	CO MARKET PARTY	Scheduled 1				te (11) 13	Name of 0		onitor VIRONMENTAL,	INC.				4
Occupancy Status Durin	ng Abatement (Check on	lv one	2)			Street Add	dress					-	
☐ Facility Closed/Vaca			•		nent		/ 2004/2004/100		RSTREET					
☐ Abatement Performe						cribe	City, State							
Time of Abatement:	<u>7:00</u> AM- <u>3:30</u> F	PM/	PM-		AM				19007					
Scope of Work (Check a	all that apply)				-					***************************************				
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		_	Renov Demo					/lini-Enc Slovebag	ainment with Nega losure p Procedure mpted (*) and Non-		dure			
		9	Is Lo								Ab	atem	ent T	уре
Location			Nor Ised S	mall		100		ription o		* 19 III E 1	고	Z,	Ш	т
Asbestos-Containing TO BE AB			Mainte				estos Contai e., thermal s		terial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Faci	lity	C	ustod		taff?	(surfacir	ng, VAT,	or	SF or LF)	val	=	uso	Sun
(13)				12)			other mis	scellane	ous)				late	· O
Throughout 2 nd floor	<u> </u>	Ye	s n	No Z	N/A	Floor	ile and ma	etic		29,017 SF				
Throughout 2 nd floor		- -				Pipe S		Suc-		59 LF				
Elevator lobby 2 nd fl			E			Plaster				482 SF		П		
Exterior soffits 2 nd fl			E			Plaster				32 SF		П		
Name of Registered Wa	THE PERSON NO.		-	V	IDEP V		Cubic Yar	ds of	Name of Registe					Щ
SERVICE TRANSP		INC		Ha	uler IE 20990	No.	Waste	43 01	G.R.O.W.S. I		E 201			
City, State				1			Disposal D	Date	City, State			ō s	-	
NEW CASTLE, DE									MORRISVILI	LE, PA 1906	7			
Completed By (Print or T	уре)	Title -				9 9 1 9 1 1	Signa	ature	2 1.	_	Date /	/		\neg
Brian Scafiro		Estin	nator				Bu	ian	Scalino !-	el	12/1	8/1	2	

Pg 2

			(Pu	ırsuan	t to NJ	AC 8:	:60 and 5:1	6) <i>東に</i> つ	Elven				
Date of Notification (1)	24 /	12		Name Prin	of Buildir	ng Ow Jnive	ner/Operator (2) of Pesign and	Construction	1 .	11	#4 ₂	
Agencies Notified	Type Notifica	ation		Street	Address		W.	TOIL DEC	CT PM 2: 5	18			
⊠ EPA	Initial				Elm Dr								
☑ DOLWD		75		City. S	State, Zip	Code		2110	S. Callina	11			
□ DHSS		ent # <u>4-12/1</u>			nceton,			& LIC	ENSING				
□ DCA (NJAC 5:23-8)	☐ Emergen justificati		J		of Conta				Telephone Nu				
(NSAC 5.25-6)	☐ Cancellat				ert Orte	33							
	1	12		FAG	CILITY II	NFOF	RMATION						
Name of Facility Where	Abatement is 7	Taking Place	(3)		7 74			Type of Facility	(4)	88 - 2			
Princeton Universi	ty-Jadwin H	lall						School (K-12		201201			
Street Address							7	Subchapter 8 ☐ Other (i.e., p			ildin	10	
Washington Rd.							2: 1	homes, etc.)		nerciai bi	anding	3 5,	
City (5)						- 1/		Square Feet	# of Floors	В	dg. A	ge	
Princeton								The state of the s					
County (6)				Cour	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	olished)			
MERCER					1 2 3 1					1000	5 1		
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	ASCM	No.	Nai	me of Abatem	ent Contractor (9)					100
ATC Associates In	C.	6 5 8		0009	98	E	RISTOL EN	VIRONMENTA	L, INC.				
Street Address	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 1 1 1 1 1		the light	1	Stre	eet Address) (c)	-1	-	80		
3 Terri Lane						1	123 BEAVE	R STREET					
City, State, Zip Code						City	, State, Zip C	ode					
Burlington,NJ 0801	16					E	RISTOL, PA	19007					
Project Manager for Mon	itoring Firm		Tele	phone	No.	Tel	ephone No.		License No.	11 10			
Michael Keehn			6	09-386	-8800	2	15-788-6040)	00509				
Start Date (10)	15	Scheduled C	omple	tion Da	te (11)	Nar	me of OSHA N	Monitor	1				100
8 / 13 /	12	_1_/	3	_ / _	13_	E	RISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status Durin	a Abatement (Check only	one)		***************************************	Stre	eet Address				2000	-/	
☐ Facility Closed/Vacate	5세 워크리아	Same and the same and the same	10)	ment		1	123 BEAVE	R STREET					
☐ Abatement Performed					cribe		, State, Zip C						_
Time of Abatement: 7	7:00AM-3:30F	PM/P	M	AM			RISTOL, PA						
Scope of Work (Check a □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	ll that apply)	⊠ Re	enovat emoliti			Y2	☐ Mini-End	tainment with Neg closure g Procedure empted (*) and No		dure	Y2	in the	
V	I Je yle	- 0.77	Loca	75-7-7-7	al et g	l.	W. 500 100 100 100 100 100 100 100 100 100	**		Ab	atem	ent T	уре
Location		Llee	Norma	illy ely by			Description of			20	D	m	m
Asbestos-Containing TO BE ABA			intena		Asb	estos e the	Containing Ma ermal systems	insulation	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facil		Cus		Staff?	٧.	S	surfacing, VAT	, or	SF or LF)	¥ <u>a</u>	-	usu	Sure
(13)			(12)			ot	her miscellane	eous)		b 4 -		ate	"
		Yes	No	N/A	D: 0	F:W:			35 LF				-
Basement - Mens & \					Pipe &								
	Restroom				Asbes	tos L	ebris on Ce	illing	240 SF		片		
										ᆜᆜ	닏		10
					A L		17.7		1 1411				
Name of Registered Was SERVICE TRANSPO		P INC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IJDEP I	O No.	Cut	oic Yards of ste	Name of Regis	stered Landfill				
City, State				20990		Dis	posal Date	City, State			-51/50		10000
NEW CASTLE, DE						5,5			LLE, PA 1906	67			
Completed By (Print or T	ype)	Title		77.10	-2		Signature	2 -	, s.	Date	10	1	,
Brian Scafiro		Estima	tor				Dream	Scolero	12	12/	18/	12	-

Date of Notification (1)	12		Na	me of Build	ding Owner/Operator University-Office	(2) 2012.DFC	DA DA				
Agencies Notified Type Noti			Ct.	eet Addres	- Chiterally-Office	e of Designand	เ coustanofic	PS			
☑ EPA ☑ Initial		ř.		200 Elm C	The state of the s	AUGESTE & LIC	St. Comments				
☑ DOLWD ☑ Amend			074		A. C.	& 1 is	CHOUNTRE	IL.			
☑ DHSS Amend	lment #3-1	1/8/12	/	y, State, Zi	*	-10	-1431116				_
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Name of English Whose About			F	ACILITY	INFORMATION	evi i ii				-	
Name of Facility Where Abatement is	Taking Pl	ace (3))			Type of Facility	(4)	-		-	
Princeton University-Jadwin Street Address	Hall				A Party Comments	School (K-12	2)				
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Street Address					Street Address	VIRONMENTAL	., INC.				
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Burlington,NJ 08016					City, State, Zip Co		TIT.				1 0
Project Manager for Monitoring Firm		17-	Jan 1		BRISTOL, PA	19007			٠,		
Michael Keehn		1	elephone		Telephone No.		License No.		_		_
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			24_ /	_12_	BRISTOL EN	VIRONMENTAL	, INC.				
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Burlington, NJ 08016 Project Manager for Monitor	ing Firm		17	olonha-	o No	BRISTOL, PA		3.9				
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) Name of Building Owner/Operator (2) PM 2: 58 7 24 1 12 Princeton University-Office of Design and Construction Agencies Notified Type Notification **⊠** EPA Street Address ☑ Initial & LICENSING ☑ DOLWD 200 Elm Dr. DHSS. Amendment #1-8/6/12 City, State, Zip Code DCA ☐ Emergency (including Princeton, NJ 08544 (NJAC 5:23-8) justification) Name of Contact ☐ Cancellation Telephone Number Robert Ortega Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION Princeton University-Jadwin Hall Type of Facility (4) Street Address School (K-12) Subchapter 8 (Other than K-12)

Other (i.e., private and commercial buildings, Washington Rd. City (5) homes, etc.) Princeton Square Feet # of Floors County (6) Bldg. Age County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) MERCER Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC Associates inc. 86000 BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 3 Terri Lane 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Burlington, NJ 08016 Project Manager for Monitoring Firm BRISTOL, PA 19007 Telephone No. Telephone No. Michael Keehn 609-386-8800 License No. Start Date (10) 215-788-6040 Scheduled Completion Date (11) 00509 Name of OSHA Monitor 12 / 24 / 12 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement Street Address ☐ Abatement Performed Outside of Normal Facility Hours - Describe 1123 BEAVER STREET Time of Abatement: 7:00AM-3:30PM/ City, State, Zip Code BRISTOL, PA 19007 Scope of Work (Check all that apply) ≥3 sf or ≥3 lf Full Containment with Negative Pressure □ Renovation ≥160 sf or ≥260 lf Mini-Enclosure ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Location of Normally Asbestos-Containing Material (ACM) Used Solely by Abatement Type Description of Asbestos Containing Material (ACM) TO BE ABATED Maintenance/ Removal IN Facility (i.e., thermal systems insulation, Encapsulate Custodial Staff? Amount Enclosure (Specify (13)surfacing, VAT, or (12)other miscellaneous) SF or LF) Yes No N/A Throughout 2nd floor X П Floor tile and mastic Throughout 2nd floor 29,017 SF X Ø П Pipe Saddles Elevator lobby 2nd floor 59 LF X X Plaster Exterior soffits 2nd floor 482 SF X M Plaster П Name of Registered Waste Hauler NJDEP Waste 32 SF X Cubic Yards of SERVICE TRANSPORT GROUP INC Name of Registered Landfill Hauler ID No. Waste 20990 City, State G.R.O.W.S. LANDFILL Disposal Date NEW CASTLE, DE City, State MORRISVILLE, PA 19067 Completed By (Print or Type) Title Brian Scafiro Signature Estimator Date / /

RECEIVED NOTIFICATION OF ASBESTOS ABAHENETT 21 PM (Pursuant to NJAC 8:60 and 5:16)

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Name of Monitoring Firm Hired by E	Building	Owne	r (8)	1000	de (7)(STATE USE ONL)	Ourrent Use (P	rior if being	demol	isher	1)	
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City, State, Zip Code											
Burlington,NJ 08016		ă.			1123 BEAVE	RSTREET	4				
Project Manager for Monitoring Firm					City, State, Zip C	ode					
Michael Keehn		12 Base	Teles	hone No.	BRISTOL, PA	19007					
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Start Date (10)			60	386-RRA	Telephone No.		Ties				
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No check

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

RECEIVED

Date of Notification (1)	29 /	12				of Buildin	g Ow	ner/Operator	(2)	חבר מו ה	1			
Agencies Notified EPA	Type Notifica					Address	ONTO	SOMERY PI	ACE, LOWER	DEC 21 P				
☑ DOLWD ☑ DHSS	Amended Amended		/18/1	12	City, S	State, Zip	Code		AOL, LOWLIN	& LICENS	ING	ðŁ	-	
□ DCA	☐ Emergen			-	PIT	TSBURG	SH, P	A 15212						
(NJAC 5:23-8)	justification	on)	J		-00-000	of Contac		J.		Telephone Nu	ımber			
	☐ Cancellat	ion			AN	THONY	POR	TA	Le constitue de la constitue d	1	_ '			
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Name of Facility Where A		aking Pla	ce (3)					Type of Facility (10			
Street Address				-		-			Subchapter 8	Other than K-	12)			
86 WEST BROADW	/AY								Other (i.e., property homes, etc.)					
City (5) SALEM									Square Feet 13534	# of Floors	E	ldg. A 52	ige	
County (6)			the months to		Cour	ty Code (7)(STA	TE USE ONLY)	Current Use (Pri		olished)			
Name of Monitoring Firm	Hirad by Duile	ling Own	r /9\		ASCM	No	Na	me of Abatam	ent Contractor (9)	ATIONS				
USA ENVIRONMEN	5 10		100	ľ	ASCIVI	NU.			VIRONMENTAL	_, INC.	22			
Street Address			******				Stre	eet Address						
8436 ENTERPRISE	AVENUE						1	123 BEAVE	R STREET					
City, State, Zip Code	4			- 200		***************************************	1	y, State, Zip C			9			
PHILADELPHIA, PA		100						BRISTOL, PA	19007					
Project Manager for Mon MARK JENKINS	itoring Firm		1		phone 5-365		77.000	ephone No. 15-788-6040)	License No. 00509				
Start Date (10)	18	Scheduled	Com	plet	tion Da	te (11)	Nar	me of OSHA N	Monitor		**			-
12 /13 /	_12_	1	/_	4	_ / _	13	E	RISTOL EN	VIRONMENTAL	_, INC.				
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☐ Facility Closed/Vacate							1	123 BEAVE	R STREET				UC 23092	
Abatement Performed Time of Abatement: 7						cribe		, State, Zip C RISTOL, PA						
Scope of Work (Check al	I that apply)			_						eti ve Dressoven			-	
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Reno Demo					☐ Mini-End	tainment with Neg closure g Procedure empted (*) and No		dure			
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Location Asbestos-Containing <u>TO BE ABA</u> IN Facili	Material (ACM TED	" 1	sed S /laint	ena	ly by		e., the	Description of Containing Ma ermal systems surfacing, VAT	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		Ye		No	N/A	1	ot	her miscellane	ous)				ate	
BASEMENT]		9"X9"	VAT	& MASTIC		1300 SF				
BASEMENT						12"X12	" TA	N VAT & MA	ASTIC	1800 SF				
2														
Name of Registered Was		NC.		100	JDEP \ auler II		Cub	oic Yards of ste	Name of Regis					
		,		_	20990)	Die	posal Date	City, State			-		- 0
City, State NEW CASTLE, DE 1	19720						DIS	posai Date		URG, OH 446	88			
Completed By (Print or Ty	ype)	Title	-			4	1	Signature	2 1	7	Date	1-	/	
BRIAN SCAFIRO	922 100	ESTI	TAN	OR				Brian	Scafero	/ il	12/	18/	10	_

Date of Notification (1)					Nam	e of Buildi	ing Ov	wner/Operator	(2) 2012 DEC					
	29 /	12				ERIZON			- FIT DEC	21 PM 2:	ริย			
Agencies Notified	Type Notifi	ication			Stree	et Address	3		ALMERT	E A	00			
■ EPA 6480	☐ Initial				15	EAST M	IONT	GOMERY P	LACE, LOWER	LEVEL	91			
DOLWD 6695	Amenda Amenda	2177.77		1		State, Zip				A RETHG	7 L.			-
☑ DHSS 6497	Emerge		dina	- 4	PI'	TTSBUR	GH, I	PA 15212						
(NJAC 5:23-8)	justifica		ung	T		e of Conta				Telephone Nu	mber			
	☐ Cancell	ation			AN	YNOHT	POR	RTA	14 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15					
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Name of Facility Where A		Taking P	lace (3	3)					Type of Facility					
Street Address									School (K-12	2) 8 (Other than K-1	2)			
86 WEST BROADW	'AY							*	Other (i.e., p homes, etc.)	rivate and comm	ercial t	ouildir	ngs,	
City (5)			-						Square Feet	# of Floors	I F	3ldg.	Ana	
SALEM									13534	2	1,	52	nge	
County (6)			-		Cou	inty Code ((7)(ST	ATE USE ONLY)		ior if being demo	liched)		3,6	
SALEM							(· // - · ·		COMMUNIC		iisiieu)			
Name of Monitoring Firm	Hired by Bui	ilding Owr	ner (8)	IA	SCM	No.	Na	me of Abatem	ent Contractor (9)					N1
USA ENVIRONMEN	TAL MANA	AGEMEN	IT						IVIRONMENTA					
Street Address							Str	eet Address						,
8436 ENTERPRISE	AVENUE	7					1	123 BEAVE	R STREET					
City, State, Zip Code		1						y, State, Zip C						
PHILADELPHIA, PA								BRISTOL, PA	4 19007					
Project Manager for Moni MARK JENKINS	toring Firm		- '	Teleph		No. 5-5810	1	lephone No.	- 1001 1 2	License No.				
Start Date (10)		Schedule	d Com					me of OSHA N		00509				
12 / 13 /						12			MONITOR VIRONMENTAL	INC				
Occupancy Status During							-	eet Address	VIICONIILITAL	-, 1140.				
☐ Facility Closed/Vacate		3			ent			123 BEAVE	RSTREET					
☐ Abatement Performed	Outside of N	lormal Fac	cility H	ours -	- Des		1	y, State, Zip C		177				
Time of Abatement: 7:	00AM- <u>3:30</u>	PM/	_PM	_	_AM		1 55	RISTOL, PA						
Scope of Work (Check all	that apply)							57 - " -				-		
≥3 sf or ≥3 lf			Renov	vation					tainment with Neg	ative Pressure				
≥160 sf or ≥260 if			Demo					☐ Gloveba	g Procedure					
			Is I o	cation	,			∐ Non-Exe	mpted (*) and Nor	1-Friable Procedu				
Location of	of		Non	mally				Description of	of		_	atem	т —	-
Asbestos-Containing N			Jsed S Mainte			Asbe	estos (Containing Ma	terial (ACM)	Amount	Removal	Repair	Enc	Enclosure
TO BE ABAT			ustodi			(i.e		mal systems urfacing, VAT,		(Specify SF or LF)	VOC	a.	aps	los
(13)		-		(2)				ner miscellane		SF OI LF)	=		Encapsulate	8
DAGGAGAIT		Ye		-	N/A	Ollyon					4_	_		
BASEMENT			_	-]_	-		& MASTIC		1300 SF	Ø			
BASEMENT		Ø		-]_	12"X12	" TA	N VAT & MA	STIC	1800 SF	Ø			
] [
] [
Name of Registered Waste				100000000000000000000000000000000000000		Vaste	A STATE OF THE PARTY OF	ic Yards of	Name of Registe	ered Landfill	1			
SERVICE TRANSPO	RT GROUP	P, INC.		200000	er IL 1990	No.	Was	ste	MINERVA L	ANDFILL				
City, State			-	\$ 1			Disp	osal Date	City, State				-	
NEW CASTLE, DE 19	720					A 1		593	WAYNESBU	JRG, OH 44688	3			
Completed By (Print or Typ	e)	Title						Signature	0	/ Da	te,	,		-
BRIAN SCAFIRO		ESTI	MATC	DR				Brian	Scalino	/il 11	/29	112	2	

RECEIVED

Date of Notification (1)	1	12		- 1		ilding Owner/Opera	tor (2)	-20	77 7	544		_
			_		Princeto	n University-Off	ice of Design a	2012 DEC	ion	H	2:5	Q
□ EPA 🛛	pe Notific Initial				Street Addre	SS (& LICE	3,00	NI	e a	_
	Amende Amendr			- h	City, State, Z			LICE	NSI	Vic	nul.	
	Emerger	nent #_				n, NJ 08544	8			- (1		-
	justificati	icy (inc	luding	-	Name of Con							
	Cancella	tion		Ι.	Robert O			Telephone	Numbe	er	_	-
								11				
Name of Facility Where Abate	ment is 7	Takina	Diana	(2)	FACILITY	INFORMATION			-	-		-
Princeton University- Ja	adwin I	lell	riace	(3)			Type of Facili	ty (4)				_
Street Address		letti.					School (K-	12)				
Washington Rd			* 1				Subchapte	r 8 (Other than	K-12)			
City (5)							homes, etc	private and con	nmerci	al bui	ldings	,
Princeton	· ,						Square Feet	# of Floors		I BL		
County (6)		-						W OI Floors		Bid	g. Ago	2
MERCER				10	County Code	(7)(STATE USE ONLY	Current Use /F	Prior if being den		_		
						a'	OSG (F	ii being den	noiishe	d)		_
Name of Monitoring Firm Hired	by Buildi	ng Ow	ner (8)	AS	CM No.	Name of Abater	nent Contractor (9					2
ATC Associates Inc						BRISTOLE	NVIRONMENTA)	H.			
Street Address	187181					Street Address	MAINOMMENTA	IL, INC.				
Bromley Corporate Cente	er-Thre	e Terr	i Lan	9		1123 BEAVE	D OTOFF		- C			_
City, State, Zip Code												
Burlington, NJ 08016						City, State, Zip C				_		_
Project Manager for Monitoring F	irm		Tī	elepho	ne No	BRISTOL, P.	A 19007					
Michael Keehn			Ι.		86-8800	Telephone No.		License No.			-	
Start Date (10)	Scl	nedule	1 Com		Date (11)	215-788-604		00509				
4 / 14 / 12	1-0	6	/	20 20	Date (11)	Name of OSHA N	\$64,060000000000000000000000000000000000					
occupancy Status During Abaten					_12_		VIRONMENTAL	L, INC.				
Facility Closed/Vacated During	nent (UN	eck on	y one)		To a supplement	Street Address						_
I Abatement Performed Outside	of Norm	al Ena	154 S. F.		NAME OF TAXABLE PARTY.	1123 BEAVE	R STREET					
Time of Abatement: 7:00AM-	3:30PM/	ai Fac	mry mo	urs - De	escribe	City, State, Zip Co						_
			_	^	**	BRISTOL, PA						
							19007					
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pope of Work (Check all that app ≥3 sf or ≥3 if ≥160 sf or ≥260 if	oly)	Ø F	lenova emolii	ition ion		☐ Full Cont ☐ Mini-End	ainment with Nega					
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Facility Closed/Vacated Durin Abatement Performed Outside Time of Abatement: 7:00AM- Coope of Work (Check all that applications of Abatement) Location of Asbestos-Containing Material (ATO BE ABATED IN Facility (13) Level In towers #2, #3, #4 & #5 ir towers #2, #3, #4 & #5 oughout 1 St Floor le of Registered Waste Hauler ERVICE TRANSPORT GROUNDS State W CASTLE, DE	ply) ACM)	Use Ma Cus	denovation	AM On (by Def) N/A N/A	Asbesto (i.e., to the second of the second o	No.	ainment osure Proced (*) erial (AC sulation or us)	with Negativure and Non-Fr M) 1 1 1 2 Registered I	Amount (Specify SF or LF) 2,212 SF ,755 SF ,094 LF	Removal 🛛 🖂	-	Encapsulate	ypeenclosure
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_4 / _14 / _12	_	12	/ 28	3 /	12	Name of OSHA N							_
Start Date (10)	Sch	neduled	Comple	etion	Date (11)	215-788-604			00509	8			
Michael Keehn					86-8800	Telephone No.			License No				
Project Manager for Monitoring	Firm .		Tel	epho	ne No.	BRISTOL, P.	A 1900	7					
Burlington, NJ 08016						City, State, Zip (:				
City, State, Zip Code						1123 BEAVE	ER STE	REET					
Bromley Corporate Cent	ter-Thre	e Terr	i Lane			Street Address							
Street Address			-			BRISTOLE	NVIRO	NMENTAL	, INC.				
ATC Associates Inc		J OW	1101 (8)	AS	CM No.	Name of Abate	ment Co	ontractor (9)					
Name of Monitoring Firm Hired	by Build	ing Ow	mer (8)						" Deling de	inolish	ed)		
MERCER				1	County Code	(7)(STATE USE ONL)	Y) Curr	rent Use (Pri	or if being do	molist			
County (6)												dg. A	ge
Princeton								lare Feet	# of Floor				
City (5)							E2	Other (i.e., p homes, etc.)	rivate and co	mmer	cial bu	uildin	7S.
Washington Rd				Marie Marie				Subchanter	R /Other M.	1 K-12			
Street Address	Jauwin I	Hall			-		ואין	pe of Facility School (K-12	(4)				
Princeton University-	ladude :	l aking	Place (3	3)				00 of E177	(4)				
Name of Facility Where Abat	emont is					INFORMATION			1	-	-		
		auon			Robert O	rtega			Telephon	e Num	ber		
	justificat Cancella	uon)			Name of Cor	ntact			1=.		_		
DCA (NJAC 5:23-8)	J ⊏merge	ncy (in	cluding	- 1	Princeto	n, NJ 08544			¥	411	G	-1	
III DOA	Amendr	nent #	3 - 12/4	112	City, State, 2				LICE	V=16	1/7	01	
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Agencies Notified T □ EPA □ □ DOLWD □ DHSS	ype Notif				Princeto	on 11-1	. ,						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

No weck (Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)				Name	of Buildir	ng Owner/Operator (2)	the GP in 1 d in	2.5			115
	6/-	12		Pri	nceton (Jniversity-Office	of Design and	Construction				
Agencies Notified	Type Notificati	on		0.5000000000000000000000000000000000000	t Address Elm Dr			DEC 21 PM 2				
□ DOLWD		4 4 4 4 4		City,	State, Zip	Code	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		PA (A)	y 1		
☑ DHSS	Amendmen			2		NJ 08544	č	LICENSING	110	.		
☐ DCA (NJAC 5:23-8)	☐ Emergency justification		g	Name	of Contac	ct		Telephone Numi		-		
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Cancellatio			Ro	bert Orte	ega						
		E4		FA	CILITY II	NFORMATION						
Name of Facility Where	Abatement is Tal	king Place	(3)				Type of Facility	(4)				
Princeton Univers			303				School (K-12	2)				
Street Address	-		_					3 (Other than K-12 rivate and commer		ildin		
Washington Rd							homes, etc.)		Clai	unung	3 5,	
City (5)							Square Feet	# of Floors	В	dg. A	ge	
Princeton												
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being demolis	hed)			
MERCER												
Name of Monitoring Fire		ng Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	27 10 10 10 10		1,12		
ATC Associates I	nc					BRISTOL EN	VIRONMENTA	L, INC.				
Street Address						Street Address						
Bromley Corporat	te Center-Three	Terri La	ane	4		1123 BEAVE	R STREET			0		
City, State, Zip Code						City, State, Zip Co						
Burlington, NJ 08						BRISTOL, PA	19007					
Project Manager for Mo	nitoring Firm			elephone		Telephone No.		License No.				
Michael Keehn				609-386		215-788-6040		00509				
Start Date (10)4 /14	/ <u>12</u> Sc	heduled C		31 /	1923 (0)	Name of OSHA M BRISTOL EN	lonitor VIRONMENTAI	L, INC.				•
Occupancy Status Duri	ng Abatement (Ch	neck only	one)			Street Address					8	
☐ Facility Closed/Vaca						1123 BEAVE	RSTREET					
Abatement Performe Time of Abatement:						City, State, Zip Co BRISTOL, PA						
Scope of Work (Check	all that apply)								-			
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re				☐ Mini-Enc ☐ Glovebag	Procedure	native Pressure n-Friable Procedur	e			
				cation				1.51	Ab	atem	ent T	уре
Locatio Asbestos-Containing TO BE AB	g Material (ACM)	Use Ma	ed S	nally olely by nance/		Description o estos Containing Ma e., thermal systems i	terial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Fac		Cus	todia (1	al Staff?	11 8 11	surfacing, VAT,		SF or LF)	<u>a</u>		sule	sure
(13)		Yes	N			other miscellane	ous)				te	
B-Level					Floor t	ile and mastic		12,212 SF				
Stair towers #2, #3,	#4 & #5		\boxtimes			ile and mastic		1,755 SF				
Stair towers #2, #3,	#4 & #5		\boxtimes		Windo	w caulk and glazi	ng	1,094 LF				
Throughout 1 St Floo	or				Windo	w caulk and glazi	ng	2,548 LF				
Name of Registered Wa SERVICE TRANSF		NC		NJDEP N Hauler II	D No.	Cubic Yards of Waste	Name of Regis G.R.O.W.S.	tered Landfill . NORTH LANDI	FILL			
City, State NEW CASTLE, DE	4 1 10			20330		Disposal Date	City, State MORRISVII	LLE, PA 19067				
Completed By (Print or Brian Scafiro		Fitle Estima	tor	1305		Signature	Scolino /-		te //	8/1	2	16.
						mun o	pagero /-	n	/	/		

ASB-41 MAY 11 B 5 12 03 4

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

Date of Notification (1)				Name	e of Buildi	ng Owner/Operator (Unive rsity-Office	2)	- 1 1 1 1 pm	1.1			
7 /	6 / 1	12		Pri	inceton	University-Office	of Design and	Construction				
Agencies Notified	Type Notificatio	n	Sq.	Stree	t Address		CEI/ UE	621 PM 2	: 58	-		
□ EPA	☐ Initial	. (20	0 Elm Di	•	f. + 14		0.0			
☑ DOLWD ☑ DHSS	Amended Amendment	#A 1011	Ω/1	City,	State, Zip	Code	v i	TOO CONTI	P/31	-		
□ DCA	☐ Emergency			e Pri	nceton,	NJ 08544	Ce L	ICENSING'	10 L.			
(NJAC 5:23-8)	justification)		9	Name	e of Conta	ıct		Telephone Nur	nber			-
	☐ Cancellation			Ro	bert Ort	ega						
				FA	CILITY	NFORMATION						
Name of Facility Where A	Abatement is Taki	ing Place	(3)				Type of Facility	(4)	-			
Princeton Universit	ty- Jadwin Hall						School (K-12					
Street Address				10-00/0-0			☐ Subchapter 8 ☑ Other (i.e., pr	(Other than K-1	2) arcial h	uildin	ae	
Washington Rd							homes, etc.)	ivate and commit	SICIAI D	unum	ys,	
City (5)						1	Square Feet	# of Floors	В	ldg. A	ge	17000 He
Princeton		4.										
County (6)				Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			
MERCER			11.50	-	to.							
Name of Monitoring Firm		Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				17	
ATC Associates Inc		11	3			BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address						Street Address						
Bromley Corporate	Center-Three	Terri La	ane		an was to	1123 BEAVE	RSTREET					
City, State, Zip Code						City, State, Zip Co				7200		
Burlington, NJ 0801						BRISTOL, PA	19007					
Project Manager for Moni	toring Firm			elephone		Telephone No.		License No.		COLONIA		
Michael Keehn				609-386		215-788-6040	E	00509				
Start Date (10)	202000		grand,	letion Da		Name of OSHA M						1367
4/14/				31 /	13	BRISTOL EN	VIRONMENTAL	., INC.				
Occupancy Status During	ALOLI MANAGEMENTAL CONTRACTOR AND PROPERTY.					Street Address						
☐ Facility Closed/Vacate☒ Abatement Performed					a sila a	1123 BEAVER					Uror Bess	ce
Time of Abatement: 7:						City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all	that apply)		2				ainment with Neg	ative Pressure		-		
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ Re □ De				☐ Mini-Encl	osure					
		ls	Loc	ation	T	M MOII-EXE	inpled () and Not	I-I Hable Procedi	1		A T	
Location	of	1	Norm	nally		Description of			-	atem		1
Asbestos-Containing N				olely by nance/		estos Containing Mat	terial (ACM)	Amount	Removal	Repair	Enc	Enclosure
TO BE ABA				I Staff?	(i.	 e., thermal systems i surfacing, VAT, 		(Specify SF or LF)	SVOL	ai-	apsı	losu
(13)			(12	2)		other miscellaned		01 01 21)	=		Encapsulate	6
		Yes	No									
Corridor intersection					Floor t	ile and mastic		47 SF				
Outside room # 107			Ø		Floor t	ile and mastic		230 SF	\boxtimes			
Outside room # J11			\boxtimes		Floor t	ile and mastic		110 SF				
			\boxtimes									
Name of Registered Wast	Carlo became to the Table		- 1	NJDEP		Cubic Yards of	Name of Regist	ered Landfill				
SERVICE TRANSPO	RT GROUP IN	С		Hauler II 20990		Waste	G.R.O.W.S.	NORTH LAND	FILL			
City, State				20330		Disposal Date	City, State		7.4	-		7
NEW CASTLE, DE						R La Company	E381 U1	LE, PA 19067				
Completed By (Print or Ty	pe) Tit	le .		27		Signature			ate /			-
Brian Scafiro	N N 24	Estimat	or			Bois	Scofiro		12/1	8/	12	
CD 44		12	e contra			Duon	prefero	170	1	/		- 2

ASB-41 MAY 11

 $B \le 12034$ * Do not use this form for asbestos licensure exempted activities.

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

Date of Notification (1) 7 / 6	/ 12				Iding Owner/Operator						_
Agencies Notified Type N ☐ EPA ☐ Initia	otification	(St	reet Addre	de i	of Design and	Constructio	n			
☑ DOLWD ☑ Ame	2,		- 4	200 Elm [)r	OFHORING					
	ndment #3 -	12/4/1		ty, State, Z							
☐ DCA ☐ Eme	rgency (include	dina	- 1	Princetor	n, NJ 08544						
(NJAC 5:23-8) justi	fication)		Na	me of Con	tact		Telephone N				
Can	cellation		1	Robert Or	rtega		relephone M	umber	7		
Name of Facility Where Abatemen				FACILITY	INFORMATION	F					
Princeton University- Jadw	in Hall	ace (3)				Type of Facility	(4)		-		_
Street Address	iii riali					School (K-12	2)				
Washington Rd						Subchapter to Other (i.e., p	6 (Other than Karivate and comm	-12) nercia	l build	linge	
City (5)						homes, etc.)	2	ricidia	Dunc	mys,	
Princeton						Square Feet	# of Floors		Bldg	Age	-
County (6)			TC	Number Code	/7\/OTATE :: 0 = 0						
MERCER	'			ounty Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished	i)		-
Name of Monitoring Firm Hired by I ATC Associates Inc	Building Owner	er (8)	ASC	M No.	Name of Abateme	ent Contractor (9)		-			
						VIRONMENTAL	, INC.				
Street Address			Til		Street Address			-			
Bromley Corporate Center-	Three Terri	Lane	Lower		1123 BEAVE	R STREET					
City, State, Zip Code		50			City, State, Zip Co	ode		-			
Burlington, NJ 08016		0-000am (17-444)	0.000		BRISTOL, PA	19007					
Project Manager for Monitoring Firm	,		lephon		Telephone No.		License No.				_
Michael Keehn				6-8800	215-788-6040		00509				
Start Date (10)	Scheduled				Name of OSHA M	onitor					
4 / 14 / 12			8 /	12	BRISTOL ENV	/IRONMENTAL	, INC.				
Occupancy Status During Abatemen					Street Address						_
Facility Closed/Vacated During E	ntire Period o	f Abate	ement		1123 BEAVER	STREET					
Abatement Performed Outside of Time of Abatement: 7:00AM-3:3	Normal Facil	ity Hou PM	irs - De AN	scribe	City, State, Zip Co						-
Scope of Work (Check all that apply)					BRISTOL, PA	19007					
⊒ ≥3 sf or ≥3 if ⊠ ≥160 sf or ≥260 if		enovat emoliti			☐ Glovebag			ire.			
Laurian of	Cold Cold Cold Cold Cold Cold Cold Cold	s Loca Norma	0000						paterr	ent 7	-
Location of Asbestos-Containing Material (AC		ed Sol			Description of				_	1	Ť
TO BE ABATED	Ma	aintena	nce/	(i.e	stos Containing Mate	rial (ACM)	Amount	em	Repair	100	Circiosure
IN Facility (13)	Cus	todial (12)	Staff?		surfacing, VAT, o	r	(Specify SF or LF)	Removal	1	squ	1 00
(13)	Yes	No	N/A		other miscellaneou	is)		-		Encapsulate	e
-Level		×		Floor til	le and mastic		12 242 05	57	<u> </u>		L
tair towers #2, #3, #4 & #5		×			e and mastic		12,212 SF	×			
air towers #2, #3, #4 & #5		×			caulk and glazing		1,755 SF				
roughout 1 St Floor		×			caulk and glazing		1,094 LF	Ø			
me of Registered Waste Hauler	on Page	100	JDEP V		1 1 200		2,548 LF	×			
SERVICE TRANSPORT GROU	PINC	H	auler IC 20990	No.	Waste	Name of Registers G.R.O.W.S. N		FILL			
y, State NEW CASTLE, DE					Disposal Date	City, State					
mpleted By (Print or Type)	Title				Cignat	MORRISVILLI					
Brian Scafiro	Estimat	or			Signature	la 1º.	1.0 Dat	e /1	1,	2	

Pg 2

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

Date of Notification (1) 7 / 6	-	12	- ,	N	ame of Buil	ding Owner/Operator	7812 DEC 21 e of Design and	PM 2: 58 Construction) on			
☐ EPA ☐ II	mended				treet Addres	ss Or	#35ESTES % LICE	Caning				
☐ DCA ☐ E	mendment	# <u>3-1</u>	2/4/1		ty, State, Z							_
	mergency stification)	(inclu	ding			, NJ 08544						
	ancellation				ame of Con			Telephone N	lumbe	r	_	_
			_		Robert Or							
Name of Facility Where Abatem	ont in Tal.				FACILITY	INFORMATION					_	
Princeton University- Ja	dentis raki	ing Pi	ace (3)			Type of Facility ((4)			- 1	
Street Address	awin Haii				11		School (K-12)				
Washington Rd							Subchapter 8	(Other than K	-12)			
City (5)							Other (i.e., pr homes, etc.)	ivate and comi	mercia	l build	lings,	
Princeton			The officers				Square Feet	# of Floors		DIA	_	
								# 01 1 1001S		Blag	Age	
County (6)				C	ounty Code	(7)(STATE USE ONLY)	Current Use (Price	r if hoine dans	- 1			
MERCER							Carrent Ose (File	ii being dem	olished	1)		
Name of Monitoring Firm Hired b	y Building	Owne	er (8)	ASC	M No.	Name of Abatem	ont Contracts - (0)	4, ⁷ 4	0 10 1	12		
ATC Associates Inc			0.000		0.000 T 0.70				1)			
Street Address	-					Street Address	VIRONMENTAL	, INC.				
Bromley Corporate Cente	r-Three 1	erri	Lane									
City, State, Zip Code						1123 BEAVE						
Burlington, NJ 08016						City, State, Zip Co		V D		100.00		
Project Manager for Monitoring F	irm		17.	la a b a a		BRISTOL, PA	19007					
Michael Keehn		1)		lephon		Telephone No.		License No.				_
Start Date (10)	Coho	4.4.4			86-8800	215-788-6040		00509				
4/14/12	Sched	uled	Comp	letion [Date (11)	Name of OSHA M	onitor					_
Hard to the late of the control of the late of		12	1 _2	8_ /	12	BRISTOL ENV	IRONMENTAL,	INC.				
Occupancy Status During Abatem	ent (Check	k only	one)			Street Address	•					
☐ Facility Closed/Vacated During	Entire Pe	riod o	f Abat	ement		1123 BEAVER	STREET					
Abatement Performed Outside Time of Abatement: 7:00AM-3	of Normal	Facil	ity Hou	ırs - De	scribe	City, State, Zip Coo						F100%
		'	-M	AN	A	BRISTOL, PA						
Scope of Work (Check all that app	ly)					J. H. OL, I A	13007					
☐ ≥3 sf or ≥3 If ☑ ≥160 sf or ≥260 If		□ D	enovat emoliti	on		☐ Glovebag	inment with Negati sure Procedure pted (*) and Non-F		ıre			
Location of			s Loca Norma							atem	ont T	
Asbestos-Containing Material (ACM)	Use	ed Sole	ely by	Ashar	Description of				T-		-
TO BE ABATED	. 1	Ma	intena todial	nce/	(i.e.	stos Containing Mate , thermal systems in	rial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)		Cus	(12)	Starr?	1	surfacing, VAT, o	r	(Specify SF or LF)	6VO	¥	sde	Sc
	- 1	Yes	No	N/A	1	other miscellaneou	s)		-	1	ulat	ē
orridor intersection				-							œ	
					-	e and mastic		47 SF	×			
outside room # 107			×		Floor tile	and mastic		230 SF	×			П
utside room # J11					Floor tile	and mastic		110 SF	×	П	ᆔ	_
			\boxtimes						+		밁	븐
ame of Registered Waste Hauler			N.	DEP V	Vaste	Cubic Yards of	Name of Registered	d Londell		Ш		Ц
SERVICE TRANSPORT GRO	UP INC			uler ID 20990	No. 1	Waste	G.R.O.W.S. NO					
y, State		-	-1-	<u></u>		Disposal Date (City, State		11-1-			
NEW CASTLE, DE								DA 4000=				
mpleted By (Print or Type)	Title		- 60			Signature	MORRISVILLE					4
Brian Scafiro	Esti	mate	or			Bus Son	Six 1	Dat	9/4	1,	7	

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16) DU 2.58 CK# 2322

Date of Notification (1)	6 /	12		V	Princeto	ilding Owner/Operato	22EC 21 1	4 C- 30		ч	00	0
Agencies Notified ☐ EPA ☑ DOLWD	Type Noti	21			200 Elm	Dr	& LICEN	a Coustantino	n			_
☑ DHSS	Amend	dment #2 -	7/6/1	2 0	ity, State, 2							_
DCA	☐ Emerg	ency (inclu	uding			n, NJ 08544						
(NJAC 5:23-8)	justific Cance	ation)			ame of Co			Telephone N	umbe	r	-	_
	L Cance	ilauori			Robert C							
Name of Facility Where	Abatamant	- T-1: - 5			FACILITY	INFORMATION				1		_
Princeton Universit	he ladest	S laking P	lace (3	3)			Type of Facility	(4)				
Street Address	ty- Jadwin	nall					School (K-1	2)				
Washington Rd						E X	Subchapter	8 (Other than K- private and comm	12)			
City (5)					1000-100		homes, etc.)	nercia	il buil	lings	X C
Princeton							Square Feet	# of Floors		Bido	. Age	_
County (6)												
MERCER						e (7)(STATE USE ONLY)	Current Use (Pr	nor if being demo	olished	d)		
Name of Monitoring Firm		ilding Own	er (8)	ASC	CM No.	Name of Abatem	ent Contractor (9)					_
ATC Associates Inc							VIRONMENTA					
Street Address						Street Address						_
Bromley Corporate	Center-Th	ree Terri	Lane			1123 BEAVE	R STREET					
City, State, Zip Code				1000		City, State, Zip Co						
Burlington, NJ 0801						BRISTOL, PA						
Project Manager for Monito	oring Firm		Te	elephor	ne No.	Telephone No.		License No.				_
Michael Keehn					86-8800	215-788-6040		00509				
Start Date (10)	40	Scheduled				Name of OSHA M	onitor	1 00000				
4 / 14 /				4_ /	_12	BRISTOL EN	/IRONMENTAL	INC.				
Occupancy Status During A	Abatement (Check only	y one)	2502		Street Address						_
Facility Closed/Vacated	During Enti	re Period o	of Abat	ement		1123 BEAVER	STREET					
Abatement Performed C Time of Abatement: 7:0	DAM-3:30F	ormal Faci	lity Ho	urs - De	escribe	City, State, Zip Co						
			- 101-	A	Vi	BRISTOL, PA						
cope of Work (Check all the	nat apply)											
] ≥3 sf or ≥3 lf] ≥160 sf or ≥260 lf	2		lenova emolit	ion	W -	☐ Mini-Encid			re			
Location of			ls Loca Norma							baten	ent 7	-
Asbestos-Containing Ma	terial (ACM)) Us	ed Sol	ely by	Ash	Description of estos Containing Mate			100	1	T	-
TO BE ABATE IN Facility	<u>:D</u>	Cus	aintena stodial	ance/	(i.e	e., thermal systems in	sulation.	Amount (Specify	Removal	Repair	nc.	
(13)			(12)			surfacing, VAT, o	or	SF or LF)	oval	=	Encapsulate	
		Yes	1.10	N/A		other miscellaneou	is)				late	1
Level	MP	10			-	le and mastic		12,212 SF	Ø			E
air towers #2, #3, #4 & air towers #2, #3, #4 &				10	-	le and mastic		1,755 SF	Ø			
roughout 1 St Floor	#5	10	×			v caulk and glazing		1,094 LF	×			E
me of Registered Waste H	aula-				The second second second	caulk and glazing		2,548 LF		П	П	E
RISTOL ENVIRONME		.		JDEP \ auler I[No.	Cubic Yards of Waste	Name of Register	ed Landfill		=		-
/, State				18706		Disposal Date		CKIN LANDE	ILL		242.0314	
RISTOL, PA 19007	16 (8)					Disposal Date	City, State MORRISVILL	E. PA 10067				
npleted By (Print or Type)	71	Title				Signature ,	/					
rian Scafiro		Estimat	or			Brus 4	ealista	Date	11.	1/2		

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

P2 CK#2302

Date of Notification (1)	/ 12		Na	ame of Buil Princetor	ding Owner/Operator University-Office	r(数) Z UEU Z I e of Design and	PM 2: 58	_			_
Agencies Notified Type N ☐ EPA ☐ Initia ☑ DOLWD ☑ Ame			St	reet Addres	ss Or	∮op≦sics & Lice	CORTROL				_
☑ DHSS Ame	ndment #2-	7/6/12		ly, State, Z	p Code , NJ 08544					_	_
	ergency (inclu fication)	ding	-	me of Con		1 2 2	T =				
	cellation			Robert Or			Telephone N	umber			
					INFORMATION			4			
Name of Facility Where Abatemen	t is Taking Pi	ace (3)	-	ACILITY	INFORMATION	1=					
Princeton University- Jadw		400 (0)				Type of Facility					
Street Address						School (K-12	!) ? (Other than K	101			
Washington Rd						Other (i.e., p	rivate and comr	nercia	l build	inas.	
City (5)						nomes, etc.)					
Princeton						Square Feet	# of Floors		Bldg.	Age	100
County (6)		-	TC	untu Code	/7\/074 TE (105 0)	1 K 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
MERCER				dilly Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished	i)		
Name of Monitoring Firm Hired by E	Building Own	er (8)	ASC	M No.	Name of Abatem	ent Contractor (9)					_
ATC Associates Inc						IVIRONMENTAL					
Street Address		~			Street Address		,				_
Bromley Corporate Center-1	Three Terri	Lane			1123 BEAVE	R STREET					
City, State, Zip Code		92.0		-	City, State, Zip C	The state of the s					
Burlington, NJ 08016	,				BRISTOL, PA						
Project Manager for Monitoring Firm	1	Te	lephon	e No.	Telephone No.		License No.				_
Michael Keehn				6-8800	215-788-6040	r e	00509				
Start Date (10)	Scheduled	Comp	etion D	ate (11)	Name of OSHA M	lonitor	00000				
4 / 14 / 12	_12_		4_/	_12_	BRISTOL EN	VIRONMENTAL	INC				
Occupancy Status During Abatemen	t (Check only	one)			Street Address						_
Facility Closed/Vacated During E	ntire Period o	f Abate	ement		1123 BEAVER	STREET					
Abatement Performed Outside of	Normal Facil	ity Hou	rs - De	scribe	City, State, Zip Co						
Time of Abatement: 7:00AM-3:3	UPM/	РМ	AN		BRISTOL, PA						
Scope of Work (Check all that apply)						13007		_			
⊒ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf	⊠ R □ D	enovat emoliti	ion on		☐ Mini-Encl						
		s Loca					Tidale Froced				_
Location of Asbestos-Containing Material (AC		Norma ed Sole	ily Bly bv		Description of				patem		-
TO BE ABATED	M	aintena	nce/	Asbe	stos Containing Mate, thermal systems in	erial (ACM)	Amount	Removal	Repair	Encapsulate	
IN Facility (13)	Cus	stodial (12)	Staff?		surfacing, VAT,	or	(Specify SF or LF)	lova	¥.	sde	1
(.5)	Yes	No	N/A	1	other miscellaneo	us)	7	-		ulate	1
orridor intersection		×		Floor til	e and mastic		47.05	+	<u>_</u>		
utside room # 107					e and mastic		47 SF 230 SF				
utside room # J11		Ø			e and mastic		110 SF				L
		×	П		10-4-		110 5		빌	믜	L
ame of Registered Waste Hauler BRISTOL ENVIRONMENTAL, II	NC .	N.	JDEP V		Cubic Yards of Waste	Name of Registere					
ty, State			18706		4.00	G.R.O.W.S. N	ORTH LAND	ILL			_
BRISTOL, PA 19007				4	- ,	MORRISVILLE	, PA 19067				
ompleted By (Print or Type)	Title				Signature ,						

							of Design a							
Agencies Notified EPA	Type Notificatio	n			et Address 00 Elm Di		2 DEC 21	PM :	2: 58					_
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Princeton University-	Jadwin Ha	all 2 nd	floor				Type of Faci					
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Project Manager for Monitorin	o Eirm					BRISTOL, PA	4 19007					
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