

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



Date of Notification (1)		Na	Name of Building Owner/Operator (2) 2013 FFR 37											
2 / 13	_ / 20	13		S	Schneider National, Inc. Street Address									
	e Notificatio	ņ			reet Address 00 Water				एष्ट					
	mended mendment	#			y, State, Zip		- L1	-CAUNCA	UL.					
□ DCA □ E	mergency		ng			lle, FL 32202		Telephone Nu	mhor					
(140/10 0.20 0)	ustification) Cancellation				me of Conta	nert, Facilitie	es Proi. Mar	_ relephone ivus	Шэн					
						NFORMATION	J		-	J				
Name of Facility Where Abaten	nent is Tak	ing Plac	ce (3		7.0.2		Type of Facility	(4)						
CSX Intermodel - Sci					odular B	uilding	School (K-1	2) 8 (Other than K-1	2)					
Street Address							Other (i.e., p	private and comm		buildi	ngs,			
26 Pennsylvania Ave	nue				homes, etc.) Square Feet # of Floors Bldg. A					Δαρ				
City (5) Kearny							8000	1	1.0	25+				
County (6)				С	ounty Code (T)(STATE USE ONLY)	Current Use (Pr	for if being demol	ished					
Hudson	L 5 111	0	(0)	LACC	M No.	Nome of Abatem	Industrial ent Contractor (9)							
Name of Monitoring Firm Hired Shaw Environmental,	Owner	(8)	ASC	IVI NO.	Prism Resp									
Street Address	1110.		-			Street Address	0,100, 11101					-		
128 S. Tryon Street -	Intersta	ate To	owe	er		102 Techno								
City, State, Zip Code					City, State, Zip Code									
Charlotta, NC 28202			-			Export, PA	15632	License No.						
Project Manager for Monitoring	Firm			elephor	_{1е №} . 31-6334	Telephone No. 724-325-33	30	01121						
Roy Stancil Start Date (10)	Sche	duled (Date (11)	Name of OSHA N		01121	-55-65-65					
2 / 25 / 2013	State				2013	Shaw Envi		Inc.				5		
Occupancy Status During Abate	ment (Che	ck only	one)			Street Address								
Facility Closed/Vacated Durin	ng Entire P	eriod of	Aba	tement		128 South T	ryon Street	, Interstate	Tow	er_				
Abatement Performed Outside Time of Abatement:A	le of Norma MF	al Facilit	ty Ho	ours - D M	escribe AM	City, State, Zip Co Charlotte, N								
Scope of Work (Check all that ap	oply)	-				Eull Cont	ainment with Neg	ative Pressure						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		■ Re	emoli	ition		☐ Mini-Enc	losure Procedure							
Aba	atement prior					∐ Non-Exe	mpted () and Nor	1-Friable Procedu		atem	nent T	vne		
Location of			Nom	ation		Description o	f		R	720	I m	П		
Asbestos-Containing Materia	I (ACM)			olely by nance/		stos Containing Ma	terial (ACM)	Amount (Specify	emo	epai	ncap	nclo		
TO BE ABATED IN Facility			todia	al Staff?	' (i.e	surfacing, VAT,	or	SF or LF)	val	-	Encapsulate	sure		
(13)		Yes	(1)		<u> </u>	other miscellane	ous)	10			te			
Roof	2			×		Roofing		800 SF	×					
Exterior of Structur	е			×	Glazing	Compound fro	m Windows	9 SF	×					
Tallic of registered redets reals.					Waste	Cubic Yards of	Name of Registe				10			
Waste Management					ID No.	Waste		ntral Sanita	ary	Lar	Iatii			
City, State						Disposal Date	City, State	ı DA						
Camden, New Jersey						2/15/2013	Penn Arg	/I, PA				_		
Completed By (Print or Type) Jessica Busch	Ac	200 100 1	istr	ative	e Suppo	Signature ort	ica Bu	- 11	e 13/2	201	3			
				-		//								

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

2				Name of Building Owner/Operator (2)									
Special Content Special Co		/ 2013	_		Sch	neide	r National,	, Inc.	- 64		1/	· c	? —
BOLVO	Agencies Notified Type No	tification							a 175%	T.			,
□ PASS	☐ EPA ☐ Initial								- 11		1	7	-
	Amor	nded ndment # 1			City, S	state, Zip C	ode				ž	::*	
Name of Facility Where Abatement is Taking Piace (3) Scheduled - Schneider National's Modular Building Street Address School (K-12) Sub-aphset (Other than K-12) Street Address School (K-12) Sub-aphset (Other than K-12) Sub-aphset	□ Driss		uding						Telephone Numb	er			
Name of Facility Where Abatement is Taking Place (3) CSX Intermodel - Schneider National's Modular Building CSX Intermodel - Schneider National's Modular Building Cschod (K-12) Csc	(NJAC 5:23-8) justifi	cation)			Name	of Contact	t nort Eacilities	s Proj Mar.	The second secon				
Name of Facility Where Abatement is Taking Place (3) CSX Intermodel - Schneider National's Modular Building Street Address 26 Pennsylvania Avenue City (5) County (6) Hudson County (7) County (7) County (8) Hudson Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Shaw Environmental, Inc. Street Address 102 Technology Lane City, State, Zip Code Charlotta, N.C 28/202 Project Manager for Monitoring Firm Tod-331-6334 Tod-331-6334 Tod-331-6334 Tod-331-6334 Tod-331-6334 Tod-331-6334 Tod-331-6334 Tod-331-634 Tod-	☐ Canc	ellation			-			3 (Toj. Mg					
Name of Facility Where Abatement (Check only one) Street Address				(0)	FAC	CILITY IN	FORMATION	Type of Facility	(4)				
CSX Intermocel - Scrimerer Neutorial Swoodland Steel Address 26 Pennsylvania Avenue Street Address 26 Pennsylvania Avenue Square Feet	Name of Facility Where Abatement	t is Taking I	Place	(3)	Mac	lular Bi	ilding	School (K-12)				
Name of Montioning Firm Scheduled Completion Date (11) Start Date (10) Start		elder IN	JUOI	iais	IVIOC	iulai De	anding	C Subchanter 8	(Other than K-12)	cial b	iildin	10	
Square Feet \$ of Floors Sldg. Age 25+		_								Ciai Di	ındı iş	,,	
County (6)		e						ASSESSORES (1997)		В	dg. A	ge	
County (6) Hudson Hudson Name of Monitoring Firm Hired by Building Owner (8) Shaw Environmental, Inc. Street Address 102 Technology Lane City, State, Zip Code Charlotta, NC 28202 Project Manager for Monitoring Firm Roy Stancil Start Date (10) 3 / 18 / 2013 3 / 12 0 / 2013 3 / 12 0 / 2013 3 / 18 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 10 / 2013 3 / 20 / 2013 Shaw Environmental, Inc. Street Address 102 Technology Lane City, State, Zip Code Export, PA 15632 Project Manager for Monitoring Firm Roy Stancil Start Date (10) 3 / 18 / 2013 3 / 20 / 2013 3 / 10 / 2013 3 / 20 / 2	1 (A)								1	2	5+		
Industrial Ind					Cour	ty Code (7	(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Name of Monitoring Firm Hired by Building Owner (8) Shaw Environmental, Inc. Street Address 128 S. Tryon Street - Interstate Tower City, State, Zip Code Charlotta, NC 28202 Telephone No. Tolephone No. Toleshone No. Tolesho					Jour	ily code (i	,,-	Industrial					
Shaw Environmental, Inc. Street Address 102 Technology Lane City, State, Zip Code Charlotta, NC 28202 Project Manager for Monitoring Firm Rosport	HUGSON	Building Ow	vner (8	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	- D S		IBMAY WAS		
Street Address 128 S. Tryon Street - Interstate Tower City, State, Zip Code Charlotta, NC 28202 Project Manager for Monitoring Firm Roy Stancil Start Date (10) 3 / 18 / 2013 Scheduled Completion Date (11) 3 / 18 / 2013 Scheduled Completion Date (11) 3 / 18 / 2013 Scheduled Completion Date (11) 3 / 18 / 2013 Scheduled Completion Date (11) 3 / 18 / 2013 Scheduled Completion Date (11) Shart Date (10) 3 / 18 / 2013 Scheduled Completion Date (11) Shart Date (10) 3 / 18 / 2013 Scheduled Completion Date (11) Shart Date (10) 3 / 18 / 2013 Scheduled Completion Date (11) Shart Date (10) Shart Date	Charles Environmental In	"			Prism Respo	onse, Inc.		(1)					
128 S. Tryon Street - Interstate Tower							1100	57					
City, State, Zip Code Charlotta, NC 28202 Telephone No. 704-331-6334 Telephone No. 704-331-6334 Telephone No. 704-331-6334 Telephone No. 704-331-6334 Telephone No. 704-325-3330 Telephone No. 704-331-6334 Telephone No. 704-325-3330 Telephone No. 704-331-6334 Telephone No. 704-325-3330 Dampiro of OSHA Monitor Shaw Environmental, Inc. Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Telephone No. 724-325-3330 Ontaling Shaw Environmental, Inc. Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Telephone No. 724-325-3330 Ontaling Shaw Environmental, Inc. Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Telephone No. 724-325-3330 Ontaling Shaw Environmental, Inc. Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Telephone No. 724-325-3330 Ontaling Shaw Environmental, Inc. Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Telephone No. 724-325-3330 Ontaling Shaw Environmental, Inc. Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Telephone No. 724-325-3330 Ontaling Shaw Environmental, Inc. Street Address 128 South Tryon Street, Interstate Tower City, State, Zip Code Charlotte, NC 28202 Telephone No. 724-325-3330 Telephone No. 724-	128 S Tryon Street - In	terstate	Tov	ver			102 Techno	logy Lane		-			
Charlotta, NC 28202 Project Manager for Monitoring Firm Roy Stancil Telephone No. Telephone No. O1121													
Telephone No. 704-331-6334 Telephone No. 704-32-6304 Telephone N							Export, PA 1	15632	5.5				
Roy Stancil 704-331-6334 724-325-5350 First 724-325-5350		m											
Start Date (10) 3 / 20 / 2013 Scheduled Completion Date (11) 3 / 20 / 2013 Shaw Environmental, Inc.				11/1/19/2005					01121				
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Time of Abatement:AMPM/PMAM ☐ PM/AM ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State, Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ Charlotte, NC 28202 ☐ City, State (Zip Code ☐ City Code ☐	DStart Date (10)	0.0000000000000000000000000000000000000			tion Da	te (11)			Ino				
Occupancy Status During Adactment (North Street) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM PM PM PM AM Scope of Work (Check all that apply)	3 / 18 / 2013	3	_ /	20	/ -	2013		ronmental,	inc.				
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement AM	Occupancy Status During Abateme	ent (Check o	only o	ne)			Street Address	nion Stroot	Interstate T	OWE	r		
Scope of Work (Check all that apply)	■ Facility Closed/Vacated During	Entire Perio	od of A	bate	ment	auth a	128 South 1	ryon Sheet,	, interstate i	OWC		-	
Say of v ≥ 3 if	Abatement Performed Outside of Time of Abatement:AM-	of Normal F	acility	PM-	IAM Charlotte, NC 28202								
Say of v ≥ 3 if	Scope of Work (Check all that apply	y)	-				■ Full Cont	ainment with Neg	ative Pressure				
Second S			Rer	ovat	fion Mini-Enclosure								
Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Roof Exterior of Structure NJDEP Waste Management NJDEP Waste Ma	- 100 -f 1000 lf	ř	7 Der	nolitio	ion Glovebag Procedure								
Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A	- *Abater	ment prior to c						III,pica ()		Ab			
Roof Roof Exterior of Structure							Description o	f		R	R	四	m m
Roof Roof Exterior of Structure		ACM)	Used	Sole	ely by	Asbe	stos Containing Ma	terial (ACM)		l an	pai	icap	clos
Roof Roof Exterior of Structure	TO BE ABATED	-				(i.e	surfacing, VAT,	or		\ <u>a</u>	'	sula	ure
Roof Roof Roof Exterior of Structure Signature Roofing Roofi				(12)		1	other miscellane	ous)				ē	
Exterior of Structure	, , , , , , , , , , , , , , , , , , ,		Yes	No		<u> </u>			000.55		П	П	П
Exterior of Structure Glazing Compound Iron Windows Name of Registered Waste Hauler Waste Management NDEP Waste Hauler ID No. Sw1724 Disposal Date 3/20/2013 City, State Camden, New Jersey Completed By (Print or Type) Title Glazing Compound Iron Windows Name of Registered Landfill Grand Central Sanitary Landfill City, State 3/20/2013 Penn Argyl, PA Date 2/25/2013	Root				×					-	=		
Name of Registered Waste Hauler Waste Management City, State Camden, New Jersey Completed By (Print or Type) Name of Registered Landfill Cubic Yards of Waste City, State City, State Algorithm Argyl, PA Date 2/25/2013	Exterior of Structure				×	Glazing	Compound from	om Windows	9 5F	+=	片		
Name of Registered Waste Hauler Waste Management City, State Camden, New Jersey Completed By (Print or Type) NDEP Waste Hauler ID No. SW1724 Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste City, State 3/20/2013 City, State Penn Argyl, PA Signature 2/25/2013										븯			
Name of Registered Waste Hauler Waste Management Waste Management City, State Camden, New Jersey Completed By (Print or Type) No. Sw1724 Disposal Date 3/20/2013 City, State Penn Argyl, PA Date 2/25/2013							ur Der Seiner und der S		1611		Ш	Ш	Ш
Waste Management City, State Camden, New Jersey Completed By (Print or Type) Title Disposal Date 3/20/2013 Penn Argyl, PA Date 2/25/2013	Name of Registered Waste Hauler	3.53	100 C 100 C 100 C			Name of Regis	tered Landilli	an/	lar	dfi	11		
City, State Camden, New Jersey Completed By (Print or Type) Title Signature Signature 2/25/2013) No.			ential Same	ai y	Lai	IGII	
Camden, New Jersey Completed By (Print or Type) Title Signature 2/25/2013									NI DA		7		
Completed By (Print or Type) Title 2/25/2013								Penn Arg		lo			
Jessica Busch Administrative Support Australia 2/25/2015	Completed By (Print or Type) Title					100		·	10 Da	1850 Laura - 1100 L	201	3	
	Jessica Busch	Adr	str	ative	Supp	ort pest	seaks	ACK 2	201	-01			

ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

NO.

TIFICATION OF ASBESTOS ABATEMENT		** * * * *
(D		" I I'CA
(Pursuant to NJAC 8.80 and 5.10)	2013 FCD	Manage .

[Thlor	o of Duildi	ng Owner/Operator	(2)	156 25			-	
Date of Notification (1)	5 ,	2013	_		100000000000000000000000000000000000000		er National	l, Inc. 🧠	"FEB 27	PM	2: 6	8	
Agencies Notified EPA	Type Notific ☐ Initial		i		100000000000000000000000000000000000000	et Address) Water	Street		& L/CL/2		191		
■ DOLWD	Amenda Amenda					State, Zip				1110	٠.		
■ DHSS	☐ Emerger		udina		Jac	ksonvil	le, FL 32202						
☐ DCA (NJAC 5:23-8)	justificat				17.000000000000000000000000000000000000	e of Conta			Telephone N	lumber	¥		
(☐ Cancella	ation			Rya	an Gror	nnert, Facilitie	s Proj. Mg					
					F/	CILITY I	NFORMATION		_				
Name of Facility Where A	batement is	Taking I	Place	(3)				Type of Facility	y (4)				
CSX Intermodel -	Schneid	der Na	ation	nal'	s Mo	dular B	uilding	School (K-1		510.20			
Street Address									8 (Other than he private and com		huildi	าตร	
26 Pennsylvania	Avenue							homes, etc		illioroidi.	Dullul	901	
City (5)		-						Square Feet	# of Floors		Bldg.	Age	
Kearny								8000	1		25+		+11
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (P	rior if being den	nolished			
Hudson								Industrial					
Name of Monitoring Firm H	lired by Buil	ding Ow	ner (3)	ASCN	No.	Name of Abateme	ent Contractor (9)				
Shaw Environmer							Prism Resp	onse, Inc.		į.			
Street Address							Street Address				ř.	13	
128 S. Tryon Stre	et - Inter	state	Tov	ver			102 Techno	logy Lane					
City, State, Zip Code						-	City, State, Zip Co	ode				116	-38 40
Charlotta, NC 282	02						Export, PA	15632					
Project Manager for Monito			- 27/	Tel	ephone	No.	Telephone No.		License No				
110,000 11.00.00						1-6334	724-325-333	30	01121				
Start Date (10)	[5	Schedule	ed Co	mple	tion Da	ate (11)	Name of OSHA M	lonitor					
3 / 18 / 2	2013	3	_ /	20	/	2013	Shaw Envi	ronmental	, Inc.				
Occupancy Status During A	Abatement (Check o	nly or	ne)			Street Address						-
Facility Closed/Vacated					ment		128 South T	ryon Street	, Interstate	Tow	er		
☐ Abatement Performed C	Outside of No	ormal Fa	cility	Hou	rs - Des	scribe	City, State, Zip Co						
Time of Abatement:	AM	PM/_		PM-		Charlotte, NC 28202							
Scope of Work (Check all the	hat apply)					-				230 4			-
					*		Full Conta	ainment with Neg	gative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Ren Den				Glovebag						
□ 2100 St Ot 2200 tt	*Abatement						☐ Non-Exer	mpted (*) and No	n-Friable Proce	dure		12	
			0.000	ocat						A	atem	ent T	ype
Location of				Sole	lly ely by	Asha	Description of stos Containing Mat	erial (ACM)	Amount	Rei	Repair	En	E E
Asbestos-Containing Ma TO BE ABATI		18 -	Main	tena	nce/	(i.e.	., thermal systems in	nsulation,	(Specify	Remova	air	aps	Enclosure
IN Facility				dial (12)	Staff?		surfacing, VAT, other miscellaned		SF or LF)	200		Encapsulate	ē
(13)			es	No	N/A	1	other miscellaned	ous)				e	
		-			×		Roofing		800 SF	×	In	П	П
Roof		1	-		-	01		m Mindows	9 SF	×	F		
Exterior of Stru	ıcture		-	_	×	Glazing	Compound fro	III WIIIGOWS	3 01	15	10] [
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] []_		100			tared Landell		Ш	Ш	Ц
					JDEP V		Cubic Yards of Waste	Name of Regis		iton.	100	Afil	,
14/					V1724	/ INU.		Grand Ce	antrai San	ııaı y	Ldl	iuiii	
City, State						Disposal Date City, State							
Camden, New Jersey						1	3/20/20/13 Penn Argyl, PA						
Completed By (Print or Type) Title						Signature	. 0	- 11	Date		_		
Jessica Busch		Adm	inis	tra	tive	Suppo	ort fress	carby	sch 2	2/25/2	201	3	
		277		COAT TO	who is all								

J 2997

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

J 2991 1			(Pu	rsuant to NJ	AC 8:60-7 and 1	2:-120-7)	10	70	*/:		
Date of Notification (1) 02/26/13				Name of B Princeton	uilding Owner/O University	Operator	(2)	2013 FEL	327		100	
Month/Day/Year									</td <td>Py</td> <td></td>	Py		
Agency Notified	Type Notificatio			Street Add			, e			., <	ିନ	
EPA	x Initia			P.O. box 2				# 77.	4			
DEP		ificati	on		e, Zip Code		4 Floritation tol					
DCA	Amer			Princeton								
DOH		ificati	888	Name of C			لله	elephone Nu	mber			
	Canc	ellatio	n	Robert Ot		OX ON I			-			
Name of Facility Where Abater Princeton University 130 Al		lace (3)	FACILI	TY INFORMAT	ION	Type of Facility (4	(K12)				
Street Address								er 8 (Other e. Private &				
130 Alexander Road								gs, homes, et		iciai		
	- Ia			Square Fee				of Floors	Bldg.	Age		
City (5) Princeton	Coun	ity (6)) .		County Code (STATE USE ONL)	Current Use (Prio	2 r if being der	50+ nolished)			
	11 7 77 0		(0)		LEGNAN	Har	University	(0)				
Name of Monitoring Firm Hire Pennoni Associates Inc	d by Building O	wner	(8)		ASCM No.	11	of Abatement Contr iated Specialty Contr	3. 50				
Street Address 515 Grove Street Suite 1B							Address Crue Avenue					
City, State, Zip Code					State, Zip Code							
Haddon Heights NJ		T										
Project Manager of Monitoring Firm Alan Lloyd				Telephone 856-547-05			hone Number 64-9622		Liceno 1103	e Numb	er	
Scheduled Start Date (10) 03/11/13		Sche		npletion Date 05/31/13			of OSHA Monitor ion Labs					
Month/Day/Year Occupancy Status During Abat	amant (Chack or	alv on		onth/Day/Yea	ır	Street	Address					
Facility Closed/Vacated				atement			Progresive Drive					
x Abatement Performed							State, Zip Code					
Hours - Describe:						11	lem PA 19020					
Other - Describe:												
Scope of work (Check all that a	nnlv)					11x	Full Containment	with Negativ	Pressu	re		
x Demolition	ppiy)			Renovatio	1		x Mini - Enclosure					
>3 sf or >3 if				1101101 11010	-		Glovebag Procedure					
x >160 sf or >260 lf						x	Non-Friable Procedure					
		Is							atement	Type		
Location of	10	cation		Des	ription of			A	I	E	E	
Asbestos - Containing		rmally		100000000000000000000000000000000000000	s-Containing		Amount	R	1	N	N	
Material (ACM)	14	sed		1	rial (ACM)		(Specify	E	R	C	C	
TO BE ABATED	So	lely		(ie. Th	ermal systems		SF or	M	E	A	L	
In Facility	by	Main		insulation	surfacing, VAT	Γ,	LF)	0	P	P	0	
(13)	ten	ance/		or other	miscellaneous)			· V	A	S	S	
		stodia						A	I	U	U	
		ff (12)	-					L	R	L	R	
Bldg 130 -1st fl front entrance	Yes	No x	N/A	ceiling plas	iter		365 SF	x	†		Е	
Bldg 130 - 1st fl warehouse are	a	x		drywall co	mpound		225 SF	x				
Bldg 130 - Exterior		х		window gla	zing		2300 LF	x				
Bldg 130 - 1st fl front office		floor tile			1425 SF							
Haul				EP Waste er ID No.	Cubic Yards of Waste		Name of Registere	d Landfill	-4-4			
Horizon Disposal					20		GROWS					
City, State Trenton NJ					As needed		City, State Morrisville PA					
Completed By (Print or Type) Title					Signature Date				-			
			ect Manager		Mark John 226					6-1		

Princeton University - 130 Alexander Road Additional ACM Sections

Location of ACM

Description of ACM

Amount

Abatement

1st fl warehouse 1st fl warehouse floor tile

transite heater sleeves

745 SF

6 LF

Removal Removal

EB 27 PM 2: 08

CK 520481

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

520										w		
Date of Notification (1) 02/26/2013					Name of Buildi Eaton Cooper	ng Owner/(Operator (2)	PO13FEB	2 2 2	THE		
Agencies Notified		Notification 1	Гуре		Street Address 600 Travis, Su		03		21	PM 2:	60	
(X)EPA (X)DOL (X)DOH ()DCA		(X) Initial No () Amende () Cancelle	d Certification	on (City, State, Zip Houston, TX 7			de LIC	JA JA	* 10 /10	()	
() DOA				8	Name of Conta	ria	1	Tel. Nun	nber	-		
				FACILITY II	VFORMATION							
Name of Facility Where Abs Cooper Notification Facility		aking Place (3	3)		Type of Facility () School (K-1) () Subchapter	12) r 8 (other th	nan K-12) commercial blo	las., hom	es, etc.			777
Street Address 273 Branchport Avenue					(X) Other (i.e. private & commercial bldgs., homes, etc. Sq. Feet 12000 # of Floors 1							
City (5) Long Branch	County (6) Monmouth		County Co (State Use		Bldg. Age 50+/ Current Use (prior if being demolished) Former Factory							
Name of Monitoring Firm H Precision Environmental,	Name of Monitoring Firm Hired by Bldg. Owner (8) Precision Environmental, Inc.						Name of Co NCM Demoi	ntractor (9 ition and	9) Remedia	ation, LF	5	
Stroot Address					Street Address	3	1					
Street Address 36-15 23 rd Street					395 Turner Inc	lustrial Wa	у	1 11				
City, State, Zip Code Long Island City, NY 11106					City State, Zip Aston, PA 190							
Project Manager for Monito Michael Parpounas	oring Firm	Telephone 718-383-26			Telephone Nu 484-480-8931	mber		License 01006	Numbe	Ē		
Scheduled Start Date (10)		Scheduled	Completion	Date (11)	Name of OSH Testor Techno							
03/12/13	i.	03/26/13	t//	<u> </u>								
Occupancy Status During (X) Facility Closed/Vacate() Abatement Performed (ed During En	tire Period of	Abatement		Street Address 10-59 Jackson Avenue							
() Abatement Performed (Outside of N	offilal Lacility	Tiours		City, State, Zip Code							
Describe_Occupants move	ed to adjacer	nt area			Long Island City, NY 11101							
Other – Describe Source of Work (Check all	that apply)			-								
() Demolition (X) Rer (X) Large Proj. (>160 SF	novation	VCM) ()M Pr	oi (>25<16)	0 SE or >10 <	P60 LF ACM) () Minor Pr	oj. (<25 SF or	<10 LF A	CM)			
() Full Containment with	Negative Pre	essure (X) Mini-Encl	osure (X	Glovebag Proced					- 8		E(I)
Location of Asbestos-	Is Loc	ation Normall	y Used	Description of	of ACM (i.e.	Amount	(Specify SF or	LF)	Abatem	nent Typ	<u>)e</u>	
Containing Material (ACM)		by Maint./Cu			ems insulation,							
Facility (13)	Staff?		2000	surfacing, V	AT, or other	100			Rem.	Rep.	Encap I	Enclose
	YES		NA_	miscell.)		72015			X			T
1 st Floor		X		Pipe	havet Doort	720 LF			X			+
1 st Floor		X		Transite – E	xnaust Duct	120 35			^			
							100			-		
						 						
Name of Reg. Waste Hauler NJDEP Waste Hauler ID #					Cubic Yards of	of Waste		Name of Miner	of Reg. L	andfill	7	
Service Transport Group 20990					1 20	, J	Disp. Date	T WILLIAM		ity, State	e	
City, State New Castle, DE					do	1	03/26/13		Ň	Vaynesb	oro, OF	1
Completed by (Print or Type) Richard P. Semega, Jr. Title Branch Manager					Signature	h		<u>Date</u> 02/26/1	3			

Notification of Demolitic	on or Renovation(continue		2012
	nolition or Renovation Work and	Methods to be Used:	Removal of transite and thermal
systems insulation. Regulated	l work area, hepa filtration equip	ment, wet material, and o	louble bag.
	*	*	.,, 2
	• • •		de / james and
			1044 2016
XI. Description of Engineering	Controls and Work Practices to	be Used to Control Emm	isions of Asbestos at the
Demolition or Renovation Site	e: Regulated work area, wet rei	moval methods, HEPA filt	tration equipment, wet material
and double bag.		4	
	8.0		
VII III - 1 T 1 #4 C	in Transport Course		
XII. Waste Transporter#1 Ser	rice Transport Group	A.1 - 1-1-10-1	
Address: 58 Pyles Lane	- 1	lau pr	7: 40700
City: Newcastle	County: Newcastle	State: DE	Zip: 19720
Contact: Randy Bridges		Telephone: 3	02-7/8-5930
Waste Transporter#2 Sam	e as #1		
Address		· · · ·	
City	County	State	Zip
Contact		Telephone	Monta de la companya
XIII. Waste Disposal Site Min	erva Landfill	EPA Certifica	tion Number: P0104984
Address: 9000 Minerva Road			.,
City: Waynesburg	County: Stark	State: OH	Zip: 44688
Contact: Steve Chandler		Telephone: 3	30-866-3435
XIV. If the Demolition was Ord	lered by a Government Agency, I	Please Identify the Agenc	y Below:
Name		Title	
Authority			
Date of Order (MM/DD/YY)	2.	Date Ordered to Begin (MM/DD)(YY)
XV. For Emergency Renovation	ons:	- 4	
DATE and HOUR of Emergency: (MM/DI		(HH:MM)	
Description of SUDDEN, UNEXPECTED			
= 320			1107 ED 19 St.
Explanation of how the Event caused u	nsafe conditions, or a serious disruption of	industrial operations	
			- * · · · · · · · · · · · · · · · · · ·
XVI Description of Procedure	s to Be Followed in the Event th	at Unexpected Asbestos	is Found, or that Previously Non-
Fiable Asbestos Material Bec	omes Crumbled, Pulverized or Re	educed to Powder Segre	gate area, wet matrials, post signs,
alert generator	2 2		
	- 10 m , _ wee to see see see		and the second second
eges a ji sa a			
YVII I Cortify that an Individu	al, Trained in the Provisions of th	his Regulation (40CFR P	art 61 Subpart M) Will be On-
Site During the Demolition or	Renovation, and that Evidence t	hat the Required Training	has Been Accomplished by
this Person will be Available	for Inspection During Normal Bus	siness Hours (Required one (1	1) year after promulgation).
		N/A	
		1	(0)-1-1 02/06/12
		of Ownel/Operator)	(Date) 02/26/13
XVIII. I Certify that the Above	Information is Correct	D	
		V / V	
	2	MR	
10.0	(Signature	of Owner/Operator)	(Date) 02/26/13

sey

BATEMENT (20-7)

. 1	State of New Jer
K127	NOTIFICATION OF ASBESTOS AB
0,00	(Pursuant to NJAC 8:60-7 and 12:-1
2	

					Name of Building Owner/Operator (2)							
			Princeton University 2013 FEB 27 Div									
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		n			***********	. & 1	4-3-1		29			
Amer	nded					L [-]	outs. I	46	~ I.			
Not	ificatio	n	Name of Co	ontact	C///////	Tele	hone Num	ber				
Canc	ellatio	n	Robert Ote	go								
			FACILIT	Y INFORMAT	TION							
	lace (3	3)					2)					
er Road								han K1	2)			
						Name						
					(7)		National Contract of the		ge			
Cour	ity (6)											
			(STATE USE ORLE)			University	•					
Building O	wner	(8)		ASCM No.	Name of Abatement Contractor (9)							
					Associ	ated Specialty Contract	ng					
					110	Street Address						
			3		98 La	Crue Avenue						
City, State, Zip Code						· ·						
Project Manager of Monitoring Firm									nas Number			
			1									
Man Lloyd						e of OSHA Monitor						
Scheduled Start Date (10) Sched. Co					11							
		M		ır	Cinci	ion Labs						
(Check o	nly on							N.				
			atement									
		ility										
M - 3:30	PM				Bensa	iem PA 19020						
						Full Containment with	Negative	Pressur	P			
			Renovation x Mini - Enclosure									
			x Glovebag Procedure									
					x	Non-Friable Procedu						
							·e					
	Is	7	100-1-1-100					tement	Type			
Lo	Is cation			ription of			Aba	tement	E	E		
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No U Se by ter Cu	rmally sed olely Main- nance/ stodial		Asbesto Mater (ie. The insulation,	os-Containing rial (ACM) ermal systems , surfacing, VA		(Specify SF or	R E M O V	R E P A	E N C A P S U	N C L O S U		
No L Se by ter Cu Sta	rmally sed olely Main- nance/ stodial		Asbesto Mater (ie. The insulation,	os-Containing rial (ACM) ermal systems , surfacing, VA		(Specify SF or	R E M O V	R E P A	E N C A P S	N C L O S		
No U Se by ter Cu	rmally sed olely Main- nance/ stodial		Asbesto Mater (ie. The insulation,	os-Containing rial (ACM) ermal systems , surfacing, VA7 miscellaneous)		(Specify SF or	R E M O V	R E P A	E N C A P S U	N C L O S U R		
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No L So by ter Cu Sta Yes	cation rmally Used blely Main- nance/ stodial off (12) No x		Asbesto Mater (ie. The insulation, or other ceiling plas	os-Containing rial (ACM) ermal systems , surfacing, VA7 miscellaneous)		(Specify SF or LF) 365 SF 14460 SF	R E M O V A L	R E P A	E N C A P S U	N C L O S U R		
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No L So by ter Cu Sta Yes	cation rmally sed olely Main- nance/ stodial off (12) No x	N/A NJDI	Asbesto Mater (ie. The insulation, or other ceiling plas 9x9 floor ti 12x12 floor window car EP Waste	os-Containing rial (ACM) ermal systems , surfacing, VA7 miscellaneous) ster ile r tile ulk Cubic Yards of Waste 4(Disposal Date	0	(Specify SF or LF) 365 SF 14460 SF 2105 SF 1950 LF Name of Registered L GROWS City, State Morrisville PA	R E M O V A L X	R E P A I R	E N C A P S U	N C L O S U R E		
	Initia Not American Not Canc Taking Per Road Cour Building O	Notificatio Amended Notificatio Cancellatio Taking Place (3 er Road County (6) Building Owner Schee t (Check only one ng Entire Period	Initial Notification Amended Notification Cancellation Taking Place (3) er Road County (6) Building Owner (8) Sched. Com Mot (Check only one) ng Entire Period of Abile of Normal Facility	Notification Initial Notification Amended Notification Cancellation Cancellation FACILIT Taking Place (3) er Road County (6) Sched. Completion Date 05/31/13 Month/Day/Yea t (Check only one) ing Entire Period of Abatement le of Normal Facility AM - 3:30 PM	Notification Initial Notification Amended Notification Cancellation Cancellation Cancellation County (6) County (6) County (6) County (6) County Code (STATE USE ONL) ASCM No. Telephone Number 856-547-0505 Sched. Completion Date (11) 05/31/13 Month/Day/Year t (Check only one) ing Entire Period of Abatement le of Normal Facility AM - 3:30 PM	Notification Initial Notification Amended Notification Cancellation Cancellation Cancellation County (6) County (6) County Code (7) (STATE USE ONLY) Building Owner (8) City, State, Zip Code Princeton NJ 08543 Name of Contact Robert Otego FACILITY INFORMATION STaking Place (3) er Road County (6) County Code (7) (STATE USE ONLY) ASCM No. Name Associant Street 98 Lad City, State City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Suilding Owner (8) ASCM No. Name Associant Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code Princeton NJ 08543 Name of County Code (7) (STATE USE ONLY) Street 98 Lad City, State, Zip Code (STATE USE ONLY) Street 98 Lad City, State, Zip Code (STATE USE ONLY) Street 98 Lad City, State, Zip Code (STATE USE ONLY) Street 98 Lad City, State, Zip Code (STATE USE ONLY) Street (STATE USE ONLY)	Notification Initial Notification Amended Notification Cancellation Taking Place (3) er Road County (6) County (6) County (6) County Code (7) (STATE USE ONLY) Building Owner (8) ASCM No. Telephone Number 856-547-0505 Sched. Completion Date (11) 05/31/13 Month/Day/Year Et (Check only one) gg Entire Period of Abatement let of Normal Facility AM - 3:30 PM Princeton University Street Address P.O. box 2158 City, State, Zip Code Princeton NJ 08543 Name of Contact Robert Otego Type of Facility (4) School (K1)	Notification Initial Notification Amended Notification Cancellation Cancellation Cancellation FACILITY INFORMATION Taking Place (3) er Road County (6) County (6) County (6) County Code (7) (STATE USE ONLY) Subchapter 8 (Other ti x Other (i. e. Private & c buildings, homes, etc.) Square Feet # of Floors 25000 3 Current Use (Prior if being demo University) Street Address 98 LaCrue Avenue City, State, Zip Code Glen Mills, PA 19342 Telephone Number 856-547-0505 Sched. Completion Date (11) 05/31/13 Month/Day/Year t (Check only one) ng Entire Period of Abatement le of Normal Facility MM - 3:30 PM Renovation P.O. box 2158 City, State, Zip Code County (6) Street Address 98 LaCrue Avenue City, State, Zip Code Glen Mills, PA 19342 Telephone Number 610-364-9622 Name of OSHA Monitor Criterion Labs Street Address 3370 Progresive Drive City, State, Zip Code Bensalem PA 19020 x Full Containment with Negative x Mini - Enclosure x Glovebag Procedure	Notification Initial Notification Amended Notification Cancellation Taking Place (3) er Road County (6) County (6) County (6) County (7) (STATE USE ONLY) City, State, Zip Code Duliversity ASCM No. Street Address 98 LaCrue Avenue City, State, Zip Code Glen Mills, PA 19342 Telephone Number Street Address 98 LaCrue Avenue City, State, Zip Code Glen Mills, PA 19342 Telephone Number 856-547-0505 Sched. Completion Date (11) 05/31/13 Month/Day/Year te (Check only one) and Entire Period of Abatement le of Normal Facility AM - 3:30 PM Princeton University 20/13 FEB 27 PM 20 PM 20 PM 20 PM 20 Pil 2 Pil 2 Pil 2 Pil 2 PM 21 Pil 2 Pil Containment with Negative Pressur X Mini - Enclosure X Glovebag Procedure	Princeton University 2013 FEB 27 PM 2		

RECEIVED

Princeton University - 120 Ale នៅជាធិប្រាជ្ញា Addition នា Actions

Location of ACM	Description of ACM		Amount	Abateme	ent type
Basement	drywall compound	2	5186 SF		Removal
Thoughout bldg in wall cavities	pipe insulation		1680 LF		Removal
stairwlls	light pads		9 EA		Removal
stairwlls	fire doors		5 EA		Removal
basement mech room	black mastic glue dots		30 LF		Removal

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

Date of Notification (1)						Owner/Ope	erator ((2)	<	H _{JFEB} ¿	,	K	٠,	
02/22/13	Notift			Roman Street Ad	Zabiha	ICH			AS - a	<	2		42	
	Notification				apartis l	Rd			ď	77.5	17	2.	_	
X EPA X DEP X DOL	Initial Amended Amendment #		1	City, Stat	e, Zip Co		0		(108 M	PA	ð.,,	8	į.
DOH DCA	Emergency (in justification) Cancellation	cluding	- 1	Name of C/O Eli					1.	Folonbana N	lumbar	-1.		
				FACIL	ITY INFO	RMATION	N							
Name of Facility Where Abater Private House	nent is Taking	Place (3)					Sch	Facility (4) nool (K-12)		40)		26	
Street Address 47 Malapartis Rd				Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings etc.)								nes,		
City (5) Morris Plains				7	79							3ldg. 50+	Age	
County (6) Morris				County C	code (7) ISE ONLY))	_		Use (Prior if House	being demo	lished)			
Name of Monitoring Firm Hired Sky Environmental Serv		ASCM	No.	1.763			nent Contrac							
Street Address 140 Boulevard					Street Address 22 Troy Lane				1 - 1					
City, State, Zip Code Mt. Lakes, NJ 07046			*	City, State, Zip Code Lincoln Park, NJ 07035					035					
Project Manager for Monitoring Leonidas		Telephor 973-58	ne No. 8-4821	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		one No. 067950	7.	License 01193						
Start Date (10) 03/05/13		Schedule 03/09/1		pletion [Date (11)	100	Name o	of OSHA	Monitor					
Occupancy Status During Aba	tement (Check	Only On	ne)				Street /	Address	3				,	1756
Facility Closed/Vacated D Abatement Performed Ou Other – Describe: Unocu	itside of Norma	eriod of A	Abatem Hours	ent		(ate, Zip (Code					-
Scope of Work (Check All Tha	t Apply)													
∑ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Mini-E Glove	ontainment of the containment of	ıre			ıre	
		le	Locati	on				11011 2				Aba	teme	nt
Location of		1	Vormal	ly		Desc	ription	of			-	_	уре	_
Asbestos-Containing Mate TO BE ABATED In Facility (13)		Ma	ed Sole intenar todial S (12)	nce/		tos Contai thermal sy surfacir other mis	ystems ng, VA	insulatio T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-	- 0	
Basement				X	Pip	oe and Jo			n	155 LF	X	_		
Basement-HVAC	Rm			X		Transi	ite Pa	inel		133 SF	Х	1.03		
Basement- HVAC	Rm			Х		Flue	Pato	h		2SF	X	-		
Name of Registered Waste Ha	H	JDEP W lauler ID 33137		Cubic Ya of Waste TBD	е	(Name of Reg		dfill			<u> </u>		
City, State Lincoln Park, NJ	# = ==	A I				Disposa TBD	l Date		City, State Morrisville	, PA 1906	67			
Completed by Elizabeth Cirovic	- 1	Title Secr	etary			Sig	Signature Date 02/23/13							