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

				(1.1				8:60 and 5:1	- I des	CEME	1000			
Date of Notification (1)	20 10		200		- Carlotte		A. 107	wner/Operator	The second second					
	5 /	15			Jo	hnson &	Joh	inson /	Job #1502-486	9 Check #6993	îť.			
	ype Noti	fication			Stree	t Address			Notes to the	tha fire file	71 14-2			
	✓ Initial				On	e Johns	on 8	Johnson Pl	aza	STOS CONT	ROI			
	Amend	Nacional Contract			City,	State, Zip	Code	€	F7252	EIDENSING	1.63.7			
□ DHSS □ DCA □	Emerg	lment #			Ne	w Bruns	wick	c, NJ 08933	OE:	EIGERSHIE				
(NJAC 5:23-8)	justific		rGiuuii i	y	Name	of Contac	ct	20.00		Telephone Num	ber	- 1		
	Cance		7.7		Мо	hamed F	luss	sain					1	
					FA	CILITY II	NFO	RMATION		-				
Name of Facility Where Aba	atement i	s Takin	g Place	(3)					Type of Facility					
J&J House									School (K-12	2)				
Street Address				1						8 (Other than K-12 private and comme		uildin	ne	
15 Landing Lane									homes, etc.		TOIAI D	ananı	90,	
City (5)									Square Feet	# of Floors	В	ldg. A	ge	
New Brunswick)					
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			
Middlesex									Warehouse					
Name of Monitoring Firm Hi	red by Bu	uilding (Owner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9))				
Health & Safety Servi	ces							AbateTech, I						
Street Address								reet Address						
PO Box 365								establish length	e. PO Box 25					
City, State, Zip Code								ty, State, Zip C					_	
Berlin, NJ 08009							10.23	Lumberton, I						
Project Manager for Monitor	ing Eirm			Tala	phone	No	-		45 00040	I I tanana Na				111.3
Jim Proctor	my i mii					-1311		lephone No.	•	License No.				
Start Date (10)		Cohoo	lulad C			te (11)		309-265-2107		00529				
2/17/	15					15	1	me of OSHA N						
					_ ′ -	10_	-	EMSL Analyt	Icai					
Occupancy Status During Al			diameter and				1	reet Address						
Facility Closed/Vacated [200 Route 13						
Abatement Performed On Time of Abatement:	AM-	Normai Pi	raciii; /I/	y Hour	s - Des	AM AM	1	y, State, Zip Co						
				_'		/ VIVI	(Cinnaminson	, NJ 08077					
Scope of Work (Check all the	at apply)													
≥3 sf or ≥3 If			⊠ Re	novati	on			☐ Full Cont	ainment with Neg	gative Pressure				
≥160 sf or ≥260 lf				molitio				☐ Glovebag	Procedure					
	72							Non-Exe Non-Exe	mpted (*) and No	n-Friable Procedu	re			
V-0				Locati Vormal							Ab	atem	ent T	уре
Location of Asbestos-Containing Mar	terial (AC	17.77		d Sole		Aaba	ataa	Description o			R	Re	Щ	Щ
TO BE ABATE		ivi)	Ma	intena	nce/			Containing Ma ermal systems i		Amount (Specify	Removal	Repair	lcap	iclo
IN Facility			Cust	todial 8 (12)	Staff?			surfacing, VAT,	or	SF or LF)	<u>\sa</u>		Encapsulate	Enclosure
(13)			Yes	No	N/A	1	ot	her miscellane	ous)				ate	
Throughout Attic Area			, es	110	N/A	Vermic	ulito	(Clean up)		15 SF				
		a (1)	П					(Clean up)		10 01				
					_				221		믐			
								<u> </u>						
Name of Registered Mosts L	Jaular		Ш	L KI		Maata	10.	oio Venda - f	News - FD :	to and 1 - 100		Ш	Ш	Ш
Name of Registered Waste F AbateTech, Inc.	idulei			72.5	JDEP V auler ID		Wa	oic Yards of ste	Name of Regis					
					18750		2		G.R.O.W.S	. сапотн				
City, State							1-11-01-01-01	posal Date	City, State					
Lumberton, NJ			7		12		2	/19/15	Tullytown,	PA				
Completed By (Print or Type))	Title						Signature	\ I_		te 1,	_1		•
Gwendolyn Trumbetti		0	perati	ons C	oordi	nator		()	RIMI		71	2/	15	1

ASB-41 MAY 11

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

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

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)			Nam	e of Buildi	ng Owner/Operator	(2)		J			
//	15		At	lantiCare	e Regional Medic	al Center	b #1502-4870	Chec	k #6	995	
Agencies Notified Type Notific	cation		Stree	et Address		6.23 et 1	LR 10 PH	76.1	Ĉ.		
☑ EPA ☑ Initial			65	Jimmie	Leeds Road	ATTO	· Promos				
☑ DOLWD ☐ Amende			City,	State, Zip	Code	<u> </u>	1919.00E	MRO	1	V-1-1-1-1	
☑ DHSS Amenda ☐ DCA ☑ Emerge			182	mona, N		ă	LICENSIN	G			
DCA Emerger (NJAC 5:23-8) Significant (NJAC 5:23-8)	ncy (Inclu- ion)	aing	-	e of Conta			Telephone Nu				
☐ Cancella		54 15	Fr	ank Casp	per		Telephone Rui	IIIDOI	1.	59	12
			FA	CILITY	NFORMATION						
Name of Facility Where Abatement is	Taking Pl	ace (3)				Type of Facility	(4)				
AtlantiCare Regional Medical	Center -	Mainla	and Ca	mpus		☐ School (K-12	2)				
Street Address						Subchapter	8 (Other than K-1	12)			
65 Jimmie Leeds Road						homes, etc.)	rivate and comm	ercial b	uildir	gs,	
City (5)						Square Feet	# of Floors	IP	ldg. A	lae.	
Pomona									lug. /	igo	
County (6)			Cou	nty Code ((7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	lished)			_
Atlantic			1 1000		, , ,	Hospital	ior ii aonig aonio				
Name of Monitoring Firm Hired by Buil	ding Own	er (8)	ASCN	No.	Name of Abateme						
TTI Environmental, Inc.		2010			AbateTech, I						
Street Address					Street Address				-		
1253 North Church Street					30 Maple Ave	PO Boy 25					
City, State, Zip Code					City, State, Zip Co			-			
Moorestown, NJ 08057		20			Lumberton, N						
Project Manager for Monitoring Firm		Te	lephone	No	Telephone No.	45 00040	I issues No				
James A. Guilardi			309-31 ₄		609-265-2107		License No. 00529				
Start Date (10)	Schedule				Name of OSHA M		00020				
2/6/15			9/	Secretary of the second	EMSL Analyti						
Occupancy Status During Abatement (Check on	ly one)		##-C-	Street Address						
☐ Facility Closed/Vacated During Enti	re Period	of Abat	ement		200 Route 13	0 North					
Abatement Performed Outside of N	ormal Fac	cility Ho	urs - Des	scribe	City, State, Zip Co	ode					
Time of Abatement:AM	PM/	PN	Λ	_AM	Cinnaminson						
Scope of Work (Check all that apply)					0000	3					
≥3 sf or ≥3 lf		Renova	tion			ainment with Neg	ative Pressure		1.7		
☐ ≥160 sf or ≥260 lf		Demolit			☐ Mini-Encl	osure Procedure					
					⊠ Non-Exer	mpted (*) and No	n-Friable Procedi	ure			
		Is Loca						At	atem	ent T	ype
Location of	. 1	Norm Ised So			Description of			Z	Z	т	т
Asbestos-Containing Material (ACN TO BE ABATED	" "	Wainten			estos Containing Mat e., thermal systems i		Amount (Specify	Remova	Repair	nca	nclc
IN Facility	C	ustodia		(surfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)	Ye	(12 s No	1	1	other miscellaned	ous)				ate	(0)
Ground Floor IT Room	1 10	s No		Davible		0.84	450.05	-	_	_	
Ciodila i Iooi II Room			\perp	Double	Layer Floor Tile	& Wastic	150 SF		Ш	Ш	Ш
30 30 30 30	🗀		Ш			25 2 5	33 35				
							E				
Name of Registered Waste Hauler			NJDEP I		Cubic Yards of	Name of Regist	ered Landfill				
AbateTech, Inc.		1	Hauler II 18750		Waste 12	Atlantic Co	unty Utilities A	Autho	ity		
City, State			10750		Disposal Date	City, State			- 7		
Lumberton, NJ					2/9/15		Township, N.	J			
Completed By (Print or Type)	Title			4	Signature			ate ,			
Gwendolyn Trumbetti	CHESTON	ations	Coordi	nator	7 .	+	, D	21	4/1	5	
SB-41								2	.11	J	
1AY 11	* Do n	ot use t	his form	for asbest	tos licensure exempt	ed activities.					

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

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)	• 44	- (.		-	
	. 15			Jers	sey City H	ousing Author	ity / Job #1404	4745/Check #68	843	- 0-		
Agencies Notified Type Notifie	ation			Street	Address			La . 4 / 2	DIU	11	71	: (
⊠ EPA ☐ Initial				563	Montgom	ery Street		Atoro				
□ DOLWD				City, S	tate, Zip Co	ode		4.00 L	135	CO	MIT	ROI
☐ DHSS Amendr					sey City, N			4.52EG	- HUL	KSI.	NG	
DCA Emerge (NJAC 5:23-8) In Emerge		auaing		Name	of Contact	T 2	2 702 21	Telephone Numb			N N	
Cancell				Mik	e Collins	Tale 2001 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 -		· · · · · · · · · · · · · · · · · · ·	`			10.5
				FAC	LITY INF	ORMATION					10	
Name of Facility Where Abatement is			(3)				Type of Facility					
Catherine Todd/Montgomery	Garde	ns					School (K-12) 3 (Other than K-12)				
Street Address							Other (i.e., pr	ivate and commer	cial bui	ldings	3,	
563 Montgomery Street						1	homes, etc.)					
City (5)							Square Feet	# of Floors	Blo	ig. Ag	е	
Jersey City						3						
County (6)				Coun	ty Code (7)	(STATE USE ONLY)	1	or if being demolis	hed)			
Hudson							Senior Hous	sing Residence				
Name of Monitoring Firm Hired by Bu	ilding C	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
A. Seine Lighthouse Solution	s, LLC	; .				AbateTech, I	nc.					No. of Line
Street Address						Street Address						
PO Box 354						30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip C	ode					
South Orange, NJ						Lumberton, l	NJ 08048					
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.				
Sarah		_	2	01-349	-2666	609-265-2107	7	00529				
Start Date (10)				etion Da	32 22	Name of OSHA N	Monitor					
12 /29 /14 (2_ /	_2	7 / -	15	EMSL Analyt	tical					
Occupancy Status During Abatement	(Check	e-only t	one)			Street Address		72	7.11			
☐ Facility Closed/Vacated During Er						200 Route 13	30 North					
☐ Abatement Performed Outside of						City, State, Zip C	ode					
Time of Abatement:AM	PI	/1/	PN	1	AIVI	Cinnaminsor	n, NJ 08077					
Scope of Work (Check all that apply)							stainment with No.	nativo Processo				
☐ ≥3 sf or ≥3 lf		⊠ Re	enova	tion		☐ Full Con	itainment with Neg closure	gative Plessure				
≥ 160 sf or ≥ 260 lf		De					g Procedure	E . II . B				
						∑ Non-Exe	empted (*) and No	n-Friable Procedu		-	- 1 7	
_		1000	S Loca Norm			Description	of.			atem		
Location of Asbestos-Containing Material (AC	M) -			lely by	Asbes	Description of stos Containing Ma		Amount	Ren	Repair	∃nc	inc
TO BE ABATED	/	100000000000000000000000000000000000000		ance/ I Staff?		, thermal systems	insulation,	(Specify SF or LF)	Removal	air.	apsı	Enclosure
IN Facility (13)		Ous	(12			surfacing, VAT other miscelland		SF OI LF)	-		Encapsulate	ē
(15)		Yes	No	N/A							U	
Building #1 Exterior					Window	/ Caulk		7,200 LF				
	* *			. 🗆		- 1						
					-							
Name of Registered Waste Hauler				NJDEP	Waste	Cubic Yards of	Name of Regi	stered Landfill				
AbateTech, Inc.				Hauler I	.0	Waste 20	G.R.O.W.S	S. Landfill				
City, State				1010		Disposal Date	City, State					
Lumberton, NJ						2/27/15	Tullytown	, PA				
Completed By (Print or Type)	Title	3			-	Signature	7 1	D	ate	72	1	-
Gwendolyn Trumbetti	91077		tions	Coord	linator	(mt		11	50	115	>

ASB-41 MAY 11

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

Date of Notification (1)	30 /	15	_		1		Owner/Operator (2	/ Job #13	04-4626 Check	#676	35	5	
Agencies Notified ⊠ EPA ⊠ DOLWD	Type Notifica ☐ Initial ☐ Amended				Trus	and the same of th		rsity E.A. MacN	NSBESTOS C Millarg Bldgg F N	ON NR	[R()L	
☑ DHSS	Amendme				A CONTRACTOR	tate, Zip C							
□ DCA	☐ Emergen		uding			ceton, N			Tolombono Niverba				-
(NJAC 5:23-8)	justification	50 to 180				of Contact			Telephone Number	31			2
	☐ Cancellat	1011		W		ert Orte			000-200-10				_
					FAC	CILITY IN	FORMATION						5)
Name of Facility Where A		aking F	Place	(3)				Type of Facility ()				
Street Address								Subchapter 8	(Other than K-12) ivate and commerc	ial bu	ildino	IS.	1
20 Washington Ro	ad, Princeto	n Univ	ersi	ty M	ain Car	npus		homes, etc.)	irate and common				
City (5)								Square Feet	# of Floors	Blo	dg. A	ge	
Princeton								1,000,000	5	1	85		
County (6)					Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ed)			
Mercer								University L	ibrary				
Name of Monitoring Firm	Hired by Build	ding Ow	mer (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
ATC Associates				M-527	0009	8	AbateTech, I	nc.					
Street Address	***************************************						Street Address						
3 Terri Lane							30 Maple Ave	e. PO Box 25					
City, State, Zip Code							City, State, Zip Co	ode			7	27,000,000	
Burlington, NJ 080	16						Lumberton, N	NJ 08048					
Project Manager for Mon	itoring Firm			Tel	ephone	No.	Telephone No.		License No.				
Michael R. Keehn				6	09-386	-8800	609-265-2107		00529				
Start Date (10) 3 / 24 /	V				etion Da 7 /		Name of OSHA N EMSL Analyt						
Occupancy Status Durin							Street Address						27 - 27 - 20
☐ Facility Closed/Vacate	프로토 기계를 하는데 하지만 사이에 가게 되었다.	(0 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /	-11/2/2014		ment		200 Route 13	0 North					
☐ Pacifity Closed/Vacati						cribe	City, State, Zip Co						
Time of Abatement: _							Cinnaminsor						
Scope of Work (Check a	II that apply)												
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De				☐ Mini-End	g Procedure	native Pressure	9			
			ls	Loca	tion					Ab	atem	ent T	уре
Location Asbestos-Containing TO BE AB/ IN Facil (13)	Material (ACM ATED	1)	Use Ma	inten	ely by ance/ Staff?		Description of stos Containing Ma ., thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A								
Room 227A]		\boxtimes		Floor T	ile & Mastic		400 SF				
Abandon Exterior St	eam Tunnel					Cut & V	Vrap ···		·· 300 LF ··	\boxtimes			
Auditorium Roof		l			\boxtimes	Roof FI	ashing		714 LF				
1st Fl. Column C-D be	etween 5&6					Double	layer Floor tile	& Mastic	270 SF				
Name of Registered Was	ste Hauler				NJDEP \		Cubic Yards of	Name of Regis	tered Landfill	.horron			
AbateTech, Inc.					18750		Waste 40	G.R.O.W.S	. Landfill				
City, State Lumberton, NJ							Disposal Date 2/27/15	City, State Tullytown,	PA				
Completed By (Print or T	ype)	Title					Signature /		Dat	e,	-	, ,	_
Gwendolyn Trumbe		10000000	erati	ons	Coord	inator	(m		1/3	30	15)

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

Date of Notification (1)							Owner/Operator (2						
1/	30 /	15	_		Trus	tees of F	Princeton /	Job #1408-4803	Check #6841				
Agencies Notified	Type Notifica	tion			Street /	Address	15	Cala Haw s	0 PM 1: 15				
⊠ EPA	☐ Initial				Trus	tees of F	Princeton Univer	rsity E.A. MacN	lillan Bldg.				
□ DOLWD		700		ŀ	City, St	ate, Zip C	ode	ASBESIA	IS CONTROL				
□ DHSS	Amendme				7.00		J 08544	& 116	ENSING				
DCA	☐ Emergeno justificatio		luding			of Contact			Telephone Numb	er			
(NJAC 5:23-8)	Cancellati	**		750		ert Orteg			JU-400-1-				
	Canconati	-					FORMATION				1		
			DI	(2)	FAC	ILII Y IIN	FURIVIATION	Type of Facility (1)			_	
Name of Facility Where				(3)				School (K-12)					
Princeton University	ty – Fireston	e Lib	rary			***		Subchapter 8	(Other than K-12)				
Street Address									vate and commerc	cial bui	lding	S,	
One Washington R	oad							homes, etc.)	# of Floors	Die	lα Λο		
City (5)								Square Feet	# of Floors		lg. Ag	e	
Princeton								1,000,000	8		'2		
County (6)					Count	y Code (7)	(STATE USE ONLY)	[[경영양양양양양 - 100]	or if being demolish	ned)			
Mercer								University L	brary				
Name of Monitoring Firm	Hired by Build	ing O	wner (8)	ASCM I	No.	Name of Abateme						
ATC Associates					0009	8	AbateTech, li	nc.					
Street Address							Street Address						
3 Terri Lane							30 Maple Ave	e. PO Box 25					
City, State, Zip Code					-		City, State, Zip Co	ode					
Burlington, NJ 080	16						Lumberton, N	NJ 08048					
Project Manager for Mor				Tele	phone I	Voo	Telephone No.		License No.				
Michael R. Keehn			_		9-386-		609-265-2107	•	00529				
Start Date (10)	Is	ekedi	uled C	omple:	tion Dat	e (11)	Name of OSHA M	Ionitor					
12 / 24 /					/		EMSL Analyt	ical					
	/						Street Address						
Occupancy Status Durin Facility Closed/Vacat					mont		200 Route 13	0 North					
Abatement Performe						cribe	City; State, Zip Co						
Time of Abatement:													
							Cinnaminsor	1, NJ 00077					-
Scope of Work (Check a	Il that apply)						⊠ Full Con	tainment with Neg	ative Pressure				
			⊠ Re	novati	on		☐ Mini-End	losure					
☐ ≥160 sf or ≥260 lf			☐ De	molitic	n		Gloveba	g Procedure	n-Friable Procedu	ro			
							☐ Non-Exe	empted (*) and No	I-FIIable Flocedu		atam	ant T	una
8 60	020			Locat Norma			D				atem		
Location Asbestos-Containing		Λ.		ed Sole		Ashe	Description of stos Containing Ma		Amount	Ren	Repair	Enc	Enc
TO BE AB)	8000	intena			., thermal systems	insulation,	(Specify	Remova	air	aps	Enclosure
IN Faci	lity		Cus	todial (12)	Staff?	20	surfacing, VAT other miscellane		SF or LF)	<u> 80</u>		Encapsulate	Тe
(13)			Yes	No.	N/A		other miscenarie	(sous)				(D)	
			163	1000		Di	d Fifting Inquis	tion	60 LF		П	П	П
Work Area #1A Leve	11		Ш			Pipe ar	nd Fitting Insula	LIOII		-			
en ser en en o	500 50 50				. 🗆	2.77		950 10 15	H (M) (M)			Ш	Ш
Work Area #1A Leve	11												
					JDEP \	Naste	Cubic Yards of	Name of Regis	tered Landfill			100 -10	
Name of Registered Wa	ste Haulel			1989	lauler II		Waste	G.R.O.W.S					
AbateTech, Inc.					18750)	2					-	
City, State							Disposal Date	City, State	DA				
Lumberton, NJ			13.				2/27/15	Tullytown,					
Completed By (Print or	Гуре)	Title)		1.0		Signature	Sant	Da	$\frac{\text{ate}}{i}/3$	M	15	-
Gwendolyn Trumb	etti	0	perat	ions	Coord	inator	\	YYW	7	13	U	(\	7
ASB-41		1)					
MAY 11		*	Do no	t use th	his form	for asbes	tos licensure exem	pted activities.					

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

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)			Name	of Buildin	g Owner/Operator (2	2)	and a self	110	70		14
1 /30 /15						ZEES FEE	1.0 -	70	UU		
Agencies Notified Type Notification	1377		Street	Address		ACH PER	10 FK 1: 15				72
⊠ EPA ☐ Initial					te Street Floor 9	** **					
☑ DOLWD ☑ Amended				State, Zip (WHEEP!	SS CONTROL				
☑ DHSSAmendment #	_			nton, NJ		ě Li	JENSTAG "				
DCA Emergency (ir justification)	cluding	1		of Contac			Telephone Numb	er iii			
(NJAC 5:23-8) justification	77.4	*		herine D		A 41 4	Telephone Numb	333			
- Cancellation			110.000					_			
N	-	(0)	FA	CILITY IN	IFORMATION						
Name of Facility Where Abatement is Takin		(3)				Type of Facility					
Trenton Psychiatric -Lincoln Build	ing					School (K-1)	2) 8 (Other than K-12)				
Street Address						Other (i.e., p	private and commerc	ial bu	ilding	ļs,	
100 Sullivan Way						homes, etc.		1			
City (5)						Square Feet	# of Floors	BI	dg. A	ge	
West Trenton	11 - 1100										
County (6)			Cour	nty Code (7)(STATE USE ONLY)		rior if being demolish	red)			
Mercer						Hospital					
Name of Monitoring Firm Hired by Building	Owner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)				
Brinkerhoff Environmental					AbateTech, In	nc.					
Street Address					Street Address						
1913 Atlantic Ave.					30 Maple Ave	e. PO Box 25					
City, State, Zip Code					City, State, Zip Co	ode					
Manasquan, NJ 08736					Lumberton, N	J 08048					
Project Manager for Monitoring Firm		Tele	phone	No.	Telephone No.		License No.				
Jason Hooper	_	73	2-223	-2225	609-265-2107		00529				
	duled C	omple	tion Da	te (11)	Name of OSHA M	lonitor					
12/15/14(2_/	27	_ / _	15	EMSL Analyti	ical					
Occupancy Status During Abatement (Chec	conly o	one)			Street Address						
☐ Facility Closed/Vacated During Entire Pe	riod of	Abater	nent		200 Route 13	0 North					
Abatement Performed Outside of Norma					City, State, Zip Co	ode					
Time of Abatement:AMP	VI/	PM-		AM	Cinnaminson	, NJ 08077					
Scope of Work (Check all that apply)											
≥3 sf or ≥3 If	M Pa	novatio	200		☐ Full Cont ☐ Mini-Enc	ainment with Ne	gative Pressure				
□ ≥160 sf or ≥260 lf		molitio			☐ Glovebac						
		0001-000-000	2776				on-Friable Procedure	9			
	1.55	Locati						Ab	atem	ent T	уре
Location of		Normal d Sole			Description o			Re	Re	Щ	ш
Asbestos-Containing Material (ACM) TO BE ABATED		intena			stos Containing Ma ., thermal systems i		Amount (Specify	Remova	Repair	-car	- Iclo
IN Facility	Cust	todial S	Staff?	(surfacing, VAT,	or	SF or LF)	Val	-	Encapsulate	Enclosure
(13)	Yes	(12) No	N/A	-	other miscellane	ous)				ate	
Da 400 Office	_			FI (1			2.05	F 2			
Room 109 Office				Test Wilson	le & Mastic		9 SF		ᆜ		
1 st Floor ··· ·· ·· ·· ··		⊠.	Ш	Black F	ire Electrical Pa	nel ···	2 SF -		L		Ш
Name of Registered Waste Hauler		114 (100)	JDEP V		Cubic Yards of	Name of Regis	stered Landfill				
AbateTech, Inc.		H	auler ID		Waste 2	G.R.O.W.S	. Landfill				
City, State			18750		Disposal Date	City, State		740-			
Lumberton, NJ					2/27/15	Tullytown	PA				
Completed By (Print or Type) Title	1				Signature	1	Dat	1	í	14-	
	, perati	one C	Coordi	nator	Olgifature Con	1 t	Dat	117	301	15)
ASB-41	Poruti		- Joi al		1 Al	101		1	- 1	10	5

ASB-41 MAY 11

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

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

Date of Notification (1)					Name	of Building	Owner/Operator (2	2)		APR 151				
	30 /	15			PSE	&G / J	ob #1310-4703 C	Check #67145	E8 10 PM	3.6	18			
Agencies Notified	Type Notific	ation			Street	Address		- 1100 01 12	- 1 - E	. 11				
	☐ Initial				80 F	Park Plaz	a	$A = \hat{a} \cdot \hat{c}$	STOS GO	MID.	01			
☑ DOLWD					City, S	tate, Zip C	Code		LICENSI		cià à			
□ DHSS	Amendm	100	50			vark, NJ			LIGLIGI	E G		41		
	☐ Emergen		cluding		20000000	of Contact			Telephone Nu	mher		-		
(NJAC 5:23-8)	justificati Cancella					w Shuda		25 0/2 12	- ·	iiiiboi				
	☐ Caricella	LIOII			32-53									
		<u> </u>			FAC	CILITY IN	FORMATION							
Name of Facility Where At		Taking	Place	(3)				Type of Facility (4						
PSE&G Camden Sw	itch Yard							☐ School (K-12) ☐ Subchapter 8		12)				
Street Address								Other (i.e., pri	vate and comn	nercial l	ouild	lings	6,	
7272 N. Crescent Biv	vd.							homes, etc.)			0.000.000			
City (5)								Square Feet	# of Floors		3ldg	. Ag	е	
Pennsauken								-						
County (6)					Cour	ty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demo	olished)				
Camden								Substation						
Name of Monitoring Firm I	lired by Buil	ding C)wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
Health & Safety Serv				1			AbateTech, I							
Street Address						-	Street Address							201.00000
318 12 th Street							30 Maple Ave	PO Box 25						
City, State, Zip Code		C		-			City, State, Zip Co							
Hammonton, NJ 080	127						Lumberton, N							
The state of the s				Tolo	nhana	No	Telephone No.	40 00040	License No.					
Project Manager for Monit	oning Firm		_		phone 09-704		609-265-2107	r::	00529					
Jim Proctor		~	1-10	7.5			Name of OSHA N		00323					
Start Date (10)					tion Da		EMSL Analyt							
Occupancy Status During			- 22	*****			Street Address				-	*	8	
☐ Facility Closed/Vacated					ment		200 Route 13	0 North						
☐ Abatement Performed	30774					cribe	City, State, Zip Co							
Time of Abatement:							Cinnaminsor							
Scope of Work (Check all	that apply)						☐ Full Con	tainment with Nega	ative Pressure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re				☐ Mini-End							
							Non-Exe	mpted (*) and Non	-Friable Proce	dure				
			5.535	Locat						1	Abat	eme	ent T	уре
Location of				lorma	lly ely by		Description of			2	0	70	Щ	Щ
Asbestos-Containing N TO BE ABAT		Л)		intena			stos Containing Ma ., thermal systems		Amount (Specify	Kellioval	-	Repair	ıcai	ıclo
IN Facility			Cus		Staff?	(1.6	surfacing, VAT		SF or LF)	l va	5	٦.	Encapsulate	Enclosure
(13)				(12)	T 21/2	-	other miscellane	eous)					ate	CD.
Handhole Walls 220-3			Yes	No	N/A	Transit	e Conduit		800 LF		1 6	\exists	П	П
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20 20 20 20		222	·U			133		.,			1 [Ц	Ш
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			П	П	П					I] [
Name of Registered Waste	e Hauler			N	JDEP \	Naste	Cubic Yards of	Name of Regist	ered Landfill		- '		_	_
Waste Management	e i iaulei			13.52	lauler II		Waste	G.R.O.W.S.						
					17273	3	10 Disposal Date	City, State						- 3
City, State							2/27/15		DΛ					
Camden, NJ								Morrisville,	r A				1	
Completed By (Print or Type	133	Title			20 100	2 100	Signature	- a A		Date).	1	20	115	5
Gwendolyn Trumbet	ti	0	perati	ons	Coord	inator	1 CX	MANA		ł	1	50	11-	J
ACD 44		-	-											

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

RECTIVED

1	Date of Notification (1)						Owner/Operator (2	S37	Harebiu M		0.000.750		
DEPA		30 / 15			PSE	&G Deliv	very, Projects &	Construction	/ Job #1411-484	1 Ch	eck	#676	37
DEPA	Agencies Notified	Type Notification			Street	Address		7		13	THE		
DHSS					80 F	ark Plaz	a		& LIGHT	NG			
December					City, S	tate, Zip C	ode					- 7	
Name of Contact			70.72		New	ark, NJ	07101						
			ciuaing	Ī	Name	of Contact	:		Telephone Number	г			
Name of Facility Where Abstement is Taking Piace (3)					Larr	y Edding	ger						
School (K-12) School (K-12) Street Address Stree					FAC	ILITY IN	FORMATION						
Street Address Stre	Name of Facility Where Al	patement is Taking	Place	(3)				Type of Facility ((4)				
Other (i.e., private and commercial buildings, homes, etc.) Other (ii.e., private and commercial buildings, homes, etc.) Other (iii.e., private and commercial buildings, hother (iii.e., private and commercial buildings, private and commercial bui	PSE&G Plainfield St	ubstation											
241 W. 2 rd Street	Street Address							Subchapter 8	(Other than K-12)	al bui	ldina	S.	
Painfield County (e)	241 W. 2 nd Street								Trato and sommers			- 1	
County (6) Union Union Warse of Monitoring Firm Hired by Building Owner (8) Health & Safety Services Street Address 318 12 th Street Street Address 318 12 th Street City, State, Zip Code Hammonton, NJ 08037 Project Manager for Monitoring Firm Jim Proctor Start Date (10) 12 / 1 / 14 2 / 2 / 7 / 15 Cocupancy Status During Abatement (Check-only-one) Facility Closed/Vacated During/Entire-Period** Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement — AM — PM — PM — AM Scope of Work (Check all that apply) 3 si or ≥3 if Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No NIA Control House Office & Bathroom Areas Name of Repistered Waste Hauler Waste Management Telephone No. 100529 Street Address 20 Route 130 North Closes No. 100529 Street Address 20 Route 130 North Closes No. 100529 Street Address 20 Route 130 North Closes No. 100529 Street Address 20 Route 130 North Closes No. 100529 Street Address 20 Route 130 North Closes No. 100529 Street Address 20 Route 130 North Closes No. 100529 Street Address 20 Route 130 North Closes No. 100529 Street Address 20 Route 130 North Closes Address 20 Route 130 North Closes Abatement Type Mini-Enclosure Mini-E	City (5)							Square Feet	# of Floors	Blo	g. Ag	je	
Union	Plainfield												
Name of Monitoring Firm Hired by Building Owner (8)	County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ed)			
AbateTech, Inc.	Union							Utility					
Street Address 318 12 th Street City, State, Zip Code Hammonton, NJ 08037 Project Manager for Monitoring Firm Jim Proctor Start Date (10) 12 / 1 / 14	Name of Monitoring Firm I	Hired by Building C	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
30 Maple Ave. PO Box 25	Health & Safety Serv	vices					AbateTech, I	nc.					
City, State, Zip Code Hammonton, NJ 08037 Project Manager for Monitoring Firm Jim Proctor Siart Date (10) 12 / 1 / 14 Scheduled Completion Date (11) 2 / 2 / 7 / 15 Scheduled Completion Date (11) Pacific Closed/Vacated During Entire—Periodroff Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of AbatementAMPMAM PMAM Sope of Work (Check all that apply) ≥ 3 of or ≥ 3 if Renovation Demolition	Street Address						Street Address	W/ 2000					
Hammonton, NJ 08037 Project Manager for Monitoring Firm Scheduled Completion Date (11) 12	318 12 th Street						30 Maple Ave	e. PO Box 25					
Telephone No. Sobject Start Date (10) Scheduled Completion Date (11) Name/of OSHA Monitor 12	City, State, Zip Code						City, State, Zip C	ode					
Start Date (10)	Hammonton, NJ 080	37					Lumberton, I	NJ 08048					
Start Date (10) 12	Project Manager for Monit	oring Firm		Tele	phone-	No.	Telephone No.		License No.				
Table Transite floor panels Transite floor pane	Jim Proctor			60	9-704	-8850	609,265-2107	7	00529				5112
Street Address Street Address 200 Route 130 North	Start Date (10)	Sched	luled C	omple	tion Da	te (11)							
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/_PMAM	12 /1 / _	14 (2/	27	/ _	15	ENSL Analyt	tical					
□ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/PMAM PM/PMAM PM/PMAM PM/PMAM PM/PMAM PM/PMAM PM/PMAM PM/PMAM Control House □ □ □ □ □ □ □ □ □	1 1 1						Street Address						
Time of Abatement:AMPMAM							200 Route 13	30 North					
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf □ Demolition □ Demolition □ Demolition □ Demolition □ Demolition □ Description of Asbestos-Containing Material (ACM) IN Facility (13) □ Full Containment with Negative Pressure □ Mini-Enclosure □ Non-Exempted (*) and Non-Friable Procedure □ Non-Exempted (*) and Non-Exempted (*) and Non-Friable Procedure □ Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non							City, State, Zip C	ode					
Salid Safor ≥3 If	I Ime of Abatement:	AlviPi	VI/			AIVI	Cinnaminsor	n, NJ 08077					
□ ≥3 sf or ≥3 lf □ Demolition □ Mini-Enclosure □ Glovebag Procedure ■ ≥160 sf or ≥260 lf □ Demolition □ St. Coation Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Material (ACM) IN Facility (13) □ St. Coation Normally Used Solely by Maintenance/ Custodial Staff? (12) □ Description of Asbestos Containing Material (ACM) Amount (Specify Specify Specify (12) □ St. Coation of Asbestos Containing Material (ACM) Amount (Specify Specify Specify Specify (12) □ St. Coation of Asbestos Containing Material (ACM) Amount (Specify Specify Specify Specify (12) □ St. Coation of Asbestos Containing Material (ACM) Amount (Specify Specify Specify Specify (Specify Specify Specify Specify (Specify (12) □ St. Coation of Asbestos Containing Material (ACM) Amount (Specify Specify Spe	Scope of Work (Check all	that apply)					□ Eull Con	tainment with Ner	native Pressure				
Second	☐ >3 sf or >3 lf		□Re	novati	on				gative r ressure				
Stocation of Normally Description of Asbestos-Containing Material (ACM) Security			⊠ De	molitic	n		Gloveba	g Procedure	n Eriable Procedure				
Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A			1-	1			⊠ Non-Exe	empled () and No	III-FIIADIE FIOCEGUIE	_	atom	ant T	vne
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Control House Office & Bathroom Areas Throughout Exterior Name of Registered Waste Hauler Waste Management City, State Camden, NJ Completed By (Print or Type) Gwendolyn Trumbetti Custodial Staff? (12) Yes No N/A Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF) Signature Office & Bathroom Areas Asbestos Containing Material (ACM) (Specify Specify Sp	Longtion	, e	2.53				Description (of					-
Control House			Use	ed Sole	ely by		stos Containing Ma	aterial (ACM)		Rem	ζep:	nca	ncl
Control House			100000000			(i.∈	e., thermal systems	insulation,		ova	H.	ısqı	nso
Yes No N/A Control House □ □ Transite floor panels 60 SF □ □ Office & Bathroom Areas □ □ Floor tiles 200 SF □ □ Throughout □ □ Window caulk 100 SF □ □ Exterior □ □ Roofing Materials 1,500 SF □ □ Name of Registered Waste Hauler Waste Management Hauler ID No. 1125 Cubic Yards of Waste Hauler G.R.O.W.S. Landfill G.R.O.W.S. Landfill City, State Camden, NJ Disposal Date 2/27/15 City, State Tullytown, PA Completed By (Print or Type) Gwendolyn Trumbetti Title Operations Coordinator Signature Signature Date 1/30 J 5		y		(12)	_				0. 0. 2. 7	_		late	e.
Office & Bathroom Areas Throughout Exterior Name of Registered Waste Hauler Waste Management City, State Camden, NJ Completed By (Print or Type) Gwendolyn Trumbetti Omega State Camden State Completed By (Print or Type) Gwendolyn Trumbetti Omega State Camden State Completed State Completed State Completed State Camden State Completed State State Completed State	N 82		Yes	No	N/A		禁						
Throughout	Control House	8				Transit	e floor panels	r	60.SF				
Exterior	Office & Bathroom Ar	eas ······			- 0	Floor ti	les	998 938 P44	· 200 SF ·				
Name of Registered Waste Hauler Waste Management NJDEP Waste Hauler ID No. 1125 Disposal Date City, State Camden, NJ Completed By (Print or Type) Gwendolyn Trumbetti NJDEP Waste Hauler ID No. 1125 Disposal Date 2/27/15 Signature Signature Date 1 30 15	Throughout					Window	w caulk		100 SF				
Waste Management City, State Camden, NJ Completed By (Print or Type) Gwendolyn Trumbetti City, State Disposal Date 2/27/15 Completed By (Print or Type) Compl	Exterior					Roofin	g Materials		1,500 SF				
City, State Camden, NJ Completed By (Print or Type) Gwendolyn Trumbetti City, State Disposal Date 2/27/15 Tullytown, PA Signature Date 130 Date 130 Date	Name of Registered Wast	e Hauler		110000									
City, State Camden, NJ Completed By (Print or Type) Gwendolyn Trumbetti City, State 2/27/15 Tullytown, PA Signature Operations Coordinator	Waste Management			H		O No.	100000000000000000000000000000000000000	G.R.O.W.S	. Landfill				
Camden, NJ Completed By (Print or Type) Gwendolyn Trumbetti Title Operations Coordinator 2/27/15 Tullytown, PA Signature Date 1 30 15	City, State		20		1120			City, State					
Completed By (Print or Type) Gwendolyn Trumbetti Title Operations Coordinator Signature 1 30 15							2/27/15	Tullytown	, PA				
Gwendolyn Trumbetti Operations Coordinator 1 30 115		pe) Title	e				Signature	1	Dat	e i	0-	1.	_
1 100				ions	Coord	inator	L	ON K		1	30		5
	ASB-41		• - 20 - 50 755					1000				-1.	5

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

Date of Notification (1)				Name	of Building	g Owner/Operator (2) - nese :	EB IO PAL	. 25			
1 /	30 / 1	5		PS	E&G Deli	very, Projects &	Construction	TJob #1411-48	41 C	heck	#67	67
	Type Notification	1		Street	Address		ASR	ESTAS CON	TRA			
⊠ EPA	☐ Initial			80	Park Plaz	a	× 2 0 0	LICENSIN	1110	lead .		
⊠ DOLWD		. 4		City, S	State, Zip C	ode	4		<u> </u>			
□ DHSS	Amendment:			Nev	wark, NJ	07101						
☐ DCA (NJAC 5:23-8)	☐ Emergency (justification)	nciualii	J	Name	of Contac	t		Telephone Numb	er			
(1.61.10 0.120 0)	☐ Cancellation			Lar	ry Eddin	ger						
				FA	CILITY IN	FORMATION						1
Name of Facility Where Al	patement is Taki	ng Place	(3)				Type of Facility	(4)				
PSE&G Plainfield St	ubstation						School (K-12					
Street Address								3 (Other than K-12) rivate and commen		ildina		
241 W. 2 nd Street							homes, etc.)		Ciai Di	munig	5,	
City (5)			-				Square Feet	# of Floors	BI	dg. A	ge	
Plainfield								0.0000000000000000000000000000000000000				
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	or if being demolis	hed)			
Union				000	ity occo (i	Nomine our onery	Utility	ior il bollig dorriollo	1100)			
Name of Monitoring Firm I	dired by Building	Owner	/o\	ASCM	No	Name of Abateme						_
Health & Safety Serv		Owner	(0)	ASCIVI	NO.	AbateTech. In						
	rices						nc.					
Street Address 318 12 th Street						Street Address						
						30 Maple Ave	with properties and recognition					
City, State, Zip Code						City, State, Zip Co						
Hammonton, NJ 080						Lumberton, N	VJ 08048					
Project Manager for Monito	oring Firm	/	Tele	phone	No.	Telephone No.		License No.				
Jim Proctor			60	9-704	-8850	609-265-2107		00529				
Start Date (10)	Sche	duled C	omple	tion Da	ite (11)	Name of OSHA N	lonitor					
12 / 1 /	14/_	2 /	27	/_	15	EMSL Analyt	ical	**		*		
Occupancy Status During	Abatement (Che	sk only o	one)			Street Address						
☐ Facility Closed/Vacated				nent		200 Route 13	0 North					
☐ Abatement Performed (cribe	City, State, Zip Co						W(0-15)
Time of Abatement:	AMF	M/	PM-		AM	Cinnaminson						
Scope of Work (Check all f	that apply)											
□ . 0 . f 0 !f			0.000000000000000				tainment with Neg	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			novati molitic			☐ Mini-Enc	losure g Procedure					
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		Is	Locat	ion					Ab	atem	ent T	уре
Location o			Vorma			Description o			Z	Z	П	П
Asbestos-Containing M TO BE ABAT			d-Sole intena		Asbe	stos Containing Ma ., thermal systems	iterial (ACM)	Amount	em	Repair	nca	nclo
IN Facility		0.000	todial S		(1.6	surfacing, VAT,		(Specify SF or LF)	Remova	=	Encapsulate	Enclosure
(13)			(12)	I		other miscellane		53			late	Ф
		Yes	No	N/A	l l				-	_		<u> </u>
Control House	#00 00 0 00 00 00 00 00 00 00 00 00 00 0				Fire Do	ors	3. 3.1	6 each		Щ		
** * 34 W	A.C. (2)				593 32	48 28 6	(in 12	10 40 40				
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							1					
Name of Registered Waste	Hauler		1 (60%)	JDEP \		Cubic Yards of	Name of Regis					
Waste Management			H	auler II 1125) No.	Waste 10	G.R.O.W.S	. Landfill				
City, State				1120		Disposal Date	City, State					
Camden, NJ						2/27/15	Tullytown,	PA				
Completed By (Print or Typ	oe) Tit	P				Signature		Da	te I		1	_
Gwendolyn Trumbet		e Operati	one (inardi	inator	Oignature 7	MM		11:	20	115)
		perau	UII3 C	Joorul	inator		LEAD		1		,	
SB-41						0						

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

BECEIVED

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)	a suna 1		1000	1	
	15				E&G		1-4860 Check	#6994 2013 EB 10	PM	ĵ.	: ^	
Agencies Notified Type Noti	fication			Street	Address			4 **	京 計畫	6 6	7 63	
				400	0 Hadley	Road		ASRESTAS	PR PTS	1 T I		
□ DOLWD		c		City, S	tate, Zip C	ode		& LICE	DU:	126-11	WL	
	dment #1	_		Sou	th Plainf	field, NJ 07080		W LIVE!	TOH	A PA		
DCA Emerg	gency (in: cation)	ciuaing		Name	of Contact			Telephone Number	er	19	163	
Cance				And	rew Yas	sa		1				
7				FAC	CILITY IN	FORMATION					7	
Name of Facility Where Abatement	is Taking	Place	(3)				Type of Facility	(4)				
PSE&G Control House						2	☐ School (K-12					
Street Address							Subchapter (3 (Other than K-12) rivate and commerc	ial bu	ildina	0	
56 Nelson Avenue							homes, etc.)		iai bu	liuling	5,	
City (5)	100						Square Feet	# of Floors	Blo	dg. Ag	ge	
Paramus												
County (6)				Coun	ity Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ned)	-		_
Bergen				Coun	ity Code (r	MOTHIE GOT GIVE !)	Control Hou		, ,			
Name of Monitoring Firm Hired by B	uilding (Junor	(8) T	ASCM	No	Name of Abateme						
	dilding C	JVVIICI	(0)	ASCIVI	INO.	AbateTech, I						
Omega Environmental						Street Address	110.				111-053	
Street Address							DO Boy 25					
280 Huyler Street						30 Maple Ave				118050		1000
City, State, Zip Code						City, State, Zip Co						
South Hackensack, NJ 0760			-			Lumberton, I	NJ 08048					_
Project Manager for Monitoring Firm	1		1 2000	phone		Telephone No.		License No.				
Geiser Fajardo			_ 3756)1-489		609-265-2107	2	00529				
Start Date (10) 2 / 9 / 15				tion Da) /		Name of OSHA N EMSL Analyt						
Occupancy Status During Abatemen						Street Address					-	_
☐ Facility Closed/Vacated During E				ment		200 Route 13	0 North					
☐ Abatement Performed Outside o					cribe	City, State, Zip Co						
Time of Abatement:AM-						Cinnaminsor						
Scope of Work (Check all that apply	1)					- Gillianinoon	.,					
ocope of work (offect all that apply	,						tainment with Ne	gative Pressure				
☐ ≥3 sf or ≥3 lf			enovati			☐ Mini-End						
≥160 sf or ≥260 lf		⊠ De	emolitio	on		☐ Gloveba	g Procedure empted (*) and No	n-Friable Procedure	3			
		Is	Locat	ion	T	23 11011 2110	()=		T	atem	ent T	vpe
Location of			Norma	lly		Description of	of			_		T
Asbestos-Containing Material (A	CM)		ed Sole		Asbe	stos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Eliciosula
TO BE ABATED IN Facility			aintena todial		(i.e	e., thermal systems surfacing, VAT		(Specify SF or LF)	ova	=	psu	000
(13)			(12)			other miscellane		Or or Ery	5,000		ilate	α
		Yes	No	N/A			0. 11					
Control House Roof				\boxtimes	Roof FI	ashing		308 SF				
Control House Interior					Transit	e Floor Panels		· 80 LF			<u></u>	
Exterior					Transit	e Duct Conduit	_	900 LF	\boxtimes			E
			П	П					D			E
Name of Registered Waste Hauler		_	N	JDEP.	Waste -	-Cubic Yards of	Name of Regi	stered Landfill	1			1
ETGI			232	lauler II	D No.	Waste /	Conestog			1		
City, State				S710	7	Disposal Date	City, State			1		_
City, State						2/20/15	Morganto	wn PA				
Flondoro M.I						· CICINIA	I WOUGHILD	rvity t / \	- 2	F-12		
Flanders, NJ	The second								/	-	-	
Completed By (Print or Type)	Fitle				20 10	Signature		Dat		21	15	_
S STATE OF S			ions	Coord	inator		an	j Dai	9	3)	15	-

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

Date of Notification (1)						Name	of Buildin	0 Ow	mar/Operator /	2)	* * *	-2				
	4	1 _	15			A constant	E&G	ig Ow	ner/Operator (/ Job #150	2) 11-4861 2Check	# 10 PKC	PURT	ES\	Y		
Agencies Notified EPA	Type N		ation				Address 00 Hadle	v Ro			TAS CON					
□ DOLWD	⊠ Am						State, Zip		period .		LILENSIN		-			
⊠ DHSS		endme							, NJ 07080	A.A.	LIVEITER	2				
☐ DCA (NJAC 5:23-8)	☐ Em	ergeno tificatio		luding			of Contac		,		Telephone Nu	mher		3.0		
(10/10/3.25-0)	☐ Car					100000000000000000000000000000000000000	hael Luc				10.001.01.01.01.0	moon				
						1							1111		-	
Name of Facility Where A	hatama	nt io T	akina	Diago	(2)	rA	CILITYII	NFOR	RMATION	T f = _111b. /	45			_		
PSE&G Control Hou		111.15 1	akiriy	riace	(3)					Type of Facility (- ☐ School (K-12)						
Street Address	use						1	-		Subchapter 8		12)				
Front Street										Other (i.e., pri homes, etc.)	vate and comm	nercial I	ouilo	ding	S,	
City (5)										Square Feet	# of Floors	1	Bldg	. Ag	je	
Scotch Plains																
County (6)						Cou	nty Code (7)(STA	ATE USE ONLY)	Current Use (Prid	or if being demo	lished)				
Union										Control Hou	se					
Name of Monitoring Firm	Hired b	y Build	ling O	wner (8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
Health & Safety Ser	vices							1	AbateTech, I	nc.						
Street Address				-				Str	eet Address							_
PO Box 365								3	80 Maple Ave	e. PO Box 25						
City, State, Zip Code								Cit	y, State, Zip C	ode		-				
Berlin, NJ 08009									umberton, l							
Project Manager for Moni	toring F	irm		/	Tel	ephone	No.	_	lephone No.		License No.		_			
Jim Proctor			/		6	09-704	-8850) 6	09-265-2107	•	00529					
Start Date (10)		S	chedu	uled C	ompl	etion Da	ite (11)	Na	me of OSHA N	Monitor	1			7.755		
1 / 19 /	14		2	/	1	1_ /	15	E	EMSL Analyt	ical						
Occupancy Status During	Abaten	nent (C	Sheck	only c	ne)-	_		Str	eet Address				5111	-		
☐ Facility Closed/Vacate	d Durin	g Entir	e Peri	iod of	Abate	ement		2	200 Route 13	0 North						
☐ Abatement Performed								City	y, State, Zip Co	ode						-
Time of Abatement:	A	VI	PM	1/	_PN		AM	C	Sinnaminsor	n, NJ 08077						
Scope of Work (Check all	that ap	ply)							☐ Full Con	tainment with Neg	ative Pressure					
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf				Re					☐ Mini-End	losure						
≥160 sf or ≥260 lf				⊠ De	molit	ion			☐ Gloveba	g Procedure mpted (*) and Nor	-Friable Proced	dure				
				Is	Loca	ition			<u></u>	Inplote () and Ho	. , , , , , , , , , , , , , , , , , , ,		hat	eme	ent Ty	vne
Location	of				Norm:				Description of							
Asbestos-Containing I		(ACM)			lely by ance/	Asb	estos	Containing Ma	iterial (ACM)	Amount	1		Repair	nca	ncl
TO BE ABA IN Facilit						Staff?	(1.0		ermal systems surfacing, VAT		(Specify SF or LF)	Kemoval		=	Encapsulate	Enclosure
(13)	5		-		(12				her miscellane		,				late	.e
	*			Yes	No			West Sales			200000000000000000000000000000000000000					
Exterior of Control Ho	ouse				Ш		excava	ated	pipe		1,000 LF				Ш	Ш
100 (40 (4H 34H	80	*.*	40				500 549	849	9 (896) 800	497 (47 (4	796 81	• > [
] [
] [
Name of Registered Wast	e Haule	er			1	NJDEP	Waste	Cul	bic Yards of	Name of Regist	ered Landfill					
Waste Management					1	Hauler I 1125	D No.	Wa 4	iste	G.R.O.W.S.	Landfill					
City, State								1 0-2	posal Date	City, State						
Camden, NJ								2	/11/15	Tullytown,	PA					
Completed By (Print or Ty	rpe)		Title					-	Signature	COLLA		Date	1.	١	_	
Gwendolyn Trumbe	tti		Op	erati	ons	Coord	inator			V ANM		2	41	115)	
ASB 41										11 .			1_	1		

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

DECEIVED

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)	Luca Comment				
2 / 4 /	15			PS	E&G	/ Job #150	1-4861 Check		4 (. 1	, ->-		
Agencies Notified ☐ EPA ☐ Initial ☐ DOLWD ☐ Amende				400	Address O Hadley	154		ESTOS OS				
☐ DHSS Amendm	nent#2			1000	State, Zip C uth Plaint	Code Field, NJ 07080	14.00	E LIEEKS		/ h		
DCA Emerger justificat	ion)	Cluain	3		of Contac			Telephone Nu	mber	35		Ш
				FA	CILITY IN	FORMATION						
Name of Facility Where Abatement is	Taking	Place	(3)				Type of Facility	*****				
PSE&G Control House							☐ School (K-12		12)			
Street Address							Other (i.e., p	rivate and comm	nercial bu	ilding	s,	
Front Street					174		homes, etc.)		I DI		Nar V	
City (5)							Square Feet	# of Floors	BIG	dg. Ag	ge	
Scotch Plains County (6)				Cour	ty Code /7)(STATE USE ONLY)	Current Use (Pr	ior if heing demo	liched)			
Union				Cour	ity Code (/)(STATE USE UNLT)	Control Hou	·····	nisneu)			
Name of Monitoring Firm Hired by Bui	Idina C	wner	(8)	ASCM	No	Name of Abateme						
Health & Safety Services	iding c	ZWII CI	(0)	, 100IVI	140.	AbateTech, In						
Street Address						Street Address				- 11		-
PO Box 365						30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip Co						
Berlin, NJ 08009						Lumberton, N	J 08048					
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.				
Jim Proctor			60	9-704	-8850	609-265-2107		00529				
					te (11)	Name of OSHA N	Ionitor	<u> </u>				
1 / _20_ / _14_		2/1		/ .	15/	EMSL Analyt	ical					
Occupancy Status During Abatement Facility Closed/Vacated During Ent	. /	100		ment		Street Address 200 Route 13	0 North					
☐ Abatement Performed Outside of N	lormal	Facilit	y Hou	s - Des		City, State, Zip Co	ode					
Time of Abatement:AM	PN	Λ/	PM-		AM	Cinnaminson						
Scope of Work (Check all that apply)				7722	-		15					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovati emolitio			☐ Mini-Enc ☐ Gloveba	tainment with Neo losure g Procedure mpted (*) and No		dure			
		100	Locat						Ab	atem	ent T	уре
Location of Asbestos-Containing Material (ACI TO BE ABATED IN Facility (13)	VI)	Use Ma	Norma ed Sole aintena todial (12)	ely by ince/		Description of stos Containing Ma a., thermal systems surfacing, VAT, other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								
Exterior of Control House					Stucco			1,000 SF				
Floor of Control House	***				Floor P	anels		· 60 SF·				
Control House Roof					Roofing	g Materials		300 SF				
Control House Door					Fire Do	or		1 total	. 🛛			
Name of Registered Waste Hauler				JDEP		Cubic Yards of	Name of Regis					
Waste Management				lauler II 1125	J NO.	Waste 12	G.R.O.W.S	. Landfill			-	
City, State			100			Disposal Date	City, State					
Camden, NJ						2/11/15	Tullytown,	PA				
Completed By (Print or Type)	Title					Signature.	1		Date	, , 1	1.0	
Gwendolyn Trumbetti	0	perat	ions	Coord	inator	4	mt		2)	4/	15	
ASB-41 MAY 11	* 1	Do no	t use th	nis form	for asbesi	tos licensure exemp	nted activities.					

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

Courtesy.

				(1	uisua	III LO NO.	AC 0.00 and 5.1	ره ان	FOFINE	Partie			
Date of Notification (1)							ng Owner/Operator ((2)					
	5 /	15			PS	E&G De	livery, Projects &	Construction	/ Job #1411-48	341 C	hecl	(#	
Agencies Notified	Type Notifica	ation	- 5		Stree	t Address		Zaria II	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	te K	7.5		
⊠ EPA					80	Park Pla	ıza	A C COL	TO TWO COS	TDE) i		
☑ DOLWD ☑ DHSS	Amended Amendme				City,	State, Zip	Code		STOS CON				
□ DCA	☐ Emergen			7	Ne	wark, N.	07101	٥	LICENSIN	W.			
(NJAC 5:23-8)	justification		oldali	3	Name	e of Conta	ct		Telephone Num	ber		1	
	☐ Cancellat	ion	727		La	rry Eddir	nger	* 12 D	*				
th the			Ж		FA	CILITY	NFORMATION		*				
Name of Facility Where A	Abatement is T	aking	Place	(3)				Type of Facility (4)		W-755		
PSE&G Plainfield S	ubstation							School (K-12)					
Street Address								☐ Subchapter 8 ☐ Other (i.e., pri			uildin	70	
241 W. 2 nd Street								homes, etc.)	vate and comme	Clai Di	unun	30,	
City (5)								Square Feet	# of Floors	В	ldg. A	ge	
Plainfield													
County (6)	.21				Cou	nty Code ((7)(STATE USE ONLY)	Current Use (Price	or if being demolis	shed)			
Union								Utility					
Name of Monitoring Firm	Hired by Build	ding O	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)			1,000		
Health & Safety Ser	vices						AbateTech, I	nc.					
Street Address							Street Address						
318 12 th Street							30 Maple Ave	e. PO Box 25					
City, State, Zip Code				5-15-17-1			City, State, Zip Co	ode					
Hammonton, NJ 08							Lumberton, N	NJ 08048					
Project Manager for Moni	toring Firm			Tel	ephone	No.	Telephone No.		License No.				
Jim Proctor				1	09-704	A Marianta Carrier	609-265-2107		00529				
Start Date (10)				10.5	etion Da	100	Name of OSHA M	Ionitor	e.				
//					3_/	15_	EMSL Analyti	ical					
Occupancy Status During					(40		Street Address						
☐ Facility Closed/Vacate							200 Route 13	0 North					
Abatement Performed Time of Abatement:							City, State, Zip Co				411		
C							Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)						□ Eull Cont	ainment with Nega	stive Pressure				
≥3·sf or ≥3 If			☐ Re	novat	ion		☐ Mini-Encl	losure	tilve Pressure				
≥160 sf or ≥260 lf			☑ De	moliti	on		Glovebag	Procedure	Eid D				
			I.o.	Loca	tion	T-	⊠ Non-Exer	mpted (*) and Non	-Friable Procedul				
Location	of			lorma			Description of	f			atem		1
Asbestos-Containing N	Naterial (ACM))			ely by	Asbe	estos Containing Mat	terial (ACM)	Amount	Remova	Repair	Enc	Enclosure
TO BE ABA					ance/ Staff?	· (i.e	e., thermal systems i surfacing, VAT,		(Specify	VOL	a:	aps	lost
(13)	,	_		(12)			other miscellaned		SF or LF)	100		Encapsulate	re
			Yes	No	N/A		***************************************					(D	
Exterior					\boxtimes	excava	ted transite cond	luit	500 LF				
t its its its	44. 44			П	1		2 40 20 33	21 22 4			П		П
				_	+ = -								
			ш	Ш						1	Ш	Ц	Ш
Name of Registered Waste				11/1/20	IJDEP V		Cubic Yards of	Name of Registe	red Landfill				
Waste Management					lauler II 1125	J NO.	Waste 4	G.R.O.W.S.	Landfill				
City, State							Disposal Date	City, State					
Camden, NJ							2/13/15	Tullytown, F	PA				
Completed By (Print or Ty	oe)	Title				- 	Signature	4	Da	te	9	í	
Gwendolyn Trumbet	ti	Ор	erati	ons	Coordi	nator	1 m	115		3	15	115	,
ASB-41							- UAI	W V			1 /		

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

Date of Notification (1)				Nam	e of Buildin	g Owner/Operator (2)		ŧ.		
	1	5		Tr	ustees of	Princeton	/ Job #13	304-4626 Chec	k #6959		
Agencies Notified Type Notifi ☐ EPA ☐ Initial ☐ DOLWD ☐ Amend				Tr	et Address ustees of	Princeton Unive	1000				
☑ DHSS Amenda	ment #	7.7		City,	State, Zip (inceton, N	Code	to be part that the	LICENSING	4 4 141 104		
□ DCA □ Emerge □ justifica □ Cancell	tion).			Nam	e of Contac	t	V 10 170	Telephone Num	ber		•
						IFORMATION					
Name of Facility Where Abatement is	Takir	a Plac	e (3)	17	CILITIIN	TORMATION	Type of Facility	(4)			
20 Washington Road		5	()				School (K-12				
Street Address								3 (Other than K-12			
20 Washington Road, Princet	on U	nivers	sity M	ain Ca	mpus		homes, etc.)	rivate and comme	rciai build	ngs,	
City (5)							Square Feet	# of Floors	Bldg.	Age	
Princeton							1,000,000	5	85		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being demolis	shed)		
Mercer							University	a vario alevo come montro en 🗕 la saladora, que el abella	11		
Name of Monitoring Firm Hired by Bu	ilding	Owner	(8)	ASCN	l No.	Name of Abateme	ent Contractor (9)				
ATC Associates				000	98	AbateTech, In	nc.				
Street Address						Street Address			-21		
3 Terri Lane						30 Maple Ave	. PO Box 25				
City, State, Zip Code						City, State, Zip Co	ode				
Burlington, NJ 08016						Lumberton, N					
Project Manager for Monitoring Firm			Tele	ephone	No.	Telephone No.		License No.			
Michael R. Keehn			6	09-386	6-8800	609-265-2107		00529			
Start Date (10)1 / _27 / _15				etion Da	ate (11)	Name of OSHA M EMSL Analyti					
Occupancy Status During Abatement						Street Address					
☐ Facility Closed/Vacated During Eni				ment		200 Route 13	0 North				
☐ Abatement Performed Outside of N	lorma	l Facili	ty Hou	rs - Des	scribe	City, State, Zip Co					
Time of Abatement:AM	P	M/	PM		_AM	Cinnaminson					
Scope of Work (Check all that apply)				100000			,				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovat emolitio			☐ Mini-Encl	Procedure	ative Pressure	re		
		15	s Loca	tion					Abate	ment 7	Type
Location of			Norma			Description of		24 90		T	T
Asbestos-Containing Material (ACI TO BE ABATED	VI)	Ma	aintena	ince/		stos Containing Mat , thermal systems i		Amount (Specify	Removal		
IN Facility		Cus	todial (12)	Staff?		surfacing, VAT,	or	SF or LF)	val	Encapsulate	Enclosure
(13)		Yes	No	N/A	1	other miscellaned	ous)			ate	
1964 Portion		П			Wall Ma	stic		335 SF			1
				H	TVAII WA	310		300 01	-		
			-		<u> </u>			ACC COMM CANCEL			
		Ш									
Name of Registered Waste Hauler AbateTech, Inc.			05200	JDEP I	O No.	Cubic Yards of Waste	Name of Regist				
City, State				18750)	12 Disposal Date	City, State				
Lumberton, NJ						3/31/15	Tullytown,	PA			
Completed By (Print or Type)	Title	1				Signature	A -		ta.		
Gwendolyn Trumbetti	25/15/2019		ions (Coord	ina <mark>t</mark> or	Signature	ms	Dai		5	
ASB-41 MAY 11	*	Do not	use th	is form	for ashesto	os licensure exempt	ed activities				

CK 009392

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

Date of Notification (1)					Building (Owner/C	Operator	(2)							
2/3/15				HMS F	Host				2	MEF	ERIC	i no	: 3		
Agencies Notified	Type Notification	0	1.00	Street Ad 3905 F	ddress Rockledg	ge Driv	/e		<u> </u>	*	ti w	h ± f	9.6	14	
DEP DOL	Initial Amended Amendment #	± 1			te, Zip Co sda, MD		7			200	Light Light	(Data) (Cala)	J.P	OL.	
□ DOH	Emergency (in justification)		1	Name of	Contact					Tele	phone N	lumber	t3		ī
DCA DCA	Cancellation			-5-15-10-10-10-10-10-10-10-10-10-10-10-10-10-	Copping	* (0.00)				1					
Name of Facility Where	Ahatement is Taking	Place (3)		FACI	LITY INFO	PRMATI	ON	Type	of Facility (4)						
Grover Cleveland S		1 1000 (0)													
Street Address	- N - 4b b d							S	chool (K-12) ubchapter 8 other (i.e. pri	(Othe			Idina	: hom	99
New Jersey Turnpil	ke Northbound		,					e	tc.)		11122		077		cs,
City (5) Woodbridge								Square 15,0		# of	Floors 1		Bldg. 3(
County (6) Middlesex					Code (7) JSE ONLY)	_			nt Use (Prior ce Plaza	if bein	g demol	lished)			
Name of Monitoring Firm EHS Environmenta		wner (8)		ASCN	No.				ement Contr			es Inc	5		
Street Address	N1.5-5						15.43000000	Address	The state of the s		- 01 1100	, 1110			
411 Southgate Cou	rt, Suite E						152	Route	206 South	h					
City, State, Zip Code Mickleton, NJ 0805								State, Zip boroug	code jh, NJ 088	344		4.077			
Project Manager for Mor Jack F. Carney	nitoring Firm	Es	- 1	elephor 356-22	ne No. 24-0080		100	none No 218-08			License 01228				
Start Date (10) 2/9/15		Scheduled 2/19/15	Com	pletion (Date (11)		100000000000000000000000000000000000000		A Monitor Environme	ntal S	Service	es, Inc			
Occupancy Status Durin	g Abatement (Check	Only One)					Street	Address	S						
Facility Closed/Vac	ated During Entire P	eriod of Ab	atem	ent			152	Route	206 South	n					
Abatement Perform Other – Describe:	ed Outside of Norma	al Facility H	ours				100000000000000000000000000000000000000	State, Zip							
						_	Hills	boroug	gh, NJ 088	344					
Scope of Work (Check A	II I hat Apply)						-	7							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat moliti	No. of Contract of				Mini	Containmer -Enclosure		Negativ	e Press	ure		
							×		vebag Proce -Exempted		Non-Fr	iable Pr	oced	ıre	
	8 7	ls Lo	ocatio	n										temen	t
Location	n of	No	rmall	y		De	scription	n of						уре	
Asbestos-Containing TO BE AB		Used Maint						Material (nount	m		g	m
In Faci		Custoo	dial S (12)	taff?	(1.6.		cing, VA	s insulat AT, or	dort,		pecify or LF)	Remova	Repair	cap	nclo
(13)			12)			other r	miscellar	neous)				oval	air	Encapsulate	Enclosure
		Yes	No	N/A										9	
Please see lis	t attached			×						2,2	82 SF	X			
Please see lis	t attached			Х						62	2 LF	X			
													-	-	
Name of Registered Was	ste Hauler		N	JDEP W	laste	Cubic	Yards		Name of R	enister	ed Land	Ifill	1_	1_	
Yannuzzi Group, Ind			Ha	auler ID 467		of Wa			IESI	cylatei	eu Lanc	41111			
City, State Hillsborough; NJ			1				sal Date 3/15		City, State Bethlehe	m, P.	A			_	
Completed by		Title		-		5	Signature	e	Λ.	2000		Date			
Anna Bastos		Admini	stra	tive As	sistant		Uns		Bant	92)		2/3/15			

CK 005824

State of NJ Notification of Asbestos Abatement

RECEIVED D&S Proj. #: 2015-44 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 0 2 / 0 4 / 1 5 GERARD TOURGEE Agencies Notified Type Notification Street Address ☐ EPA Initial 2 BRADLEY ROAD Amended DEP Amendment #: City, State, Zip Code DOL MORRISTOWN, NJ 07960 (including DOH Name of Contact Telephone Number justification) DCA GERARD TOURGEE Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) GERARD TOURGEE Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 2 BRADLEY ROAD Square Feet # of Floors Bldg. Age County (6) County Code (7) (State use only) Current Use (Prior if being demolished) MORRISTOWN **MORRIS** Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Start Date (10) Name of OSHA Monitor Sched. Completion Date (11) D & S Restoration, Inc. 02/27/15 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure >3 sf or >3 If Renovation Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of E by maintenance/custodial E asbestos-containing е е n Amount Description of asbestos-containing staff(12) n material (acm) to be m p (Specify SF or C material (ACM) 0 C abated in facility (13) a a Yes N/A No BASEMENT BOILER RM duct work (wrap & cut) 60 LFT X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 2 yds. City, State Disposal Date City, State PATERSON, NJ 07503 02/11/15 TULLYTOWN, PA Completed by (Print or Type) Title Signature Date BOGDAN JOLDZIC PRESIDENT 02/04/15

Do not use this form for asbestos licensure exempted activities.

ASR-41

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

RECEIVED

Date of Notification (1)
Agencies Notined Secondary Secondary
SEPA
DHSS
DCA (NJAC 5:23-8)
DCA (NJAC 5:23-8) Emergency (including justification) Name of Contact Nichol Reinhold Nichol Reinhold Name of Contact Nichol Reinhold Name of Facility Where Abatement is Taking Place (3) DuPont Parlin Facility - Bldg. 425 Street Address School (K-12) Subschapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age
Cancellation Nichol Reinhold Type of Facility Where Abatement is Taking Place (3) DuPont Parlin Facility - Bldg. 425 Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age
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3 / 2 / 15 3 / 18 / 15 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address
Occupancy Status During Abatement (Check only one) Street Address
occupancy classes burning reactions (or least only
☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code
Time of Abatement: 7:00AMPM/3:30PMAM BRISTOL, PA 19007
Scope of Work (Check all that apply)
☐ Scope of Work (Check all that apply)
□ ≥3 sf or ≥3 lf □ Mini-Enclosure
□ ≥160 sf or ≥260 lf □ Demolition □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure
Is Location Abatement
Location of Normally Description of Description of
Location of Normally Description of Asbestos-Containing Material (ACM) TO BE ABATED Normally Description of Asbestos Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify 2)
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Location of Used Solely by Maintenance/ Custodial Staff? (12) Description of Asbestos Containing Material (ACM) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
(12) other miscellaneous)
(13) other miscellaneous)
Yes No N/A
Yes No N/A
Yes No N/A Building 325 Various Areas □ □ Pipe Insulation 400 LF □
Yes No N/A Building 325 Various Areas □ □ Pipe Insulation 400 LF □ □
Yes No N/A
Yes No N/A
Yes No N/A
Yes No N/A
Yes No N/A

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