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Date of Notification (1)			Name	of Building Owner	/Operato	or (2)				-	111
01/17/2019				cqueline			JAN 3	1 2	019		
Agencies Notified Type Notification			Street	Address	<u> </u>	1105	Ti-			1.4	- 44
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DEP Amended Amendment	44		1	state, Zip Code		100	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			*:	-
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Name of Facility Where Abatement is Taking	Place	(3)	TAC	CILITY INFORMAT	IION	Type of Facil	itv (4)		-		
						School	22 (2.22)				
Street Address						Subcha	pter 8 (Other than K-	12)			
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Asbestos-Containing Material (ACM) TO BE ABATED		aintenar		Asbestos Con	taining M	laterial (ACM)	Amount			ш	_
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(13)		\ \._/	Т	other r	niscellan	eous)		ova	Repair	sula	onnsc
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Check # 9296

Date of Notification (1)												
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☐ Cance	llation		Ro	bert F. O	rtego, PE		(609)	258-184	1			
Nome of Facility Add			FA	CILITY IN	NFORMATION							
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Princeton University (Robert	son Hall)					School (K-1	2)					
Street Address						Subchapter Other (i.e.,)	8 (Other tha	an K-12)	ıl bı	مناماني		
Prospect Ave., Princeton Un	iversity - I	Main C	Campu	S		homes, etc.	.)	Commercia	21 10	unan	igs,	
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Street Address					Street Address		,					_
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Moorestown, NJ 08057					Paterson, NJ							
roject Manager for Monitoring Firm		Tel	ephone	No.	Telephone No.	07004	License	Ne				
Michael R. Keehn				40-8800	973-345-0022		License					
tart Date (10)	Scheduled				0.0000022		0050	1				
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(NJAC 5:23-8)	justification)	(moidu)	iig	Nan	ne of Conta	act	*	Telephone Nu	mbor			
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				F		INFORMATION		003-230-1	041			
Name of Facility Where At	patement is Tak	ng Plac	ce (3)				Type of Facility	(4)				
Princeton University	-New Gradua	te Col	llege	Room	2412		☐ School (K-1					
Street Address					76		→ Subchapter	8 (Other than K-	12)			
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Street Address						Street Address	IVIRONMENTA	L, INC.				
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Moorestown, NJ 080	57					BRISTOL, PA						
Project Manager for Monito			Te	lephone	No	Telephone No.	19007					
Michael Keehn	3		1 00	509-386				License No.				
Start Date (10)	Sche	dulad (letion Da		215-788-6040		00509				
1/_28/		TN		1401	ate (11)	Name of OSHA N						
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☐ Facility Closed/Vacated	During Entire Pe	x only	one)			Street Address						
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Time of Abatement: 7:0	0AM-6:30PM/	P	.у г юс М-	AM	scribe	City, State, Zip Co						
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City, State						Disposal Date	City, State				-	
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Completed By (Print or Type)	Title					Signature	1		ite /	1		
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SB-41 QC/Q11	0					portup	ougers /	The little	100	//	Z	

APPROVED BY: Franklin Meyer, NJPOL NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 25 / 19 Princeton University-Office of Design and Consti Agencies Notified Type Notification Street Address **⊠** EPA 200 Elm Dr. JAN 31 2019 **⊠** DOLWD ☐ Amended City, State, Zip Code ☑ DHSS Amendment # Princeton, NJ 08544 ☑ DCA Emergency (including ASBESTORO (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Robert Ortego 609-258-1841 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Princeton University-New Graduate College Room 2412 ☐ School (K-12)
☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, College Rd W & Springdale Rd homes, etc.) City (5) Square Feet # of Floors Bldg. Age Princeton 70 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) MERCER Office/Classrooms Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental Inc 00003 BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 1253 North Church Rd 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Michael Keehn 609-386-8800 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 1 / 28 / 19 2 / 1 / 19 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-6:30PM/ PM- AM BRISTOL, PA 19007 Scope of Work (Check all that apply) ☑ Full Containment with Negative Proce

\(\triangle \geq \frac{25}{160} \text{ sf or \$\geq 260 lf}\)			enovat emoliti			☐ Mini-En	iclosure ag Procedure empted (*) and N		7			
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V 100 100 100 100 100 100 100 100 100 10	Name of Registered Waste Hauler NJD BRISTOL ENVIRONMENTAL, INC.						Name of Regis	tered Landfill				Ш
BRISTOL, PA 19007					Disposal Date	City, State FAIRLESS	HILLS. PA					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 1/22/2019			Name o	f Building	Owner/C			Parish	1100			1.	-1	
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MECS	Street Address							batement Co Environme			s, Inc.			
Street Address PO Box 341	73				Street PO B									
City, State, Zip Code Chesterfield, NJ 08							Zip Code n, NJ 0850)1						
Project Manager for Monitoring Firm		Т	Telepho	ne No.		Teleph		William Services		License	e No.			
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

JAN 3 1 2019

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Date of Notification (1)	6-19		Na	me of Build	ing Owner/Operato		LICHOLS					
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Project Manager for Moni	toring Firm		Tele	phone	No.	Telephone No.	9-0477	License No.	71			
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(13)		_	(12)			other miscellaneou	us)		oval	air	ulate	sure
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City, State MAPLE S	HAVE I	4.5						OBINE	N	5		_
Completed By	Title	Su	P			Signature	IN-	Date>	<u>ا</u> -	19		
MICHAEL KL	MINI	00	1 .			- 1000	- / -	, ,				

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

JAN 3 1 2019

	m; A 28								7		
Date of Notification (1)	71 -16		Nam	e of Buildi	ng Owner/Operator	(2) COAI	STRUCTI	041	4-14 4-1		
1-6	26-19		_			22 000	-1.70	<u> </u>		-	=
Agencies Notified	Type Notificati	on	Stree	1 Address	700 7	~TW CT					
T.BA	M Initial				300 7	1, 31					=
T DEP	Amended		City.	State, Zip	Code						
₩ DOL	Amendmen	nt #		SELA	ISLE	CITY	N.). 0	85	43		
	☐ Emergency	(including	NICE	e of Conta			Telephone Numb	oer o	-		
Ø DOH	justification Cancellation	1)	Name	L COLILA	RAMIC		- Soprono Halla				
□ DCA		•									=
*			FA	CILITY IN	FORMATION						
	At the section Tol	vina Place (3)				Type of Facility	(4)				
Name of Facility Where	Abatement is 1 a	KING FISCE (5)				School (K-1	21				
K	ESIDEN	(E					8 (Other than K-12	?)			
Street Address						Other (i.e., p	orivate & commercia	al build	lings,		
						homes, etc					_
-City (5)						Square Feet	# of Floors	Bk	dg. A	ge	
(1)	CHAM (ITY				1200	- _ [د ا	0		
	CCTIVA		Cor	nty Code I	7) (STATE	Current Use (P	rior if being demolis	shed)			
County (6)	- 111.1		USE	ONLY			ACHRIT				
CAPL	The same of the sa				T 10 27 1 1						_
Name of Monitoring Firm	Hired by Building	g Owner	ASCM	No.	Name of Abatem	ent Contractor (9	5.10 s c.				
(8)	1/4				150	LM CO	INC				_
	44				Street Address						
Street Address					369	S SPK	PUCE AUG	-			
					City, State, Zip C				_		
City, State, Zip Code							ADE N.J		180	5	>
Jaj, - 210, - 7 - 110,					MAP	LE SH			, 00	1	-
	Haring Eirm	Te	lephone	No.	Telephone No.	0 01155	License No.	רי	i		
Project Manager for Mon	MUMBY CHILL				856-77	7-0472	01.).1.	1		_
			akir a D	to (11)	Name of OSHA N						
Start Date (10)	Sch	eduled Comp	ebon Da	(11)	1401000000	M / /	K				
7-1-19		7-15	-19			N/	4				=
Occupancy Status During					Street Address						
Occupancy Status During	y Abatomork (or	Period of Abat	ement								_
Facility Closed/Vacate	o buring Entire	and Earlity Ho	W.S		City, State, Zip C	ode	-				
Abatement Performed	Outside of North	HOR FOUNTLY ! TO	-								_
Other - Describe:											
Scope of Work (Check al	If that apply)		100000		□ Full Cor	tainment with Ne	gative Pressure				
Scope of from Johnson of	22.5		tion		Mini-End	losure	12 u				
≥3 sf or ≥3 ff		☐ Renova ☐ Demoit	00		☐ Gloveba	a Procedure					
≥160 sf or ≥260 ff		De l'elle	~ .		Non-Exe	empted (*) and N	on-Friable Procedu	re		7.4	_
7		Is Locat	ion					A	bater		
		Normal							Тур	~	
) (32 × × ×		Used Sole	y by		Description of		A			-	
Location o)]	Maintena	nce/	Asbes	tos Containing Mat	enai (ACM)	Amount (Specify	70		nc	En
Asbestos-Containing M	BIERIAI (AUM)	Custod	al	(i.e.	thermal systems in	nsulation,	SF or LF)	Removal	Repair	Encapsulate	Enclosure
TO BE ABAT		- Staff			surfacing, VAT, other miscellaned	VIS.)	J. J. D.	NO	Jak	Sul	SUI
IN Facility (13)		(12)			Ulia Histara let	~ /		al	,	ale	9
(13)		W 100	N/A							- E22	
		Yes No	111/4	37.		-1-	7000 =0	V			-
Chalil	^		X		TRANSIT	7	2000 SE	1	_	-	_
SIDIN	5		+								
		-									
								-	-		
			1-1								
			Lincol	Marta	Cubic Yards	Name of Reo	istered Landfill				
Name of Registered Was	te Hauter		UDEP V		of Waste	(41	Λ				
	- 1	1	1590	Ψc	Andre Control of the Control		C.M.O.A.				
ICLEMOO	JAL		111		Disposal Date-	City, State					
City, State			10	57	And the second s	Wood	OBINE 1	J. J			_
MAPLE.	SHAVE	MI.	UQ	116	Signature -	1	Data	7	,	18	
	Tit	ie			3 J I	111)1	: 1-	26		1	
Completed By	/	SUV	'.		- hun	m n		_			
WICHHOL K	LOMIN -										