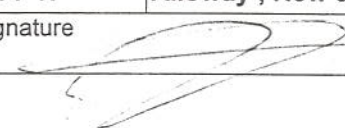


State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

CHECK # 18337

Date of Notification (1) 2-22-16		Name of Building Owner / Operator (2) Environmental Liability Transfer		FEB 24 2016				
Agencies Notified <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA		Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Emergency <input type="checkbox"/> Cancellation		Street Address 1650 Des Peres Road, Suite 306 City, State & Zip Code St. Louis, Missouri 63131 Name of Contact Adam Peetz				
				Telephone Number				
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Former Congoleum Facility			Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)					
Street Address 861 Sloan Avenue			Square Feet 700,000		# of Floors 1			
City (5) Hamilton	County (6) Mercer	County Code (7)	Bldg. Age 90					
			Current Use (Prior if being demolished) None					
Name of Monitoring Firm Hired by Building Owner (8)			Name of Abatement Contractor (9) Enterprise Network Resolutions Contracting, LLC					
Street Address			Street Address 874 Piney Hollow Road, PO Box 70					
City, State & Zip Code			City, State & Zip Code Winslow, New Jersey 08095					
Project Manager for Monitoring Firm		Telephone Number	Telephone Number 609-567-0600		License Number 01263			
Scheduled Start Date (10) 3-3-16		Scheduled Completion Date (11) 1-31-17		Name of OSHA Monitor EMSL Analytical				
Occupancy Status During Abatement (Check only one) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: <input type="checkbox"/> Facility Occupied During Abatement			Street Address 107 Haddon Ave.					
			City, State & Zip Code Westmont, NJ 08108					
Scope of Work (Check all that apply)								
<input type="checkbox"/> ≥3 sf or ≥3 lf <input checked="" type="checkbox"/> ≥160 sf ≥260 lf		<input type="checkbox"/> Renovation <input checked="" type="checkbox"/> Demolition		<input checked="" type="checkbox"/> Full Containment with Negative Pressure <input checked="" type="checkbox"/> Mini-Enclosure <input checked="" type="checkbox"/> Glove Bag Procedures <input checked="" type="checkbox"/> Non-Exempted and Non-Friable Procedure				
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)		Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No			N/A	Removal	Repair	Encapsulate
See Attached Work Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	See Attached Work Areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of Registered Waste Hauler Bull Waste & Recycling, LLC			NJDEP Waste Hauler ID No. 21435	Cubic Yards of Waste 2000	Name of Registered Landfill Salem County Landfill			
City, State Berlin, New Jersey			Disposal Date 1-31-17	City, State Alloway, New Jersey				
Completed By (Print or Type) Theodore S. Budzynski			Title President	Signature 		Date 2-22-16		

	Component	Condition	Quantity	Units	Notes
1A-D	Sheetgood (multi)	SD	60	rolls	As remnant and old stock 1C
	Mag pipe Insulation (white)	SD	570	LF	Pipe chases throughout 1A-D
	Corrugated pipe insulation (gray)	SD	620	LF	Pipe chases throughout 1A-D
	Window Glaze (white)	SD	120	units	Throughout all windows in 1A-D
	Cementitious Panel (brown)	D	100	SF	Associated with Electrical mounts and switchgears
	Electric wire insulation (Small) (brown)	SD	1800	LF	Associated with small gauge, fiber wrapped electrical wires throughout 1

FEB 24 2000

	Component	Condition	Quantity	Units	Notes
2A-E & 3	Sheetgood (multi)	D	7500	SF	Throughout 3
	Mastic Associated with sheetgood (yellow/brown)	D	7500	SF	Throughout 3
	Base cove molding (brown)	D	1200	LF	Throughout 3
	Mag pipe insulation (white)	SD	20	LF	2D and 2E
	Cementitious Panel (brown)	D	36	SF	Associated with Electrical mounts and switchgears

FEB 24

	Component	Condition	Quantity	Units	Notes
5 & 6	Window Glaze (white)	SD	25	units	Throughout all windows in 5 & 6

FEB 24 1964

	Component	Condition	Quantity	Units	Notes
10	Window caulk (gray)	D	3	units	10 pump house windows

FEB 24 2016

	Component	Condition	Quantity	Units	Notes
11	Window Glaze (white)	SD	100	units	Throughout all windows in 11

FEB 24 1961

	Component	Condition	Quantity	Units	Notes
12 & 12A	Window Glaze (white)	SD	15	units	Throughout all windows in 12

	Component	Condition	Quantity	Units	Notes
13	Window glaze (white)	SD	12	units	Associated with metal framed windows

FEB 24 1963

	Component	Condition	Quantity	Units	Notes
14	Corrugated pipe insulation (white/gray)	SD	325	LF	Associated with pipe in 14
	Transite panels (gray)	D	250	SF	Associated with large boiler area
	Mag pipe insulation (white)	SD	1300	LF	Associated with pipe in 14
	Exterior boiler slopcoat (black)	SD	7200	SF	Associated with boiler exteriors
	Boiler duct/vessel/breeching block insulation slopcoat (tan/white)	SD	15000	SF	Associated with boiler ducts/vessels
	Boiler duct/vessel/breeching block insulation (brown)	SD	15000	SF	Associated with boiler ducts/vessels
	12"x12" floor tile (white)	SD	200	SF	Locker room
	Exterior/interior boiler packing (white)	SD	7200	SF	Packing around boiler viewports, seams and interior fire tubes
	Boiler rope gasket (white)	SD	10000	LF	Boiler seams and viewports
	Exhaust stack insulation (white)	SD	500	SF	Insulation around boiler exhaust stack
	Vessel tarcoat/insulation (brown)	SD	1000	SF	Around pitch vessel
	Window glaze (white)	SD	150	units	Associated with all metal framed windows
	Corrugated fire door insulation (white)	G	2	doors	Insulation associated with corrugated fire doors
	Flange Gaskets (gray)	D	800	units	Throughout, associated with pipe flanges in 14 & 14A

	Electric wire insulation (Small) (brown)	SD	2000	LF	Associated with small gauge, fiber wrapped electrical wires throughout 14
	Cementitious Panel (brown)	D	108	SF	Associated with Electrical mounts and switchgears (3)

FEB 24 1988

	Component	Condition	Quantity	Units	Notes
15 & 16	Electrical box packing material (white)	D	1	SF	Packing in electrical box in fire pump house in 15
	Window glaze (white)	SD	15	units	Associated with metal framed windows
	Cementitious siding panels (gray)	G	8800	SF	Throughout exterior of 15
	Cementitious Panel (brown)	D	72	SF	Associated with electrical mounts and switchgears (2)

FEB 24 2000

	Component	Condition	Quantity	Units	Notes
17	Base cove mastic (gray)	G	115	LF	Throughout cafeteria
	Window glaze (beige)	D	14	units	2 nd floor windows
	Base cove molding (brown)	D	800	LF	Throughout 3 rd floor

FEB 24 1966

	Component	Condition	Quantity	Units	Notes
	Window Glaze (white)	SD	495	units	Throughout all windows in 19A-H
	Rope gasket (white)	G	2	units	Oven UV room ovens and 19H
	Flat rope gasket (white)	G	2	units	Oven UV room ovens and 19H
	Batt insulation (white)	G	2	units	Oven UV room ovens and 19H
	Sheetgood (tan/brown checker pattern)	G	300	SF	19 Trenton training room, 2 nd floor
	Sheetgood mastic (yellow)	G	300	SF	19 Trenton training room, 2 nd floor
	Sheetgood remnant (multi)	SD	1500 & 1250	SF & CY	Est. 1,500 SF as remnant throughout and Est. 1,250 CY as samples and old stock in basement of 19F
	Cork duct insulation (brown)	SD	28500	SF	As duct insulation on 1 st floor of 19F
	Cork insulation slopcoat (gray)	SD	28500	SF	As slopcoat over cork duct insulation
	Mag pipe Insulation (white)	SD	6750	LF	Pipe chases and ceilings throughout 19F & H
	Window glaze (white)	D	40	units	Window units in 19J shop area
	Corrugated fire door insulation (white)	G	2	units	19E
	Corrugated pipe insulation (gray)	D	300	LF	19F
	Sheetgood (red brick pattern)	G	300	SF	19E maintenance office as top layer
	Cementitious siding panels (gray)	G	160	SF	On roof level of 19G as siding

	Component	Condition	Quantity	Units	Notes
20	Sheetgood (red brick pattern)	G	300	SF	20B central office
	Corrugated fire door insulation (white)	G	1	units	All corrugated doors throughout
	Mag pipe Insulation (white)	SD	80	LF	West wall ceiling of 20B

FEB 24

	Component	Condition	Quantity	Units	Notes
21	Gasket (beige)	G	25	LF	Boiler #2 head gasket
	Base cove mastic (white/gray)	G	300	LF	21D locker room
	Corrugated fire door insulation (white)	G	4	large doors	All corrugated doors throughout
	Mag pipe Insulation (white)	SD	20	LF	21C storage area, metal encased and associated elbows
	Rope gasket (white)	G	1	units	Small oven in 21D
	Flat rope gasket (white)	G	1	units	Small oven in 21D
	Batt insulateion (white)	G	1	units	Small oven in 21D
	Window Glaze (white)	SD	100	units	Throughout all windows in 21

FEB 24 2003

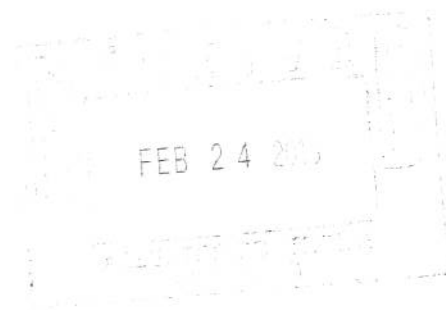
	Component	Condition	Quantity	Units	Notes
22	Silvercoat (silver)	G	1100	SF	Painted on holding tank
	Window glaze (white)	SD	52	units	Associated with all metal framed windows
	Corrugated fire door insulation (white)	G	1	large doors	All corrugated doors throughout
	Cementitious siding panels (gray)	G	2000	SF	Roof area as siding

FEB 24 2006

	Component	Condition	Quantity	Units	Notes
24	Corrugated fire door insulation (white)	G	4	units	24
	Sheetgood (yellow fancy pattern)	D	168	SF	Front of maintenance office
	Sheetgood backing (white)	D	168	SF	Associated with sheetgood in front of maintenance office
	Sheetgood (brown fancy pattern)	D	360	SF	Rear of maintenance office
	Sheetgood backing (white)	D	360	SF	Associated with sheetgood in rear of maintenance office

FEB 12-94

	Component	Condition	Quantity	Units	Notes
23 & 25	Window glaze (white)	SD	60	units	Throughout all window units, SA HA04
	Corrugated fire door insulation (white)	G	14	units	Exterior doors at roof level



	Component	Condition	Quantity	Units	Notes
26A Rooftop Air Handler Area	Block insulation (white)	SD	11500	SF	Exterior of air handlers and debris on floor of 2 nd floor air handler area
	Slopcoat associated with block insulation (gray)	SD	11500	SF	Exterior of air handlers and debris on floor of 2 nd floor air handler area
	Rope gasket (white - flat)	SD	300	LF	Seams and mounts of air handlers in 2 nd floor air handler area
	Corrugated pipe insulation (white)	SD	350	LF	Pipe-covering and debris in 2 nd floor air handler area
	Window glaze (white)	SD	60	units	Associated with metal framed windows in 2 nd floor air handler area
26B	Cementitious panels (gray)	D	525	SF	Associated with 2 nd floor office (loft) perimeter walls in 26B
26E	Sheetgood (remnant gray/beige stone pattern)	SD	70	SF	Located in 26E as remnant on floor
	Sheetgood mastic (black)	SD	70	SF	Located in 26E as remnant on floor, associated with sheetgood
26 (Throughout)	Corrugated fire door insulation	G	60 & 30	small doors & large doors	All corrugated doors throughout (small & large)
	Window glaze (beige)	D	180	units	All original metal framed windows on 1 st floor

FEB 24 2003

	Component	Condition	Quantity	Units	Notes
27	Corrugated fire door insulation (white)	G	20 & 14	small doors & large doors	Throughout 27
	Window glaze (white)	SD	44	units	27, throughout



	Component	Condition	Quantity	Units	Notes
28A	Window glaze (white)	D	76	units	Throughout 28A
	Corrugated fire door insulation (white)	G	4	units	28A corrugated fire doors
28C Examining Area	Window glaze (white)	SD	180	units	Throughout 28C
	Corrugated fire door insulation (white)	G	8	units	Examining area
28D	Sheetgood backing (white)	G	168	SF	Roof access area
	Cementitious Lab Hood Material (gray)	G	640	SF	Throughout laboratory fume hoods
	Rope gasket (white)	G	4	units	Oven room ovens
	Flat rope gasket (white)	G	4	units	Oven room ovens
	Batt insulation (white)	G	4	units	Oven room ovens
	Cementitious siding panels (gray)	G	100	SF	On roof at north side transition to next roof level

FEB 24 1983

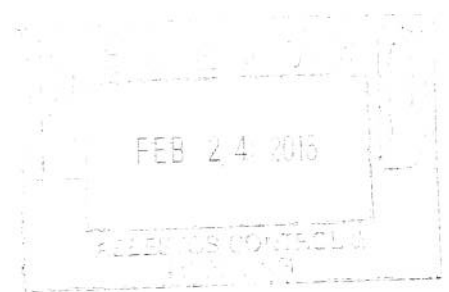
	Component	Condition	Quantity	Units	Notes
29	Window glaze (white)	SD	205	units	Throughout 29A-D window units
	Pipe elbow jacket (white)	D	15	units	29A-C
	Corrugated fire door insulation (white)	G	2 & 1	large doors & small doors	29C, SA HA210
	Duct cloth (white)	SD	100	SF	Associated with former oven line exhaust ducts
	Oven line rope gasket (beige)	D	1800	LF	Associated with dismantled oven line

FEB 24 1982

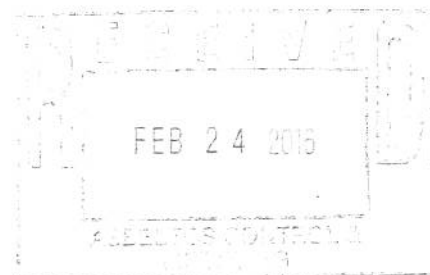
	Component	Condition	Quantity	Units	Notes
30	Window glaze (white)	SD	10	units	Throughout 30 metal framed windows

FEB 24 2013
 [Faint, illegible text and markings]

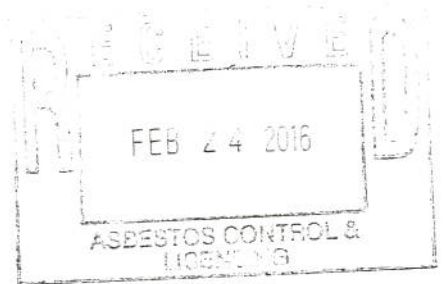
	Component	Condition	Quantity	Units	Notes
32	Corrugated fire door insulation (white)	G	1	units	Shop storage area 32



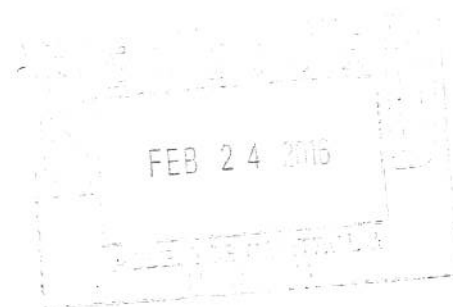
	Component	Condition	Quantity	Units	Notes
33	Corrugated fire door insulation (white)	G	3	units	33B
	Cementitious Lab Hood Material (gray)	G	260	SF	Throughout laboratory fume hoods
	Window glaze (white)	D	37	units	Shop Area 33
	Rope gasket (white)	G	5	units	Oven room ovens
	Flat rope gasket (white)	G	5	units	Oven room ovens
	Batt insulateion (white)	G	5	units	Oven room ovens



	Component	Condition	Quantity	Units	Notes
37	9"x9" floor tile (gray)	D	250	SF	37, 2 nd floor server room
	Mastic (black)	D	250	SF	37, 2 nd floor server room, associated with 9"x9" floor tile



	Component	Condition	Quantity	Units	Notes
38A	Sheetgood (red brick pattern)	G	1500	SF	38A office area, bottom floor
	Mastic (cream)	G	1500	SF	38A office area, bottom floor
	Sheetgood backing (white)	G	252	SF	38A storage area, bottom layer
	Window glaze (white)	D	20	units	Throughout metal framed windows



Area/Floor/Room	Component	Condition	Quantity	Units	Notes
1A-D	Roofing membrane felt (gray)	SD	22700	SF	Throughout 1A-D roof
	Asphalt built up roofing (black)	SD	22700	SF	Throughout 1A-D roof
2 & 3	Asphalt built up roofing (black)	SD	15900	SF	Throughout roof of 2A, B, D & E & 3
	Roofing felt (black)	SD	15900	SF	Throughout roof of 2A, B, D & E & 3
	Roofing flashing (black)	SD	1200	SF	2A-E & 3 perimeter and penetrations
10	Roofing felt (black)	G	50	SF	Roofing over 10 pump house
	Asphalt built up roofing (black)	G	50	SF	Built up roofing over 10 pump house
11	Roof flashing (black)	D	1500	SF	11 roof perimeter and penetrations
	Roofing felt (black)	SD	25800	SF	11 roof
	Original asphalt roofing (black)	SD	25800	SF	Over roofing felt
12	Asphalt built up roofing (black)	SD	1600	SF	Throughout roof of 12/12A
	Roofing felt (black)	SD	1600	SF	Throughout roof of 12/12A
	Roofing flashing (black)	SD	400	SF	12/12A roof perimeter and penetrations
15 & 16	Asphalt built up roofing (black)	SD	11000	SF	Throughout roof of 15 & 16
42	Asphalt built up roofing (black)	D	800	SF	Throughout roof of 42
	Roofing felt (black)	D	800	SF	Throughout roof of 42

FEB 24 2015

	Component	Condition	Quantity	Units	Notes
42	Sheetgood (multi)	D	800	SF	Throughout 42
	Mastic associated with sheetgood (yellow)	D	800	SF	Throughout 42
	9"x9" floor tile (beige)	D	800	SF	Underneath sheetgood and associated mastic
	Window glaze (white)	SD	20	units	Associated with metal framed windows

FEB 24 1992

	Component	Condition	Quantity	Units	Notes
44	Sheetgood (white brick pattern)	G	170	SF	44 office
	Sheetgood mastic (yellow)	G	170	SF	44 office
	Sheetgood (brown)	G	570	SF	44 conference room, bottom layer
	Sheetgood (red brick pattern)	G	1800	SF	44 office area hallway, bottom layer
	Mag pipe insulation (white)	D	500	LF	Pipe covering above drop ceiling in 44A
	Window glaze (white)	SD	30	units	Associated with metal framed windows
	Sheetgood (beige)	G	210	SF	Women's room associated with 44 offices, 2 nd layer

FEB 24

	Component	Condition	Quantity	Units	Notes
Miscellaneous Materials Throughout	Gasket material (gray)	G/D	1200	units	Throughout, associated with steam and water lines
	Gasket material (black)	G/D	1800	units	Throughout, associated with steam and water lines
	Gasket material (beige/white)	G/D	1500	units	Throughout, associated with repair gaskets
	Wiring insulation (white/gray/black)	G/D	14800	LF	Throughout, associated with all original fiber wrapped wiring

FEB 24 1975

48	Roofing flashing (black)	D	120	SF	42 perimeter and penetrations
	Asphalt rolled roofing (black)	D	2000	SF	Throughout roof over 48
	Roof flashing (black)	D	350	SF	48 perimeter and roll transitions
Roof Type 2	Asphalt built-up roofing (black)	G	3825	SF	Underneath roof type 2 asphalt rolled roofing, 26-C and 38-A
	Fiberboard insulation (brown)	D	3825	SF	Underneath roof type 2 asphalt built-up roofing, 26-C and 38-A
Roof Type 4	Flashing/pitch (black)	G	2800	SF	Roof type 4 kneewall and penetrations
Roof Type 5	Asphalt built-up roofing (black)	G	5500	SF	Associated with roof type 5, top layer
	Flashing/pitch (black)	G	1000	SF	Associated with roof type 5 kneewalls
Roof Type 7	Asphalt rolled roofing (black)	G	29000	SF	Associated with roof type 7, top layer
	Flashing/pitch (black)	G	3900	SF	Associated with roof type 7 kneewall and penetrations
Roof Type 8	Flashing/pitch (black)	G	300	SF	Associated with roof type 8 kneewalls and penetrations
Roof Type 9	Silvercoat (silver)	G/D	44900	SF	As brushcoat over roof type 9 asphalt rolled roofing
	Roofing felt (black)	G/D	44900	SF	Underneath roof type 9 roofing insulation
	Flashing/pitch (black)	G/D	6500	SF	Associated with roof type 9 kneewalls and penetrations

FEB 21

Roof Type 10	Silvercoat (silver)	G/D	6500	SF	As brushcoat on roof type 9 flashing/pitch
	Asphalt built-up roofing (black)	G	72000	SF	Underneath roof type 10 asphalt rolled roofing
	Flashing/pitch (black)	G	5000	SF	Associated with roof type 10 kneewalls and penetrations
Roof Type 11	Flashing/pitch	G	6200	SF	Associated with roof type 11 kneewalls and penetrations
Roof Type 12	Asphalt built-up roofing (black)	G	40000	SF	Underneath roof type 12 felt backing
	Silvercoat (silver)	G	40000	SF	As brushcoat on roof type 12 asphalt built-up roofing
Roof Type 13	Asphalt built-up roofing (black)	G	21250	SF	Underneath roof type 13 roofing felt
	Flashing/pitch (black)	G	3000	SF	Associated with roof type 13 kneewalls and penetrations
Roof Type 15	Asphalt built-up roofing (black)	D	38400	SF	Underneath roof type 15 silvercoat
	Flashing/pitch (black)	D	5000	SF	Associated with roof type 15 kneewalls and penetrations
Roof Type 17	Asphalt rolled roofing (black)	SD	16700	SF	Associated with roof type 17, top layer
	Asphalt built-up roofing (black)	SD	16700	SF	Underneath roof type 17 asphalt rolled roofing
	Flashing/pitch (black)	SD	1200	SF	Associated with roof type 17 kneewalls and penetrations
Miscellaneous Roofing Materials	Terracotta cap caulk (red/pink)	D	650	LF	As repair for terracotta cap grout throughout terracotta roof caps in area of 28

FEB 24

NOCK

Print Form

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

Date of Notification (1) February 23, 2016		Name of Building Owner/Operator (2) Princeton University, Trustees of Princeton University							
Agencies Notified	Type Notification	Street Address EA McMillan Building							
<input checked="" type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA	<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended Amendment # 1 <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	City, State, Zip Code Princeton, NJ 08544							
		Name of Contact Bob Ortega	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Princeton		Type of Facility (4)							
Street Address 32 Maclean Circle		<input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Princeton		Square Feet 3800	# of Floors 3						
County (6) Mercer		Bldg. Age 50+							
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) Residential							
Name of Monitoring Firm Hired by Building Owner (8) Pennonni Associates		ASCM No.	Name of Abatement Contractor (9) ecoservices, LLC						
Street Address 515 Grove Street, Suite 1B		Street Address 407 W Lincoln Highway, Suite 500							
City, State, Zip Code Haddon Heights, NJ 08035		City, State, Zip Code Exton, PA 19341							
Project Manager for Monitoring Firm Alan Lloyd		Telephone No. 856-656-2875	Telephone No. 484-872-8884						
License No. 01161									
Start Date (10) 3/14/16	Scheduled Completion Date (11) 3/25/16	Name of OSHA Monitor EMSL							
Occupancy Status During Abatement (Check Only One)		Street Address 200 Route 130 North							
<input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe: _____		City, State, Zip Code Cinnaminson, NJ							
Scope of Work (Check All That Apply)									
<input type="checkbox"/> ≥3 sf or ≥3 lf <input checked="" type="checkbox"/> ≥160 sf or ≥260 lf									
<input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Demolition									
<input checked="" type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior			X	Caulk @ wood siding & windows	2500	X			
Library Ceiling			X	Drywall + Joint Compound	250	X			
Name of Registered Waste Hauler Waste Management of New Jersey		NJDEP Waste Hauler ID No.	Cubic Yards of Waste 40	Name of Registered Landfill GROWS Landfill					
City, State Trenton, NJ		Disposal Date TBD		City, State Morrisville, PA					
Completed by Joe White		Title Project Manager		Signature <i>Joseph White</i>		Date February 23, 2016			

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

Date of Notification (1) 2-23-16		Name of Building Owner/Operator (2) 320 PC Valley LLC							
Agencies Notified <input checked="" type="checkbox"/> EPA <input checked="" type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input type="checkbox"/> DOH <input type="checkbox"/> DCA	Type Notification <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended Amendment # <u>1</u> <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address P.O. Box 515 FEB 24 2016							
		City, State, Zip Code South Orange, NJ 07079							
		Name of Contact Maximillian Dorne							
		Telephone Number							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Former Residence		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
Street Address [REDACTED]									
City (5) South Orange		Square Feet 2,400	# of Floors 2-1/2						
		Bldg. Age 136							
County (6) Essex		County Code (7) (STATE USE ONLY)							
		Current Use (Prior if being demolished) Vacant Residence							
Name of Monitoring Firm Hired by Building Owner (8) Bioterra Solutions		Name of Abatement Contractor (9) Red Roc Materials, LLC							
Street Address 1130 West Chestnut Street		Street Address 20 Ramapo Valley Road							
City, State, Zip Code Union, NJ 07083		City, State, Zip Code Mahwah, NJ 07430							
Project Manager for Monitoring Firm Rick Eustaquio		Telephone No. 973-494-3762							
		License No. 01248							
Start Date (10) 3-4-16		Scheduled Completion Date (11) 3-15-16							
Occupancy Status During Abatement (Check Only One) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe:		Name of OSHA Monitor Red Roc Materials, LLC							
		Street Address 20 Ramapo Valley Road							
		City, State, Zip Code Mahwah, NJ 07430							
Scope of Work (Check All That Apply)									
<input type="checkbox"/> ≥3 sf or ≥3 lf <input checked="" type="checkbox"/> ≥160 sf or ≥260 lf									
<input type="checkbox"/> Renovation <input checked="" type="checkbox"/> Demolition									
<input checked="" type="checkbox"/> Full Containment with Negative Pressure <input checked="" type="checkbox"/> Mini-Enclosure <input checked="" type="checkbox"/> Glovebag Procedure <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	Thermal System Insulation	75 LF	X			
Throughout 1st, 2nd, Attic			X	Plaster	2,720 SF	X			
Throughout 1st, 2nd Floor			X	Floor Tile	750 SF	X			
Name of Registered Waste Hauler Atlantic Carting, LLC		NJDEP Waste Hauler ID No. 26085		Cubic Yards of Waste 40		Name of Registered Landfill Grand Central Landfill			
City, State Wayne, NJ		Disposal Date on/about 3/8/16		City, State Pennargyl, PA					
Completed by Michael F. Keith		Title Project Manager		Signature Michael Keith		Date 2-23-16			

CK 46018

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

D&S Proj. #: 16-61

RECEIVED
FEB 24 2016
FACILITY INFORMATION

Date of Notification (1) 02/17/16		Name of Building Owner/Operator (2) betty day	
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA		Street Address [REDACTED]	
Type Notification <input type="checkbox"/> Initial <input type="checkbox"/> Amended Amendment #: _____ <input checked="" type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation		City, State, Zip Code TEANECK, NJ 07666	
		Name of Contact betty day	Telephone Number [REDACTED]

FACILITY INFORMATION

Name of facility where abatement is taking place (3) betty day			Type of Facility (4) <input type="checkbox"/> School (K - 12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (Private/Commercial Bldgs./Homes, etc.)		
Street Address [REDACTED]			Square Feet # of Floors Bldg. Age		
City (5) TEANECK	County (6) BERGEN	County Code (7) (State use only)	Current Use (Prior if being demolished)		

Name of Monitoring Firm Hired by Bldg. Owner (8) [REDACTED]		ASCM No. [REDACTED]	Name of Abatement Contractor (9) D & S RESTORATION, INC.	
Street Address [REDACTED]			Street Address 20 California Ave.	
City, State, Zip Code [REDACTED]			City, State, Zip Code Paterson, NJ 07503	
Project Manager for Monitoring Firm	Phone Number		Telephone Number 973-345-8020	License Number 01169
Start Date (10) 02/17/16	Sched. Completion Date (11) 02/29/16		Name of OSHA Monitor D & S Restoration, Inc.	
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility closed/vacated during entire period of abatement. <input type="checkbox"/> Abatement performed outside of normal facility hours- Describe: _____ <input checked="" type="checkbox"/> Other-Describe: NORMAL HOURS			Street Address 20 California Avenue	
			City, State, Zip Code Paterson, NJ 07503	

Scope of Work (check all that apply) <input checked="" type="checkbox"/> >3 sf or >3 lf <input checked="" type="checkbox"/> Renovation <input type="checkbox"/> ≥160 sf or ≥260 lf <input type="checkbox"/> Demolition				<input type="checkbox"/> Full Containment w/negative pressure <input type="checkbox"/> Mini-enclosure <input checked="" type="checkbox"/> Glovebag procedure <input type="checkbox"/> Non-Exempted (*) and Non-friable procedure					
Location of asbestos-containing material (acm) to be abated in facility (13)	Is location normally used solely by maintenance/custodial staff(12)			Description of asbestos-containing material (ACM)	Amount (Specify SF or LF)	R e m o v e	R e p a i r	E n c a p	E n c l
	Yes	No	N/A						
BASEMENT		X		pipe insulation	30 L Ft	X			

Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Hauler ID# 13506	Cubic Yards of Waste 1 yd.	Name of Registered Landfill TULLYTOWN, RESOURCE RECOVERY
City, State PATERSON, NJ 07503	Disposal Date 02/18/16	City, State TULLYTOWN, PA	
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	Signature	Date 02/17/2016

CK 6680

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

D&S Proj. #: 16-63

Date of Notification (1) 02/16/16		Name of Building Owner/Operator (2) JIM AND WARREN LEONARD	
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA		Street Address [REDACTED]	
Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended Amendment #: _____ <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation		City, State, Zip Code SO. ORANGE, NJ 07079	
		Name of Contact JIM AND WARREN LEONARD	Telephone Number _____

FACILITY INFORMATION

Name of facility where abatement is taking place (3) JIM AND WARREN LEONARD			Type of Facility (4) <input type="checkbox"/> School (K - 12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (Private/Commercial Bldgs./Homes, etc.)		
Street Address [REDACTED]			Square Feet # of Floors Bldg. Age		
City (5) SO. ORANGE	County (6) essex	County Code (7) (State use only)	Current Use (Prior if being demolished)		
Name of Monitoring Firm Hired by Bldg. Owner (8)		ASCM No.	Name of Abatement Contractor (9) 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 973-345-8020		License Number 01169
Start Date (10) 03/08/16		Sched. Completion Date (11) 03/30/16	Name of OSHA Monitor D & S Restoration, Inc.		
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility closed/vacated during entire period of abatement. <input type="checkbox"/> Abatement performed outside of normal facility hours- Describe: _____ <input checked="" type="checkbox"/> Other-Describe: NORMAL HOURS			Street Address 20 California Avenue		
			City, State, Zip Code Paterson, NJ 07503		

Scope of Work (check all that apply)

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

- ☐ Full Containment w/negative pressure
☐ Mini-enclosure
☒ Glovebag procedure
☐ Non-Exempted (*) and Non-friable procedure

Location of asbestos-containing material (acm) to be abated in facility (13)	Is location normally used solely by maintenance/custodial staff (12)			Description of asbestos-containing material (ACM)	Amount (Specify SF or LF)	R e m o v e	R e p a i r	E n c a p	E n c l
	Yes	No	N/A						
BASEMENT		<input checked="" type="checkbox"/>		pipe insulation	220 L FT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Hauler ID# 13506	Cubic Yards of Waste 3 YDS	Name of Registered Landfill TULLYTOWN, RESOURCE RECOVERY
City, State PATERSON, NJ 07503	Disposal Date 15	City, State TULLYTOWN, PA	
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	Signature	Date 02/17/16

CK 4630

D&S Proj. #: DSR - 16003

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

Date of Notification (1) 02/19/16		Name of Building Owner/Operator (2) HUDSON TEA BUILDING CONDOMINIUMS ASSOC. INC. FEB 24 2016	
Agencies Notified	Type Notification	Street Address 1500 WASHINGTON STREET	
<input checked="" type="checkbox"/> EPA	<input type="checkbox"/> Initial	City, State, Zip Code HOBOKEN, NJ 07030	
<input type="checkbox"/> DEP	<input checked="" type="checkbox"/> Amended	Name of Contact	Telephone Number
<input checked="" type="checkbox"/> DOL	#: 1	VITO LANOTTE	
<input checked="" type="checkbox"/> DOH	<input type="checkbox"/> Emergency (including justification)		
<input type="checkbox"/> DCA	<input type="checkbox"/> Cancellation		

FACILITY INFORMATION

Name of facility where abatement is taking place (3) HUDSON TEA BUILDING CONDOMINIUMS ASSOC. INC.			Type of Facility (4) <input type="checkbox"/> School (K - 12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (Private/Commercial Bldgs./Homes, etc.)		
Street Address 1500 WASHINGTON STREET			Square Feet		
City (5) HOBOKEN			County (6) HUDSON		Bldg. Age
County Code (7) (State use only)			Current Use (Prior if being demolished)		
Name of Monitoring Firm Hired by Bldg. Owner (8)		ASCM No.	Name of Abatement Contractor (9) 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 973-345-8020		License Number 01169
Start Date (10) 01/18/16		Sched. Completion Date (11) 11/30/2016	Name of OSHA Monitor D & S Restoration, Inc.		
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility closed/vacated during entire period of abatement. <input type="checkbox"/> Abatement performed outside of normal facility hours- Describe: <input checked="" type="checkbox"/> Other-Describe: NORMAL HOURS			Street Address 20 California Avenue		
			City, State, Zip Code Paterson, NJ 07503		

Scope of Work (check all that apply)

- ☐ >3 sf or >3 lf ☒ Renovation
☒ ≥160 sf or ≥260 lf ☐ Demolition

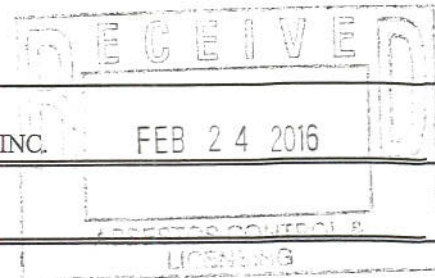
- ☐ Full Containment w/negative pressure
☐ Mini-enclosure
☐ Glovebag procedure
☐ Non-Exempted (*) and Non-friable procedure

Location of asbestos-containing material (acm) to be abated in facility (13)	Is location normally used solely by maintenance/custodial staff (12)			Description of asbestos-containing material (ACM)	Amount (Specify SF or LF)	R e m o v e	R e p a i r	E n c a p	E n c l
	Yes	No	N/A						
BUILDING EXTERIOR/GROUND		<input checked="" type="checkbox"/>		ACM - CLEAN-UP	9,200 sq ft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BUILDING EXTERIOR		<input checked="" type="checkbox"/>		TAR	35 SQ FT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Hauler ID# 13506	Cubic Yards of Waste TBD (YDS)	Name of Registered Landfill TULLYTOWN, RESOURCE RECOVERY
City, State PATERSON, NJ 07503	Disposal Date VARIOUS DATES	City, State TULLYTOWN, PA	
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	Signature	Date 02/19/16

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

D&S Proj. #: DSR - 16003



Date of Notification (1) <u>01/07/16</u>		Name of Building Owner/Operator (2) <u>HUDSON TEA BUILDING CONDOMINIUMS ASSOC. INC.</u>	
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA	Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended #: _____ <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address <u>1500 WASHINGTON STREET</u>	
		City, State, Zip Code <u>HOBOKEN, NJ 07030</u>	
		Name of Contact <u>VITO LANOTTE</u>	Telephone Number _____

FACILITY INFORMATION

Name of facility where abatement is taking place (3) <u>HUDSON TEA BUILDING CONDOMINIUMS ASSOC. INC.</u>			Type of Facility (4) <input type="checkbox"/> School (K - 12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (Private/Commercial Bldgs./Homes, etc.)		
Street Address <u>1500 WASHINGTON STREET</u>			Square Feet # of Floors Bldg. Age		
City (5) <u>HOBOKEN</u>	County (6) <u>HUDSON</u>	County Code (7) (State use only)	Current Use (Prior if being demolished)		
Name of Monitoring Firm Hired by Bldg. Owner (8) _____		ASCM No. _____	Name of Abatement Contractor (9) <u>D & S RESTORATION, INC.</u>		
Street Address _____			Street Address <u>20 California Ave.</u>		
City, State, Zip Code _____			City, State, Zip Code <u>Paterson, NJ 07503</u>		
Project Manager for Monitoring Firm _____		Phone Number _____	Telephone Number <u>973-345-8020</u>		License Number <u>01169</u>
Start Date (10) <u>01/18/16</u>		Sched. Completion Date (11) <u>11/30/2016</u>	Name of OSHA Monitor <u>D & S Restoration, Inc.</u>		
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility closed/vacated during entire period of abatement. <input type="checkbox"/> Abatement performed outside of normal facility hours- Describe: _____ <input checked="" type="checkbox"/> Other-Describe: <u>NORMAL HOURS</u>			Street Address <u>20 California Avenue</u>		
			City, State, Zip Code <u>Paterson, NJ 07503</u>		

Scope of Work (check all that apply)

- ☐ >3 sf or >3 lf ☒ Renovation
☒ ≥160 sf or ≥260 lf ☐ Demolition

- ☐ Full Containment w/negative pressure
☐ Mini-enclosure
☐ Glovebag procedure
☐ Non-Exempted (*) and Non-friable procedure

Location of asbestos-containing material (acm) to be abated in facility (13)	Is location normally used solely by maintenance/custodial staff (12)			Description of asbestos-containing material (ACM)	Amount (Specify SF or LF)	R e m o v e	R e p a i r	E n c a p	E n c l
	Yes	No	N/A						
BUILDING EXTERIOR/GROUND		<input checked="" type="checkbox"/>		ACM - CLEAN-UP	9,200 sq ft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Registered Waste Hauler <u>D & S RESTORATION, INC.</u>	NJDEP Hauler ID# <u>13506</u>	Cubic Yards of Waste <u>TBD (YDS)</u>	Name of Registered Landfill <u>TULLYTOWN, RESOURCE RECOVERY</u>
City, State <u>PATERSON, NJ 07503</u>	Disposal Date <u>VARIOUS DATES</u>	City, State <u>TULLYTOWN, PA</u>	
Completed by (Print or Type) <u>BOGDAN JOLDZIC</u>	Title <u>PRESIDENT</u>	Signature _____	Date <u>01/07/16</u>