Guardian Contracting, Inc. 1889 Route 9 Suite 61 Toms River, New Jersey 08755



#### DEMOLITION / RENOVATION NOTIFICATION

Operato	or Project #:			Postmark:		Notificati	ion:		
I.	TYPE OF NOTIFICA	TION (O - Original R - Revi	sed C-C	Cancelled):	0	П.	IS ASBESTOS PRESENT? (Y	es/No):	Y
Ш.	FACILITY INFORMA	ATION (identify owner, remov	al contracto	or and other	operator)		7-20-20-20-20-20-20-20-20-20-20-20-20-20-		
	OWNER N	NAME: Steph	en Mark	S	- 1 P. C 1 P.				
	Address:								
	City:	Kearny	State:	New Je	ersey	Zip:	07032		
	Contact:	Stephen Marks				Tel:	201-212-1192		
	REMOVAL CONTRA	ACTOR: Guard	lian Con	tracting, I	nc.		NJ License: 0062-	4	
	Address:	1889	Route 9,	Unit 61				- 11-27-20-20-20-20-20-20-20-20-20-20-20-20-20-	
	City:	Toms River	State:	New Je	ersey	Zip:	08755	~	
	Contact:	Nicho	las Ferni	icola		Tel:	732-349-9932		
	OTHER OPERATOR	(if different)					NJ License:		
	Address:					0			
	City:		State:			Zip:			
	Contact:					Tel:	V v		
IV.	TYPE OF OPERATIO	ON (D - Demo O - Ordered I	Demo R	- Renovation	n E - Emergency Ren	novation):	D		
V.	FACILITY DESCRIP	TION (Including building name	e, number a	and floor or	room number)				
	Building Name:	Residence		8					
	Address:	131 H Street			10				
	City: Seaside I	Park	State:	New Je	rsey	County:	Ocean		
	Site Location:	Exterior							
	Building Size:	600 sf	# of Floo	ors:	1	Age in Ye	ears: 60		
	Present Use:	Residence			Prior Use:	Residenc	ce		
VI.	PROCEDURE, INCLU	UDING ANALYTICAL METH	HOD, IF AI	PPROPRIA	TE, USED TO DETECT	T THE PRES	SENCE OF ASBESTOS MATER	LIAL:	
VII.		MED TO BE ASBESTOS?  OUNT OF ASBESTOS INCLU	IDING:	1			T	Nont	friable
			, DE 10.		RACM		35-03-396-396-497-4	Asbestos	s Material To Be
	<ol> <li>Regulated ACM to</li> <li>Category I ACM no</li> </ol>	ot removed			To Be	LOCATION		noved	
	Category II ACM n	ot removed	-		Removed			Cat I	Cat II
	Pipes (Linear feet):								
	Surface Area (Square i	feet): 600 sf		Asbesto	os roof		Exterior garage		
	RACM Off Facility Co	omponent (Cubic feet):							
VIII.	SCHEDULE DATES ASE	BESTOS REMOVAL (MM/DI	D/YY)	Start:	7/15/16		Complete: 7/18	3/16	

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

X.	DESCRIPTION OF PLANNED DEMOLITION OR	RENOVATION WO	RK, AND METHOD(S) TO BI	S USED D. E	G B I V E
xi.	DESCRIPTION OF WORK PRACTICES AND EN AND RENOVATION SITE:  Prior to removal, the work area around the building will be removed by non-friable procedures. All waste will be place	roped off with caution tap	e and warning signs. Plastic sheetir	ASB will be placed on the	ESTOS CONTROL &  ground below and the asbestos will be
xii.	WASTE TRANSPORTER #1 Name: Guard	dian Contracting,	Inc.		
		Route 9, Unit 61			
	City: Toms River	State:	New Jersey	Zip:	08755
	Contact Person: Nicho	olas Fernicola			
	WASTE TRANSPORTER #2 Name:				
	Address:				
	City:	State:		Zip:	
	Contact Person:				
xiii.	WASTE DISPOSAL SITE Name: T.R.F	R.F.	\$		
	Location: Borde	entown Road			
	City: Tullytown	State:	Pennsylvania	Zip:	19007
	Telephone: 215-943-9732		Permit #: 101	494	
xiv.	IF DEMOLITION ORDERED BY A GOVERNME	NT AGENCY, PLEAS	E IDENTIFY THE AGENCY	BELOW AND ATTA	ACH COPY OF ORDER
	Name:		Title:		
	Authority:		_		
	Date of Order (MM/DD/YY):		Date Ordered to Begin (MN	M/DD/YY):	-
xv.	FOR EMERGENCY RENOVATIONS	<u> </u>			
	Date and Hour of Emergency (MM/DD/YY):				
	Description of the Sudden, Unexpected Event:				-
	Explanation of how the event caused unsafe condition	ns or would cause equ	ipment damage or an unreasona	able financial burden:	1
xvi.	DESCRIPTION OF PROCEDURES TO BE FOLLO ASBESTOS MATERIAL BECOMES CRUMBLED			ESTOS IS FOUND (	OR PREVIOUSLY NONFRIABLE
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE DEMOLITION OR RENOVATION AND EVI AVAILABLE FOR INSPECTION DURING NORM	DENCE THAT THE	REQUIRED TRAINING HAS	BEEN ACCOMPLIS	PART M) WILL BE ONSITE DURING HED BY THIS PERSON WILL BE
	Nicholas Fernicola / Project Manager (Printed Name/Title)	_	(Signature of Owner/Oper	ator)	July 5, 2016 (Date)
xviii.	I CERTIFY THAT THE ABOVE INFORMATION	IS CORRECT.	$\overline{}$	1	
	Nicholas Fernicola / Project Manager (Printed Name/Title)		(Signature of Owner/Oper	ator)	July 5, 2016 (Date)

#### State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) July 5, 2016 Callan & Moeller Construction Agencies Notified Type of Notification Street Address [X] EPA P O Box 2251 [ X ] Initial Notification ] DEP Amended Notification City, State, Zip Code Amendment # [x] DOL Long Beach Twp., NJ 08008 Emergency (including justification) Telephone Number [X] DOH Name of Contact Cancellation Kathy Minto ] DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (k-12) Subchapter 8 (other than k-12) Street Address X Other (i.e., private & commercial buildings, homes, etc.) City # of Floors County (6) County Code (7) Square feet Bldg. Age (STATE USE ONLY) 2000 sf 85 Current Use (Prior if being demolished) LB Twp. Ocean Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Guardian Contracting, Inc. Street Address Street Address 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 732-349-9932 00624 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7/18/16 7/19/16 E.M.S.L. Analytical Occupancy Status During Abatement (Check only one) Street Address 1056 Stelton Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe Piscataway, New Jersey 08854 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure >3 sf or ≥3 lf Glovebag Procedure Renovation [x]≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-Friable Procedure [ X ] [x] Abatement Type Is Location Description of R E Location of Asbestos-Containing Normally used Amount E E N N Asbestos-Containing Material (ACM) Material (ACM) (Specify SF Solely by C C P M TO BE ABATED Maintenance/Custodial (i.e., thermal systems or LF) Α A L 0 P insulation, surfacing, 0 in facility Staff I V R S S VAT, or (13)(12)U H other miscellaneous) A L R YES NO N/A L E 2300 sf X Exterior X Asbestos siding Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste

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

Signature

20223

Title

Project Manager

Disposal Date

7/20/16-

T.R.R.F.

Date

2/27/15

Tullytown, Pennsylvania

City, State

Guardian Contracting, Inc.

Toms River, New Jersey

Nicholas Fernicola

City, State

Completed by (Print or Type)

Guardian Contracting, Inc. 1889 Route 9 Suite 61 Toms River, New Jersey 08755



#### DEMOLITION / RENOVATION NOTIFICATION

Opera	ator Project #:	Postmark:		Notificat	ion:		
I.	TYPE OF NOTIFICATION (O - Original R - Revised C - C	ancelled):	0	П.	IS ASBESTOS PRESENT? (	Yes/No):	Y
III.	FACILITY INFORMATION (identify owner, removal contractor	or and other	operator)				
	OWNER NAME: Callan & Moeller Const	truction					
	Address:						
	City: Long Beach Twp. State:	New Je	ersey	Zip:	08008		
	Contact: Kathy Minto			Tel:			
	REMOVAL CONTRACTOR: Guardian Cont	racting, I	nc.		NJ License: 0062	24	
	Address: 1889 Route 9,	Unit 61					
	City: Toms River State:	New Je	ersey	Zip:	08755		
	Contact: Nicholas Ferni	cola		Tel:	732-349-9932		
	OTHER OPERATOR (if different)				NJ License:		
	Address:						
	City: State:			Zip:			
	Contact:			Tel:	ů)		
IV.	TYPE OF OPERATION (D - Demo O - Ordered Demo R -	- Renovatio	n E - Emergency l	Renovation):	D		
V.	FACILITY DESCRIPTION (Including building name, number a	nd floor or	room number)				
	Building Name: Residence						
	Address: 5803 Ocean Blvd.						
	City: LB Twp. State:	New Je	ersey	County:	Ocean		
	Site Location: Exterior						
	Building Size: 2000 sf # of Floo	rs:	1	Age in Y	ears: 85		
	Present Use: Residence		Prior Use:	Residen	ce		
VI.	PROCEDURE, INCLUDING ANALYTICAL METHOD, IF AF	PROPRIA	re, used to det	ECT THE PRE	SENCE OF ASBESTOS MATE	RIAL:	
VII.	IS MATERIAL ASSUMED TO BE ASBESTOS?  APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:					Nonf	riable
	Regulated ACM to be removed		RACM				Material To Be
	Category I ACM not removed     Category II ACM not removed     Category II ACM not removed		To Be Removed		LOCATION		ioved
	STATES AND					Cat I	Cat II
	Pipes (Linear feet):						
	Surface Area (Square feet): 2300 sf	Asbesto	os siding		Exterior		
	RACM Off Facility Component (Cubic feet):						
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	Start:	7/18/	16	Complete: 7/1	9/16	

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

X.	DESCRIPTION OF PLANNED DEMOLITION (	OR RENOVATION WO	PRK, AND METHOD(S) TO B	E USED DE G	EVE
xi.	DESCRIPTION OF WORK PRACTICES AND E AND RENOVATION SITE:			<b>1</b>	
	Prior to removal, the work area around the building will be removed by non-friable procedures. All waste will be pla	e roped off with caution tag iced in double 6 mil. Bags,	pe and warning signs. Plastic sheeti sealed and labeled and placed in a l	ng will be placed on the groun ocked container for disposal.	d below and the asbestos will be
xii.	WASTE TRANSPORTER #1 Name: Gua	ardian Contracting,	Inc.		
	Address: 188	9 Route 9, Unit 61			
	City: Toms River	State:	New Jersey	Zip: 0	08755
	Contact Person: Nic	holas Fernicola			
	WASTE TRANSPORTER #2 Name:				
	Address:	***			
	City:	State:		Zip:	
	Contact Person:				
xiii.	WASTE DISPOSAL SITE Name: T.R	.R.F.		***************************************	
	Location: Bor	dentown Road			
7)	City: Tullytown	State:	Pennsylvania	Zip: 1	9007
	Telephone: 215-943-9732		Permit #: 101	494	
xiv.	IF DEMOLITION ORDERED BY A GOVERNM	ENT AGENCY, PLEA	SE IDENTIFY THE AGENCY	BELOW AND ATTACH	COPY OF ORDER
	Name:		Title:		
	Authority:		7		
	Date of Order (MM/DD/YY):	10-500-10-1-1-1	Date Ordered to Begin (MN	M/DD/YY):	
XV.	FOR EMERGENCY RENOVATIONS		<u> </u>		
	Date and Hour of Emergency (MM/DD/YY):				
	Description of the Sudden, Unexpected Event:				
	Explanation of how the event caused unsafe condit	ions or would cause equ	ipment damage or an unreason	able financial burden:	
xvi.	DESCRIPTION OF PROCEDURES TO BE FOLI ASBESTOS MATERIAL BECOMES CRUMBLE			BESTOS IS FOUND OR P	REVIOUSLY NONFRIABLE
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAINED THE DEMOLITION OR RENOVATION AND E AVAILABLE FOR INSPECTION DURING NOR	VIDENCE THAT THE	REQUIRED TRAINING HAS	BEEN ACCOMPLISHED	
	Nicholas Fernicola / Project Manager (Printed Name/Title)		(Signature of Owner/Oper	ator)	July 5, 2016 (Date)
xviii.	I CERTIFY THAT THE ABOVE INFORMATION	IS CORRECT.	/		
	Nicholas Fernicola / Project Manager (Printed Name/Title)		(Signature of Owner/Oper	ator)	July 5, 2016 (Date)

NOCK	NOTIFIC	ATION	OF ASI	ew Jersey BESTOS AB C 8:60 and 1	ATEME 2:120)	NT					_	
1000						1	1 IP	G E I V	T IE			
	N	lame of	Buildin	g Owner/Ope	erator (2	:) : Enternri	ses. Inc.	9 12 2	nem e	All III		
e of Notification (1)				n Realty o	70 NJC	Litterpi	0001					
5/16 Type Notification		Street A					11.1	JUL 1 1 20	116	- /		
encies Notified Type Notification		PO B					u i	002				
EPA Initial	(	City, Sta	ate, Zip	Code								
DEP Amended Amendment # 1		Hobo	ken, N	J 07030			ASE	elephone Number	<del>ROL 8</del>	4.:		
Emergency (includin	9	Name o	of Conta	ict		L		201-656-2698			_	
DOH justification) Cancellation			Salve					201 000 =				
DCA Cancellation		FAC	ILITY I	NFORMATIO	N	Type of Fa	cility (4)					
ame of Facility Where Abatement is Taking Place	(3)					0.00202-0.00						
ame of Facility Whele Abatement							ol (K-12) hapter 8 (0	other than K-12)		hom	00	
						Othe	r (i.e. priva	te & commercial b	ullaings,	110111	55,	
treet Address						etc.)		# of Floors	Bldg. A			
						Square Fe	eet	H 01 1 100	25+			1
City (5)							(Dring if	being demolished	1)			1
Hoboken		Count	ty Code	(7)		1	ise (Prior ii	being dome	16.00			
County (6)		(STAT	E USE (	ONLY)		n/a	ant Contro	ctor (9)				1
Hudson	(8)	AS	CM No		Name	e of Abatem	ent Contra	icidi (3)				
Name of Monitoring Firm Hired by Building Owner	(0)					e Enterpri	565, IIIC.					
Health and Safety Services					Stree	et Address	Aug					
Street Address						1 East Es						
PO Box 365					City,	State, Zip	Code					
City, State, Zip Code						wood, N	08221	License No				
Berlin, NJ 08009		Tele	phone l	No.	Tele	phone No.		01172	•			
Project Manager for Monitoring Firm		85	6-452	-1311		9-567-12		01172				
	neduled (				Nar	ne of OSHA	Monitor	rioos Inc				
	14/16	Compic		5350. <b>*</b> 0.000.50				vices, Inc.				
20/00/0016		7			Stre	eet Address						
Occupancy Status During Abatement (Check O	nly One)					O Box 36						
- L F-tire Port	nd of AD	atemen	t		Cit	y, State, Zip	Code					
Abatement Performed Outside 5	-acility I	10013			В	erlin, NJ	08009					_
Other - Describe: Vacant												
Scope of Work (Check All That Apply)						⊠ Full	Containme	ent with Negative	Pressure	•		
\ \ \ ≥3 sf or ≥3 lf		novatio molition	n				i-Enclosure vebag Pro			18		
≥ 25 st of ≥ 25 iii ≥ 260 sf or ≥ 260 lf	X De	HIOHHO				X No	n-Exempte	cedure d (*) and Non-Fria	ble Proc	edure	nt	_
									1 '	Abate Ty		
	ls l	Location	n			9 18 9		25		.,		
	N	ormally			Descr	iption of ling Materia	(ACM)	Amount	77		Enc	1
Location of Asbestos-Containing Material (ACM)	Used	d Solely	ce/	(i a the	ermal SV	stems msui	ation,	(Specify SF or LF)	Removal	Repair	Encapsulate	
TO BE ABATED	Cust	odial St	aff?	- 22	curfacin	a. VAI, UI		0, 0, 1,	ova	ai.	ulai	
In Facility		(12)		0	ther mis	cellaneous)	*()				6	1
(13)	Yes	No	N/A						X	1		T
	162	1,10	1.00		Boo	of Field	573	2,500 sf	X	-	-	+
Roof			X					80 sf	X			1
			X		FIE	shing						
Roof	1											1
		-	-						1611			_
			1000	Masto	Cubic \	Yards		of Registered Lan	IIITDI			
Name of Registered Waste Hauler		1	NJDEP '	D No.	of Was		Tully	rtown Landfill				
			00352		20 cy							
Site Enterprises Inc.				and the second		al Date	City, S	tol, PA				
City, State	02221				700000	1/2016	Bris	ioi, i A	Date			
City, State 211 East Essex Ave. Linwood, NJ	U0221				1	Signature			7/5/	16		
	1100	S			14	01:11	170			212		-
Completed by	ON				1 1	1 1 1	071					

									11	1 15		9	W	5	prince	1						
Date of Notification (1) 7/5/16					Building C nto Dent			- A.C	esign Gr	oup	(b) [E	э U	U									
Agencies Notified  EPA	Type Notification			Street A	ddress 8th Stree	et			1	1 ,	JUL 1	1	201	6		1						
X EPA X DEP X DOL	Initial  Amended		-	City, Sta	te, Zip Coo	de				i						+						
DOL	Amendment		_		ne, NJ 0					ASBE	STOS	COI	VTR	olfo  FROL &  Suildings, homes,  Bldg. Age 25+  Enclosure  Abatement Type  Repair  Repair								
DOH DCA	Emergency justification)	(including		Name of	Contact					0.00	ephone					_						
DCA	Cancellation			Al Sar	nbade																	
				FACI	LITY INFO	RMATIC	ON															
Name of Facility Where A	batement is Takin	g Place (3)				21		Туре	of Facility	(4)												
Street Address			-						School (K- Subchapte Other (i.e. etc.)	r 8 (Othe			build	ings,	home	<b>≥</b> S,						
City (5) Bayonne								Squ	are Feet	# of	Floors		Bldg. Age 25+ lished)									
County (6)			-	County C	Code (7)			Curr	ont Lloo /Dr	or if hai	na dom	aliaha	Bldg. Age 25+ ed)									
Hudson					JSE ONLY)			n/a		ioi ii bei	ng demolished)											
Name of Monitoring Firm	970 970	Owner (8)		ASCN	No.		Name	of Ab	atement Co	ntractor	(9)	25+ molished)										
Health and Safety S	Services						Site	Ente	erprises, I	nc.	or (9)											
Street Address					_		Street															
PO Box 365									Essex A	ve												
City, State, Zip Code Berlin, NJ 08009									Zip Code NJ 0822	4												
Project Manager for Moni	toring Firm		Telephor	no No		Teleph			1	Licene	o No											
James Proctor	toring rinni																					
Start Date (10)		Schedule	d Com	pletion [	Date (11)		Name	of OS	HA Monitor			1400										
06/30/2016		7/14/16		~	6-452-1311 609-567-1250 01172 ion Date (11) Name of OSHA Monitor Health & Safety Services, Inc.																	
Occupancy Status During	Abatement (Chec	k Only One	9)				Street															
Facility Closed/Vaca							PO I															
Abatement Performe  Other – Describe: \( \)		nai Facility	Hours						Zip Code													
Scope of Work (Check Al	I That Apply)						Den	111, IN	J 08009													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	тпас друу)	-	enova emoliti				×	M G	ull Containm ini-Enclosur lovebag Pro	e cedure												
		1	1996				12	או ע	on-Exemple	a ( ) an	a Non-F	riable	***************************************									
	0.50	44,000	₋ocati ormall	0.700				=					3									
Location Asbestos-Containing TO BE ABA In Facilii (13)	Material (ACM)	Used Mair	Soleintenar odial S (12)	ly by nce/		os Conta thermal	system: ing, VA	Materia s insu T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulat	Enclosure						
		Yes	No	N/A											œ.							
Roof				X		G	ilazing	]			16 sf		X									
Roof				X		FI	ashin	g		2	16 sf		Х									
	=>-									-	_											
Name of Registered Was	N	JDEP W	/aste	Cubic	Yards		Name of	Registe	red Lan	dfill												
Sita Enterprises Inc					No.	of Was	ste		Tullyto			160 W. S. S.										
City, State 0035220							al Date		City, Sta	te												
211 East Essex Ave. Linwood, NJ 08221						150	/2016	3773														
Completed by Title							ignature	re () Date														
Eric Keys OM							M	10	0			7/5	/16									

State of New Jersey - Notification of Asbestos Abatement

Check# 12282

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-16 Date of Notification (1) Name of Building Owner/Operator 12 July 5, 2016 RUTGERS, THE STATE UNIVERSITY OF NJ. Agencies Notified Notification Type Street Address JUL 1 1 ZUID DEPA □Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. D DCA ■ Amended Notification # 2 -27 ROAD 1, BLDG 4086 LIVINGSTON CAMPUS ASBESTOS CONTROL & X DOL New Start & Completion Dates City, State, Zip Code LICENSING ■ DEP- No Longer REQUIRED PISCATAWAY, NJ 08854 ■ Emergency (including X DOH Name of Contact Telephone Number Justification letter) MICHAEL SMITH, ENV. 848-445-3035 □ Cancelled **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PHARMACY, BLDG# 3750 School (K-12) ■ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** # of Floors: 2 Bldg. Age: 60+ years Sq. Feet: N/A City (5) County Code (7) County (6) (State Use Only) **PISCATAWAY** MIDDLESEX Current Use (prior if being demolished): EXTERIOR EXCAVATION AREA Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN KEARNY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/18/16 08/01/16 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 3:00 PM - 5:00 AM Daily (24 hours as needed) FAIRLAWN, NJ Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥ 3 sf or ≥ 3 lf **⊠**Renovation Mini-Enclosure (Wrap & Cut) ■ ≥ 160 sf or ≥ 260 lf ■ Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount Abatement Type Solely by Maint./Custodial (Specify SF Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA **EXCAVATION AREA** X TSI <9 LF X (exterior) Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 40 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 28969 08/01/16 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 19067 NJ DEP# 04509 215-736-1700 Completed by (Print or Type) Date RAYMOND C. PEDALINO SENIOR PROJECT July 5, 2016 Raymand C. Pedalino MANAGER

NOTIFICATION OF ASBESTOS ABATEMENT Check#2540 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 05 / 16 07 Marlene Ficzko Type Notification Agencies Notified Street Address EPA X Initial X DOLWD Amended ASBESTOS CONTROL & City, State, Zip Code X DHSS Amendment # LICENSING South Bound Brook, NJ 08880 □ DCA Emergency (including justification) Name of Contact Telephone Number (NJAC 5:23-8) Cancellation Andrea Lacerda **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bidg. Age South Bound Brook, NJ 08880 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Somerset Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm License No. Telephone No. Telephone No. 973-638-1777 01127 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 07 / 14 / 16 07 / 15 / 16 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ PM\_ AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf > 160 sf or >260 lf X Renovation Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Removal Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) N/A Yes No X Basement 85 LF Pipe insulation Name of Registered Waste Hauler NJDEP Waste Haular ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Tullytown, PA Wayne, NJ 07470 TBD Completed By (Print or Type) Title Signature Date N.Jevtic 07/05/2016 Owner ASB-41

State of New Jersey

MAY 11

Date of Notification (1) 7/6/16			ame of arl Ma	Building O aleny	wner/O	perator	(2)		J	UL 11	201	6					
Agencies Notified  Type Notifica  Pagencies Notified  Type Notifica  Initial  Amende  Amende	ed .	Ci		e, Zip Cod		)1		A	SBES	STOS C	<del>ONTI</del> SING	ìOL					
	ncy (including ion)	N	ame of		0702	• 17	*	1	Tele	phone Nu	ımber						
Name of Facility Where Abatement is T house Street Address	aking Place (3)		FACIL	ITY INFO	RMATIO	ON	Sch Sul	nool (K-12 ochapter 8 ner (i.e. pr	!) 3 (Othe			dings	, home	es,			
City (5) Bergenfield								4	# of	Floors	1000	ildg.	Age				
County (6) Bergen							Current	Use (Prior	ontractor (9)								
Name of Monitoring Firm Hired by Build	ding Owner (8)		ASCM	No.													
Street Address								, 4 E Ga	ate Di	rive							
City, State, Zip Code									8								
Project Manager for Monitoring Firm	Te	elephor	ne No.				76		License 703	No.							
Start Date (10) 7/15/16	Scheduled 8/15/16	Comp	letion [	Date (11)		Name	of OSHA	Monitor									
Occupancy Status During Abatement (	Check Only One					Street	Address				=\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe: basement																	
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	-	novatio molitio				×	Mini-E Glove	Enclosure Bag Procedure					ıre				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ocatio	Bergenfield, NJ 07621   CENSING							temen ype	t						
Location of Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)	M) Used Main Custo	Solely by Asbe			os Cont thermal surfa	aining N system: cing, VA	faterial (A s insulatio T, or		(5	Specify	Removal	Repair	Encapsulate	Enclosure			
basement	Yes	No			pipe	insula	tion		5	0 LF	x	-					
Name of Registered Waste Hauler Freehold Cartage	На	DEP W uler ID 959	- 15	Cubic of Was				- 43	ered Landi ks Landi		-	1					
City, State Freehold NJ		13				sal Date		City, State Birdsbor		Α							
Completed by A. Scott Higgins	dent Signature Date 7/6/16																

### NOCE State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 573-2016						= 0	12 N	7.0	F F					
Date of Notification (1)				Name of Building Owner/	Operator (2)	5 1	TE 1	W	151	1341				
July 6, 20	16			SCHOOL DISTRICT			MS		-	. 11				
Agencies Notified	Notification  Initial		tion	Street Address 58 MEYERSVILLE I	ROAD	111	1 1 1	2016	T.E.					
⊠ EPA	□ Amen	ded Ceri	tification#	City, State, Zip Code	10.0	JU	L	2010	-					
⊠DCA	The state of the s		including	CHATHAM, NJ 079	28									
⊠ DOL	inetifi	cation)		Name of Contact		-Telepl	none Nu	mber	71 8					
☑ DEP- No Longer REQUIRED	⊠ Canc			JOHN CATALDO	1 /	973	457-25	04	ULOX					
<b>⊠</b> DOH	E Cano	ciica				L	ICENS	inva.						
			FACILITY INF	FORMATION										
Name of Facility Where Abatement				Type of Facility (4)										
SOUTHERN BOULEVARD S	CHOOL			School (K-12)										
Street Address				Subchapter 8 (other than	n K-12)									
192 SOUTHERN BOULEVA	PD			☐ Other (i.e. private & con		lings, hon	nes, etc.)							
102 000 MERRI BOOLEVA	ND .			Sq. Feet: N/A #o	f Floors: 2	Bldg.	Age:	50+ ye	ars					
	inty (6)		y Code (7)											
CHATHAM	MORRIS	(State	Use Only)	Current Use (prior if being demolished): SCHOOL										
				Name of Contractor (9)										
Name of Monitoring Firm Hired by B	3ldg. Owner (8)	ASCM		Name of Contractor (9)										
RK OCCUPATIONAL &	2010 1110	0090	)	CDEENIMOOD APAT	CEMENT (	ONCH	TANT	e inc						
ENVIRONMENTAL ANALY	SIS, INC.			GREENWOOD ABATEMENT CONSULTANTS, INC.										
Street Address 401 ST. JAMES AVENUE				Street Address										
401 ST. JAIVIES AVENUE				268 MAIN STREET										
City State 7:- 0-1-														
City, State, Zip Code PHILLIPSBURG, NJ 08865				City State, ZipCode										
Project Manager for Monitoring Firm		Number		BUTLER, NJ 07405		Tition	- N1 L	e						
JON GILBERT	908-454		Telephone Number		Licens	e Numbe	<u>r</u>							
OON GIEDERT	300-434	-0310		973-492-0477 00840										
Scheduled Start Date (10)	Scheduled	Completic	on Date (11)	Name of OSHA Monitor		0004								
07/06/16	07/07/16	ì												
72				ENVIROVISION, INC	).									
Occupancy Status During Abaten	nent (Check only o	one)		Street Address										
▼ Facility Closed/Vacated Durin				20.21 WADGADAW	DOAD									
☐ Abatement Performed Outside Describe	e of Normal Facilit	y Hours -		20-21 WARGARAW ROAD City, State, Zip Code										
☐ Facility Occupied During Entir	o Doried of Abeter			Gity, State, ZIP Code										
SUB 8 UNOCCUPIED - S			408/10 / 04											
	HIFT HOURS	SPIVI -	12WID ( 24	FAIRLAWN, NJ										
Hours as needed) Source of Work (Check all that appl														
Source of Work (Check all that appl	<u>(Y)</u>			_	F !! O									
<b>≥</b> 3 sf or ≥ 3 lf			■ Renovation		Full Contai		tn Negat	ive Pres	ssure					
				X	Mini-Enclo									
$\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$			■ Demolition	X	Glovebag				_					
					Non-Exer	npted (*)	and Non	-Friable	Proce	dure				
Location of Asbestos-Containing	Is Location Norma	Ilv Used	Description of Ast	bestos Containing Material	Amou	nt I	Abateme	ent Tyne						
Material (ACM) in Facility (13)	Solely by Maint./C	ustodial	(ACM) (i.e. therm	nal systems insulation, surfaci		0.725			: 10	<u></u>				
	Staff? (12)	NIA	VAT, or other mis	scell.)	or LF		Remove	Repair E	incap E	Enclose				
1st Floor Boys Bathroom	YES NO	NA	DIDE EITER	0 1110111 471011			_							
	X	-		G INSULATION	30 L		×							
Total Brown Service Control of the C	Place Floor Girls Bathroom   PIPE FITT				30 L		X							
Name of Reg. Waste Hauler NJDEP Waste Hauler ID #				Cubic Yards of Waste:	5 CY		of Registe							
Newark Carting, Inc. NJ DEP # 4509						G.R.C	).W.S. N	worth L	.andfi	Ш				
Newark, NJ 04509					-									
NI.4 N			Disposal D			ity, State		CIL D-1						
Notes: None			07/07/15		1.000	00 New I orrisville								
						15-736-1		.50.						
Completed by (Print or Type)	<u>Title</u>		Signature		Date									
RAYMOND C. PEDALINO			CT	Raymond C. Ped	dalie -	July	6, 2016	3						
	MANAGE		, sugarana C. 1 ll	unino										

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 573-2016				1 +	TEPENWEIN									
Date of Notification (1)			Name of Building C	Owner/Operator (2)										
June 24, 2	016		SCHOOL DISTI	RICT OF THE C	HATHAMS									
Agencies Notified	Notificatio Initial	<u>Type</u> Notification	Street Address 58 MEYERSVI	LLE ROAD	JUL 1 1 2016									
I⊠ EPA	☐ Amen	ded Certification #			1 002									
<b>IX</b> DCA	100000000000000000000000000000000000000	gency (including	CHATHAM, NJ											
IX DOL	inetifi	cation)	Name of Contact	0.020	Telephone Number NTHOL &									
☑ DEP- No Longer REQUIRED	□ Canc		JOHN CATALI	00	973-457-2504									
ĭX DOH	L Carlo	sileu		_	070 401 2004									
Name of English Where Abstances	in Tuling Division	FACIL	ITY INFORMATION											
Name of Facility Where Abatement SOUTHERN BOULEVARD S	CHOOL		Type of Facility (4)											
SOUTHERN BOOLEVARD S	CHOOL		School (K-12)											
Street Address			Subchapter 8 (oth											
192 SOUTHERN BOULEVAL	RD		Other (i.e. private	& commercial build	lings, homes, etc.)									
City (5) Cou	nty (6)	County Code (7)	Sq. Feet: N/A	# of Floors: 2	Bldg. Age: 50+ years									
CHATHAM	MORRIS	County Code (7) (State Use Only)	Current Headeries	K la atau a dana a Pata										
O I I A I I A II I	MOKKIS	Totale ose offiy)	Current Use (prior i	t being demolished	): SCHOOL									
Name of Monitoring Firm Hired by E	Bldg. Owner (8)	ASCM No.	Name of Contractor	(0)										
RK OCCUPATIONAL &		0090	INGINE OF CONTRACTOR											
ENVIRONMENTAL ANALY	SIS, INC.		GREENWOOD	GREENWOOD ABATEMENT CONSULTANTS, INC.										
Street Address 401 ST. JAMES AVENUE			Street Address											
401 ST. JAIVIES AVENUE			268 MAIN STRE	268 MAIN STREET										
City, State, Zip Code			City State 7inCode	City State, ZipCode										
PHILLIPSBURG, NJ 08865			BUTLER, NJ 07	405										
Project Manager for Monitoring Firm	Telephone	Number	Telephone Number											
JON GILBERT	908-454	-6316		072 402 0477										
Scheduled Start Date (10)	Scheduled	Completion Date (11)	973-492-0477	14	00840									
07/06/16	07/07/16		Name of OSHA Mon	itor										
10.700.000.0000			ENVIROVISION	. INC.										
Occupancy Status During Abatem	ent (Check only o	ne)	Street Address											
▼ Facility Closed/Vacated During	g Entire Period of	Abatement												
☐ Abatement Performed Outside	of Normal Facility	Hours -	20-21 WARGAR											
Describe	2		City, State, Zip Code											
Facility Occupied During Entire	Period of Abater	nent												
SUB 8 UNOCCUPIED - SI	HIFT HOURS	3PM – 12MID ( 2	FAIRLAWN, NJ											
Hours as needed) Source of Work (Check all that apply	A .													
Source of Work (Check all that apply	7)													
$\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$		ズ Renov			nment with Negative Pressure									
□ ≥ 160 sf or ≥ 260 lf		□ Demo		Mini-Enclo										
= 100 si 01 = 200 ii		□ Demo	olition	☑ Glovebag ☑ Non-Exem										
				Non-Exem	pted (*) and Non-Friable Procedure									
Location of Asbestos-Containing	Is Location Norma		of Asbestos Containing Mate	rial Amou	nt Abatement Type									
Material (ACM) in Facility (13)	Solely by Maint./C	ustodial (ACM) (i.e	. thermal systems insulation, s		fy SF									
	Staff? (12) YES NO	NA VAI, or oth	ner miscell.)	or LF)	Remove Repair Encap Enclose									
1st Floor Boys Bathroom	X		ING INSULATION 30 LF 🗵											
2 <sup>nd</sup> Floor Girls Bathroom	X			TING INSULATION 30 LF 🗵										
Name of Reg. Waste Hauler		te Hauler ID #	Cubic Yards of Was		Name of Registered Landfill									
Newark Carting, Inc.				te: 5 CY	G.R.O.W.S. North Landfill									
Newark, NJ 04509					C. C. T.O. HOIGH Landin									
	THEORY OF VIEWY			Disposal Da	ate City, State									
Notes: None	es: None			07/07/15 100 New Ford Mill Ro										
2	. TOTAL			Morrisville, Pa 1										
Completed by (Print or Type)	Title		215-736-1700   Signature   Date											
RAYMOND C. PEDALINO	SENIOR P	ROJECT												
	MANAGER		72	16-1-	June 24, 2016									

Date

6.ROWS

City, State

MAK

Disposal Date

1616

Signature

City, State

OID

Completed by

NOVATECIN

INL

08857

Title

CK 1179

### State of New Jersey

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

Date of Notification (1)				Name	of Buildin	g Owner/Operator (	2)	? 1						
	1 / _	16		ELF	RETH R	RESIDENCE		JUL 11	2016	ŝ				
Agencies Notified	Type Notificat	ion		Street	Address									
⊠ EPA ⊠ DOLWD	☐ Initial							ASPESTOS CO	NITD	$\cap$ I	2			
⊠ DOLVVD	Amended Amendmen	nt #			State, Zip			LICENS!	NG	OL.				
☑ DCA	☐ Emergency	Market Commence	1	LIT	TLE EGO	G HARBOR, NJ 0	8087	San I Co America						
(NJAC 5:23-8)	justification	n)		100000000000000000000000000000000000000	of Contac	2.00		Telephone Numb	er					
	☐ Cancellation	on		СН	RIS ADL	ER								
				FA	CILITY IN	NFORMATION								
Name of Facility Where A	batement is Ta	king Place	(3)				Type of Facilit							
RESIDENCE							School (K-							
Street Address							Other (i.e.,	private and commercial	ial bu	uilding	gs,			
City (5)								,	RI	dg. A	70			
LITTLE EGG HARBO	OR		Subchapter 8 (Other than K-12)  Other (i.e., private and commercial b homes, etc.)  Square Feet # of Floors B 908 1  County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)  RESIDENCE								ge			
County (6)			Square Feet # of Floors 908 1  County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)  RESIDENCE  r (8) ASCM No. Name of Abatement Contractor (9)  RICH-MARK CONTRACTING, INC.  Street Address											
OCEAN			County Code (7)(STATE USE ONLY)  Current Use (Prior if being demolished)  RESIDENCE  8) ASCM No. Name of Abatement Contractor (9)											
Name of Monitoring Firm I	Hired by Buildin	ng Owner (	(8)	ASCM	No.	Name of Abateme	ent Contractor (	9)	-					
N/A						RICH-MARK	CONTRACTI	NG, INC.						
Street Address						Street Address								
						170 U.S. HWY	<b>/</b> 9							
City, State, Zip Code						City, State, Zip Co	ode							
						BAYVILLE, N	J 08721							
Project Manager for Monit	oring Firm		Tele	phone	No.	Telephone No.		License No.						
						732-349-3771		01244						
Start Date (10)	F-1000				ion Date (11) Name of OSHA Monitor									
		7 /	250	_ / -	16	NEIL MARZA	NO							
Occupancy Status During						Street Address								
<ul> <li>☑ Facility Closed/Vacated</li> <li>☑ Abatement Performed</li> </ul>					oribo	138 SENECA								
Time of Abatement:						City, State, Zip Co BARNEGAT,								
Scope of Work (Check all	that apply)					1								
≥3 sf or ≥3 If		☐ Re	novat	ion		☐ Full Cont ☐ Mini-Enc		egative Pressure						
≥160 sf or ≥260 lf		⊠ De				☐ Glovebag	g Procedure							
						Non-Exe     Non-Exe	mpted (*) and N	lon-Friable Procedure	2					
l anation o		4 223	Loca: Norma			5	,		Ab		ent T	уре		
Location of Asbestos-Containing N		Use	d Sole	ely by	Asbe	Description o estos Containing Ma		Amount	Rer	Repair	Enc	Enc		
TO BE ABAT	ΓED	100000	intena	ince/ Staff?		e., thermal systems i	insulation,	(Specify	Removal	oair	aps	Enclosure		
IN Facility (13)	/		(12)	Otani.		surfacing, VAT, other miscellane		SF or LF)	<u>m</u>		Encapsulate	<u>e</u>		
		Yes	No	N/A							Ф			
OUTSIDE SIDING					ASBES	TOS SIDING		850 SF						
						11								
			П						П					
Name of Registered Waste	N	JDEP V	Vaste	Cubic Yards of	Name of Reg	istered Landfill								
RICH-MARK CONTR	H	lauler II 07764		Waste 11	GROWS	NORTH LANDFILL	-							
City, State		01104		Disposal Date	City, State									
BAYVILLE, NJ						7/25/16	MORRIS\	/ILLE, PA						
Completed By (Print or Typ	oe)	Title				Signature	1	<b>▶</b> Date	е,					
NEIL MARZANO	2 //8	SUPER	VISO	R		V/1 . 1)	mh.	240	1/	/2	NI.			
ASB-41						July	HUM	eus 1	11	04	2/0	2		

Date of Notification (1)  6 / 27	/ 16		Name of Building Owner/Operator (2)  Trustees of Princeton / Job #1504-4892 Check #8141 1										
	ne Notification			Street A	Address					2016	1		
	Initial			Trus	tees of F	Princeton Unive	rsity E.A. MacN	lillan Bldg.					
□ DOLWD □	Amended		-		ate, Zip Co			ASBESTOS			OL ?	X	
☑ DHSS	Amendment #9				ceton, N			LICE	NSIN	(G_			
	Emergency (inc	luding	-	gar sentest	of Contact			Telephone Number	er			_	
Anterior de la companya del companya del companya de la companya d	justification) Cancellation				ert Orteg			609-258-1841					
	Cancellation			100000000				003-200-1041	-0.000		-	_	
				FAC	ILITY IN	FORMATION		4)	100			_	
Name of Facility Where Abate		Place	(3)				Type of Facility (  ☐ School (K-12)						
Princeton University-D	illon Gym					(Other than K-12)							
Street Address						ial bui	ldings	S,					
Elm Drive Princeton, N	J -Princeton	Unive	rsity	Main (	Campus		homes, etc.)						
City (5)							Square Feet	# of Floors	Bld	lg. Ag	е		
Princeton							214,000	8	6	8			
County (6)				00098 AbateTech, Inc.									
Mercer				University Gymnasium									
Name of Monitoring Firm Hire	ed by Building C	wner (	B) /	ASCM N	No.	Name of Abateme	ent Contractor (9)					W = 1	
Cardno ATC	, 3			0009	8	AbateTech, I	nc.						
Street Address													
3 Terri Lane				Street Address 30 Maple Ave. PO Box 25									
City, State, Zip Code						City, State, Zip C	THE WASHINGTON			100000			
Burlington, NJ 08016						Lumberton, I							
9	aa Firm		Tolo	ohone l	do	Telephone No.	110 000 10	License No.		-			
Project Manager for Monitoria	ng Film	_		9-386		609-265-2107	7	00529					
Michael R. Keehn	16.	1-10				Name of OSHA N		00020					
Start Date (10)	/	uiea Ci 3 /		ion Dat	16	EMSL Analyt							
4/27/1	_			- '_	10_		ilicai					_	
Occupancy Status During Ab		1				Street Address							
☐ Facility Closed/Vacated D					21. 4	200 Route 13							
Abatement Performed Ou						City, State, Zip C							
Time of Abatement:	_AIVIFI	VI/			- Tivi	Cinnaminson	n, NJ 08077						
Scope of Work (Check all that	at apply)					M F. II C	tainment with Neg	ativo Proceuro					
≥3 sf or ≥3 lf		⊠ Re	novati	on		☐ Mini-End		alive Flessure					
≥ 25 st of ≥ 3 tr		_	molitic			☐ Gloveba	g Procedure						
						☐ Non-Exe	empted (*) and No	n-Friable Procedur	_				
		0.00	Locat						Ab	ateme	ent T	ype	
Location of		and the second section of the second	Norma d Sole		Asha	Description of stos Containing Ma		Amount	Re	Re	Ē	田田	
Asbestos-Containing Mat TO BE ABATE		1000	intena			, thermal systems		(Specify	Removal	Repair	cap	Enclosure	
IN Facility	_	Cus	todial	Staff?		surfacing, VAT	Γ, or	SF or LF)	<u>/a</u>		Encapsulate	ure	
(13)			(12)	N1/A	-	other miscellane	eous)				te		
		Yes	No	N/A	D: 0	cui i latia		420 I E		П	П		
Work Area #1, A Level						fitting insulatio		120 LF			片	屵	
Work Area #1, A Level					Fitting	insulation on fil	berglass	35 each					
Work Area #1, A Level					sulation		611 SF			닏			
Work Area #1, A Level					t Asbestos Win		75 SF		Ш	Ш	Ш		
Name of Registered Waste H	1350	IJDEP \ lauler II		Cubic Yards of Waste	Name of Regis								
AbateTech, Inc.		18750		40	G.R.O.W.S	. Landfill							
City, State					/	Disposal Date	City, State						
Lumberton, NJ					(	8/31/16	Tullytown,	PA					
Completed By (Print or Type				Signature	^	Da	te ,	1 -	11	11			
Gwendolyn Trumbetti	20	perat	ions	Coord	inator		(MM)	T	V	1/2	.11	11	
ASR-41							1111			1	- 1		

Date of Notification (1)			N	lame of	Building O	wner/Operate	or (2)			2000 a 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
6 /	27 / 16			Truste	es of Pri	nceton		/ Job #1504	1-4892 Check	# 2	1	20	)16	
			9	Street Ad	Idress									i
Agencies Notified	Type Notification					inceton Un	ivers	sity E.A. MacMi	Ilan Bldg.BES	STOS	CO	77.0	RO	1
	⊠ Amended		-		te, Zip Cod					LICE				
☑ DHSS	Amendment #	9			eton, NJ (						200-2			
☑ DCA	☐ Emergency (ir	ncluding		A. 175-51-50	Contact	000-1-1			Telephone Numb	oer				
(NJAC 5:23-8)	justification)		P	0.000		DE			609-258-184					
	☐ Cancellation				rt Ortego									
				FACII	LITY INFO	ORMATION		T	\					-
Name of Facility Where	Abatement is Takin	ig Place (	3)					Type of Facility (4	1					
Princeton Universi	ty-Dillon Gym							<ul><li>☐ School (K-12)</li><li>☑ Subchapter 8</li></ul>	Other than K-12	!)				
Street Address								Other (i.e., prival)	vate and comme	rcial bu	iildi	ngs,		
Elm Drive Princeto	n, NJ -Princeto	n Unive	sity l	Main Ca	ampus			homes, etc.)			Bldg. Age			
City (5)								Square Feet	# of Floors					
Princeton								214,000	8		68			
County (6)				County	Code (7)(S	STATE USE ON	ILY)	Current Use (Price		shed)				
Mercer								University G	ymnasium			100,000		
Name of Monitoring Firm	n Hired by Building	Owner (8	B)   A	ASCM N	0. 1	Name of Aba	teme	nt Contractor (9)						
Cardno ATC	ir rined by banding	O.11.101 (	'	00098 AbateTech, Inc.										
				Street Address										
Street Address				30 Maple Ave. PO Box 25										
3 Terri Lane				City, State, Zip Code										
City, State, Zip Code						Lumbert								
Burlington, NJ 080			Talou	ephone No. Telephone No. License No.										
Project Manager for Mo	nitoring Firm		1	ephone No. Telephone No.										
Michael R. Keehn				609-386-8800 609-265-2107 00323  pletion Date (11) Name of OSHA Monitor										
Start Date (10)				/ _	- ( /	EMSL Ar		versus a						
_4_ / _27_				_ ′ _										
Occupancy Status Duri	ng Abatement (Che	eck only c	ne)			Street Addre		O North						
☐ Facility Closed/Vaca	ated During Entire F	Period of	Abater	ment		200 Rou					-			-
	ed Outside of Norm	nal Facility	/ Hour	s - Desc	ribe	City, State, 2								
Time of Abatement:	AIVI	PIVI/			tivi	Cinnami	nsor	n, NJ 08077			_		000	
Scope of Work (Check	all that apply)					M Eul	II Con	tainment with Neg	native Pressure					
0.000		M Re	novati	ion		☐ Mir	ni-End	closure	,					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		☐ De				□ Glo	oveha	an Procedure	- Eriable Brocer	dura				
M = 100 01 01 _200 11						∐ No	n-Exe	empted (*) and No	IN-FILABLE FIOCEC		ha	tome	ent Ty	me
			Loca									_		
Location			Norma	ely by	Aches	Descrip	na M	or aterial (ACM)	Amount	ken	'	Repair	inca	ncl
Asbestos-Containir TO BE A	ng Material (ACM)	Ma	intena	ance/	(i.e.	., thermal sys	stems	insulation,	(Specify	Kemova		air	apsi	Enclosure
IN Fa		Cus	todial (12)	Staff?		surfacing			SF or LF)	=	-		Encapsulate	ē
(13	3)	V/	No.	1	-	other misc	enam	eous)					CD CD	
		Yes							440 LF	5	3			
Work Area #A2, A	Level				-	fitting insu	latio	on		_		$\exists$		
Work Area #A2, A	Level				Duct Ins	sulation			1,490 SF	_		ᆜ		
Work Area #A3, A		$\boxtimes$	Pipe &	fitting Insu	ılatio	on	100 LF	_						
Work Area #A3, A	Level			$\boxtimes$	Duct In	sulation			1,370 SF		X	П	Ш	Ш
Name of Registered W	NJDEP Waste Hauler ID No.			Cubic Yard Waste	ls of		istered Landfill							
AbateTech, Inc.				40		G.R.O.W.	S. Landfill							
City, State					18750 40 Disposal Date City, State									
NACES OF THE PROPERTY OF THE P					8/31/16 Tullytown, PA									
Lumberton, NJ						Signa	ture			Date			***	
Completed By (Print o	Operations Coordinator													
Gwendolyn Trun	ibetti	Opera	LIONS	. 55516										

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

ECEIVE

Date of Notification (1)				Name	of Building	Owne	er/Operator (2	,	1 4				
6 /	27 /	16		Trus	stees of F	Princ	eton	/ Job #15	04-4892 Chec	k# 3	20	16	
Agencies Notified	Type Notificat	ion		Street	Address					<del>}                                    </del>		113	1
⊠ EPA	☐ Initial			Trus	stees of F	Princ	eton Unive	rsity E.A. Mac	viillan Bldg.				1
□ DOLWD				City, S	tate, Zip C	ode			ASBES	TOS C	ONT	ROL	. a
⊠ DHSS	Amendmer			Prin	ceton, N	J 085	544			LICENS	SING		
□ DCA     (NJAC 5:23-8)	☐ Emergency justification		ig	Name	of Contact				Telephone Nu	mber			
(110/10 0.20 0)	☐ Cancellation	20		Rob	ert Orteg	jo, P.	E.		609-258-18	841			
				FAC	ILITY IN	FORI	MATION						
Name of Facility Where A	batement is Ta	aking Plac	ce (3)					Type of Facility	(4)				
Princeton Universit								☐ School (K-12		1000			
Street Address								Subchapter 8     Other (i.e., p)	(Other than K-	12) nercial bu	ildina	s	
Elm Drive Princetor	n, NJ -Prince	ton Uni	versit	y Main	Campus			homes, etc.)		noroiai be		Ξ,	
City (5)								Square Feet	# of Floors	BI	dg. Ag	ge	
Princeton								214,000	8		68		
County (6)				Cour	ty Code (7)	)(STAT	E USE ONLY)	Current Use (Pr	ior if being demo	olished)			
Mercer								University C	Symnasium				
Name of Monitoring Firm	Hired by Buildi	ing Owne	r (8)	ASCM	No.	Nam	e of Abateme	ent Contractor (9)					
Cardno ATC				0009	8	Al	oateTech, I	nc.					
Street Address						Stre	et Address						
3 Terri Lane						30	Maple Ave	e. PO Box 25					
City, State, Zip Code						City,	State, Zip Co	ode					
Burlington, NJ 0801	16					Lu	ımberton, l	NJ 08048					
Project Manager for Moni	itoring Firm		Te	ephone	No.	Tele	phone No.		License No.				
Michael R. Keehn			6	09-386	-8800	60	9-265-2107		00529				
Start Date (10)	S	cheduled	Comp	etion Da	te (11)	Nam	ne of OSHA N	Monitor					
4 /27 /	15	8	/ _3	1_/	16	EI	MSL Analyt	ical					
Occupancy Status During	Abatement (C	heck only	y one)			Stre	et Address						
☐ Facility Closed/Vacate						20	00 Route 13	0 North					
Abatement Performed						City	State, Zip C	ode					
Time of Abatement: _	AM	PM/	PN	n	AM	Ci	innaminsor	n, NJ 08077					
Scope of Work (Check al	I that apply)						- · · ·			***			
☐ >3 sf or >3 lf		M F	Renova	ition				tainment with Ne closure	gative Pressure				
≥3 \$1 \$1 ≥3 11     ≥160 \$f or ≥260 If		-	Demoli				☐ Gloveba	a Procedure					
							☐ Non-Exe	empted (*) and No	n-Friable Proce				
	7- <b>3</b>		Is Loc				December				batem		
Location Asbestos-Containing			sed So	lely by	Asbe	stos (	Description of Containing Ma		Amount	Removal	Repair	Enc	Enclosure
TO BE ABA	ATED .	_   N	Mainter	ance/		e., the	mal systems	insulation,	(Specify	nova	≅.	aps	losu
IN Facili (13)	ity		(12				urfacing, VAT er miscellane		SF or LF)	1 2		Encapsulate	6
(13)		Ye	s No	N/A	1			,				(D	
Work Area #A4, A Le	vel				Pipe &	fittin	g insulatio	n	10 LF				
Work Area #A4, A Le	vel				Duct In	sulat	tion		450 SF				
Work Area #A5, A Le	vel				Pipe &	fittin	g Insulatio	n	1,545 LF				
Work Area #A5, A Le	vel				Duct In	sulat	tion		3,674 SF				
Name of Registered Was	ste Hauler			NJDEP		100000000000000000000000000000000000000	ic Yards of	Name of Regi	stered Landfill			. A	
AbateTech, Inc.				Hauler I 1875		Was		G.R.O.W.S	S. Landfill				
City, State				1010			oosal Date	City, State					
Lumberton, NJ						8/	31/16	Tullytown	, PA				
Completed By (Print or T	ype)	Title				-	Signature			Date			
Gwendolyn Trumbe		Oper	ations	Coord	linator								

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

o K	NOT	IFICA (Pu	rsuar	t to N	JAC 8:	60 and 5:	16)			9 9 4)	7116		1
NOCH			Name	of Bui	Iding Owr	ner/Operato	r (2)		JUL	116	Ulb		-
te of Notification (1)	27 / 16		Tru	ıstees	of Prin	ceton		/ Job #1504-4	ASSESTO	4 0.00N	ITA(	JL 8	8
encies Notified	Type Notification		Stree	t Addre	ess s of Prin	ceton Uni	iversity	E.A. MacMilla	n Bldg. LIO	EN 3IN	9_	_	+
EPA	☐ Initial ☐ Amended		City	State.	Zip Code								
DOLWD	Amendment #9				n, NJ 08								+
DHSS DCA	☐ Emergency (includi	ing	1	e of Co					ephone Number				
(NJAC 5:23-8)	justification)				Ortego,	P.E.		( 6	09-258-1841				
***************************************	☐ Cancellation		1 1966		10.00	RMATION							_
			F	ACILII	TINFO	KWATTON	Тур	e of Facility (4)					
me of Facility Where	Abatement is Taking Pla	ace (3)						School (K-12)	L than K 12\				
Princeton Univers	sity-Dillon Gym				•			Subchapter 8 (Of Other (i.e., privat	e and commercia	al building	gs,		
				- Can	nnue			homes, etc.)				-	
Elm Drive Princet	on, NJ -Princeton Ur	niversi	ty ivia	III Gai	приз		Sq	uare Feet #	f of Floors	Bldg. A	\ge		
ty (5)							1 2	214.000	8	68			_
Princeton	e de la companya de				ado (7)/9	TATE USE ON	VLY) Cu	rrent Use (Prior i	f being demolishe	ed)			
ounty (6)			C	ounty C	,ode (1)(3	TATE OUL O.	/	University Gyr	nnasium				_
Marcer					I N	Jame of Aha		Contractor (9)					
ame of Monitoring Fi	rm Hired by Building Ow	ner (8)		CM No.	1	AbateTe							
Cardno ATC			0	0098		Street Addre	100						
treet Address					1			PO Box 25					_
3 Terri Lane						City, State,							
City, State, Zip Code					,	Lumberl							
Burlington, NJ 0	8016					Telephone I			License No.				
Project Manager for N	Monitoring Firm			one No	190	609-265			00529				
Michael R. Keeh	n			386-8		Name of OS		nitor					
Start Date (10)  4 / 27	Schedu	led Con	npletio 31	n Date	16_	EMSL A	analytic					_	_
_4						Street Add							
	uring Abatement (Check	DU UL A	Datonik	ent		200 Rot							-
					ribe	City, State,	, Zip Coo	le					
Time of Abateme	nt:n	N/	_PM	A	IVI			NJ 08077					
Scope of Work (Che	ck all that apply)					⊠F	ull Conta	ainment with Neg	ative Pressure				
		⊠ Ren	ovatio	n			Mini-Enclo	Descending	62				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260</li> </ul>	f	☐ Der	nolition	١			Non-Exer	npted (*) and Nor	n-Friable Procedi	ure		T	_
		lo.	Location	on						Aba	iteme		J
No.		l N	Iormall	y	D. 19	Desc	cription o	f	Amount	Remova	Repair	Encapsulate	
Loc	eation of ining Material (ACM)		d Solel intenar		Asbe	estos Contai e., thermal s	ınıng Ma systems i	terial (ACM) insulation,	(Specify	NOU	air	sde	
TO BE	EABATED	Cust	interial codial S	Staff?	(1.6	surfaci	ing, VAI,	, or	SF or LF)	<u>m</u>		llate	
IN	Facility (13)		(12)			other mi	iscellane	ous)				10	
	(10)	Yes	No	N/A	Dina 9	fitting ins	sulation	1	100 LF				
Work Area #A6,						fitting In			200 LF				
Work Area #1A					100	nsulation			6,000 SF				]
Work Area #1A					100000000000000000000000000000000000000	nsulation			2,302				
Work Area #1B			-	1 1982 1110 1982 41	Waste	Cubic Ya		Name of Reg	istered Landfill				
Name of Registere AbateTech, Ir			ŀ	Hauler 1875	ID No.	Waste 40	I Dete	G.R.O.W.	S. Landfill				_
City, State		is sun lected				Disposa		Tullytowi	n. PA				
Lumberton, N	IJ					8/31/		Tunytown		Date			-
A SAME STATE OF THE SAME STATE		itle				Sig	gnature						
Completed By (Pr Gwendolyn T		Opera	tions	Coor	dinator								

------- antivities

DECEIVE!

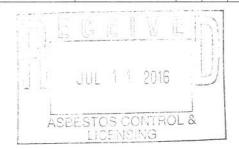
NOCK		NC	111					:60 and 5:16		11)-5		0 1		/_[	=-[
Date of Notification (1)					Name	of Building	g Ow	ner/Operator (	2)	11111					
6/	27 /	16			Tru	stees of	Prin	nceton	/ Job #1	504-4892 Ch	eck	1 1	<b>5</b> 20	16	L
Agencies Notified	Type Notific	ation			200-00000000000000000000000000000000000	t Address			7	L		4-1.5-			
⊠ EPA	☐ Initial				Tru	stees of	Prin	ceton Unive	rsity E.A. Mad	Millan Bldg.	STOS	00	INT	101	18
⊠ DOLWD		_				State, Zip C			- 1		LICE	VSI	NG.		
☑ DHSS ☑ DCA	Amendm	0.50			Pri	nceton, N	J O	8544							
(NJAC 5:23-8)	☐ Emerger justificat		ing			of Contact				Telephone N	Vumbe	r			
(110/10 0.20 0)	☐ Cancella				Rol	bert Orte	חח	PF		609-258-					
		*			200000			RMATION		000-200-	1041		=		
Name of Facility Where A	batement is	Taking Pla	ce (	(3)	1,000		-		Type of Facility	(4)					
Princeton Universit				( - <i>)</i>					School (K-1)	3.5					
Street Address	,,				III.				Subchapter     Subchapter		K-12)				
Elm Drive Princetor	N I Drine	oton IIn		:4	Main	Commun			Other (i.e., p		nmerci	al bu	ilding	IS,	
	1, 140 - 11110	eton on	ive	iSity	IVIAIII	Campus			homes, etc.	<u> </u>		1-2			
City (5) Princeton									Square Feet	# of Floors			dg. A	ge	
									214,000	8			68		
County (6)					Cour	nty Code (7	)(STA	ATE USE ONLY)	Current Use (Pr	rior if being der	molishe	ed)			
Mercer									University	Gymnasium					
Name of Monitoring Firm	Hired by Buil	ding Own	er (8	3)	ASCM	No.	Na	me of Abateme	ent Contractor (9)	)					
Cardno ATC					0009	98	1	AbateTech, In	nc.						
Street Address			2.2				Str	eet Address							
3 Terri Lane							3	0 Maple Ave	. PO Box 25						
City, State, Zip Code								y, State, Zip Co							
Burlington, NJ 0801	6							umberton, N							
Project Manager for Moni				Tele	phone	No		ephone No.	10 000-10	License No					
Michael R. Keehn	tornig i nini				Ni Nama	-8800	-0.1	09-265-2107		00529	J.				
Start Date (10)	- 1	Cohodulos								00529					
4 /27 /		Scheduled						me of OSHA M							
		Liver -			_ ′ -	16	-	MSL Analyti	icai						
Occupancy Status During							Stre	eet Address							
☐ Facility Closed/Vacate						On 1987 1987 1987	2	00 Route 13	0 North						
Abatement Performed							City	y, State, Zip Co	ode						
Time of Abatement:	AIVI	PIVI/		PIVI-		AIVI	C	innaminson	, NJ 08077						
Scope of Work (Check all	that apply)														
≥3 sf or ≥3 If		F7	_	311 - 194					ainment with Ne	gative Pressure	е				
≥160 sf or ≥260 lf				ovati				☐ Mini-Encl	losure g Procedure						
			2011	iontic	11			☐ Non-Exer	mpted (*) and No	n-Friable Proc	edure				
			Is L	ocat	ion							Ab	atem	ent T	vne
Location				ormal				Description of	f		-		_		T
Asbestos-Containing N		1)		Sole itena	ly by			Containing Mat		Amount	- 1	Removal	Repair	inci	Enclosure
TO BE ABA		100			Staff?	(i.e.		ermal systems i surfacing, VAT,		(Specify SF or LF)		100	음	aps	uso
(13)	y			(12)				her miscellane		SF UI LF	,	<u>m</u>		Encapsulate	le le
		Ye	s	No	N/A									O	
Work Area #1C,1D & 1	1E First Flo	or			$\boxtimes$	Pipe & f	ittir	g insulation		200 LF		$\boxtimes$			
	Area #1C,1D & 1E First Floor							tion		17,025 S	F				
Work Area #1C,1D & 1	IE First Flo	or $\square$				Insulate	d R	oof Drain Pi	ping	400 LF		$\boxtimes$			
Basement- Bleachers	under poo	ı 🗆				Pipe Ins	ula	tion		30 LF					
Name of Registered Wast	e Hauler			N.	JDEP \	Waste	Cub	oic Yards of	Name of Regis	stered Landfill					
AbateTech, Inc.					auler II 18750		Was		G.R.O.W.S						
City, State					.0.00			posal Date	City, State						2000000
Lumberton, NJ							8	/31/16	Tullytown,	PA					
Completed By (Print or Ty	pe)	Title	-					Signature			Date				
Gwendolyn Trumbet			tio	ne C	'oordi	nator		oignatule			Date				
CWelldolyll Trullibel		Opera	LIO	115	Joordi	iiatUI									

NOCK		N	011				-	STOS ABAT :60 and 5:10								
Date of Notification (1)				-	Name	e of Building	y Ow	/ner/Operator (	2)	1	JUL	11	20	16		4
6/	27 /	16	-			ustees of				#150	4-4892 Che	eck#		6		
Agencies Notified	Type Notific	cation			Stree	t Address					ASBESTO	SCO	NT	ROI	2	
⊠ EPA	☐ Initial				Tru	stees of	Prir	ceton Unive	rsity E.A. N							
☑ DOLWD ☑ DHSS		-			City,	State, Zip C	ode									
☑ DRSS	Amendm  Emerger		dina		Pri	nceton, N	J O	8544								
(NJAC 5:23-8)	justificat		unig		Name	of Contact	t				Telephone N	lumber		Marie .	-	_
	☐ Cancella	ition			Ro	bert Orteg	go, l	P.E.			609-258-1					
					FA	CILITY IN	FOF	RMATION								
Name of Facility Where A	batement is	Taking Pl	lace	(3)					Type of Fac	ility (4	)					
Princeton Universit	y-Dillon Gy	/m							School (F	(-12)						
Street Address	7										Other than K		1	ran a	121	
Elm Drive Princetor	n, NJ -Princ	eton Ur	nive	rsity	Main	Campus			homes, e		ate and com	merciai	DUI	iaing	IS,	
City (5)									Square Feet		# of Floors		Bld	g. A	ge	
Princeton									214,000		8		6	8		
County (6)					Cour	nty Code (7)	)(STA	ATE USE ONLY)	Current Use	(Prior	if being dem	nolished	i)			
Mercer								******	Universi	ty Gy	mnasium					
Name of Monitoring Firm	Hired by Buil	ding Owr	ner (8	3)	ASCM	No.	Na	me of Abateme	ent Contractor	(9)						- Viet
Cardno ATC					0009	98	A	AbateTech, In	nc.							
Street Address							Str	eet Address								
3 Terri Lane							3	0 Maple Ave	. PO Box 2	5						
City, State, Zip Code							City	y, State, Zip Co	ode							
Burlington, NJ 0801							L	umberton, N	J 08048							
Project Manager for Moni	toring Firm			Tele	phone	No.	Tel	ephone No.			License No.			=1=2		
Michael R. Keehn				. 82		-8800	6	09-265-2107			00529					
Start Date (10)	DOM: 1	Schedule					Nar	me of OSHA M	onitor							
4 /27 /	15_	8	_ /	31	_ / .	16	Е	MSL Analyti	ical							
Occupancy Status During							Stre	eet Address		T 14 7						
☐ Facility Closed/Vacate							2	00 Route 13	0 North							
Abatement Performed	Outside of N	ormal Fa	cility	Hour	s - Des	scribe	City	y, State, Zip Co	de			2				
Time of Abatement:		PIVI/		_PIVI-		AIVI	С	innaminson	, NJ 08077							
Scope of Work (Check all	that apply)							D="0								
≥3 sf or ≥3 If		$\boxtimes$	Ren	ovati	on				ainment with	Negat	ive Pressure					
≥160 sf or ≥260 lf			Den	nolitic	in			Glovebag	Procedure							
			1-1	6			_	☐ Non-Exer	mpted (*) and	Non-	Friable Proce					
Location	of			Locat orma				Description of				/	_	-	ent T	ype
Asbestos-Containing N	Naterial (ACN	1/		Sole		Asbes	stos	Containing Mat			Amount	20	0	Repair	Enc	Enc
TO BE ABA				ntena ndial S	nce/ Staff?		, the	rmal systems i	nsulation,		(Specify	Kemova		pair	aps	Enclosure
(13)	у			(12)	Juli .			surfacing, VAT, her miscellaned			SF or LF)	5	2		Encapsulate	ure
		Ye	es	No	N/A				,						e	
Work Area #B1A: B1 I						Pipe & f	ittin	g insulation			600 LF	D	3			
Work Area #B1A: B1 I	evel Pipe					contami	inat	ed soil			450 CF	D		П	П	
Tilhhalicrawi enace		$\neg \vdash_{\Gamma}$	1							+			7		$\overline{\Box}$	
				$\overline{\Box}$						+			-			
Name of Registered Waste	e Hauler			=_	JDEP V	Vaste	Cuh	oic Yards of	Name of Re	egister	red Landfill		_			
AbateTech, Inc.				Н	auler ID	No.	Was	ste	G.R.O.W							
City, State					18750		Disp	oosal Date	City, State							_
Lumberton, NJ								/31/16	Tullytov	vn, P	A					
Completed By (Print or Ty	oe)	Title						Signature		3.27.11		Date	-			_
Gwendolyn Trumbet	ti	Oper	atic	ns C	oordi	nator						E18394-\$-58				

## State of New Jersey Check #8141 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1504-4892 Page 7 of 7

Location of Asbestos-Containing	2000	Locat		Description of Asbestos-Containing	Amount (Specify	Aba	atem	ent T	уре
Material (ACM) TO BE ABATED in Facility (13)	S Main	olely l itenan	by	Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	SF or LF)	Removal	Repair	Encapsulate	Enclosure
Work Area #A7, A Level				Duct Insulation	270 SF				
Work Area #A7, A Level				Pipe & Pipe Fitting Insulation	20 LF				
Work Area #A8				Duct Insulation	2,675 SF				
Work Area #A9				Duct Insulation	2,675 SF				
Work Area #A10, A Level				Pipe & Fitting Insulation	150 LF				
Work Area #A10, A Level				Duct Insulation	350 SF				
Work Area #2A, Second Floor Attic				Pipe & Fitting Insulation	200 LF				
Work Area #2A, Second Floor Attic				Duct Insulation	3,360 SF				
Work Area #2A, Second Floor Attic				Insulated roof drain piping	100 LF				
			$\boxtimes$						
			$\boxtimes$						



Date of Notification (1)						Owner/Operator (2	-/	ノー				
6/	27 / 16	_		NJ D	PMC/ Jo	ob # 1509-4949	Check #8011	Page 1 of 3	1 2	016		
Agencies Notified	Type Notification			Street A	ddress		įį	1 -			1	
⊠ EPA	☐ Initial			PO B	ox 034				001	TE	31 8	
□ DOLWD	☐ Amended			City, Sta	ate, Zip Co	ode		ASBESTOS	NELL	13		
□ DHSS	Amendment #9	alian as		Trent	ton, NJ (	08625		(_1\(\cdot\))				
☐ DCA (NJAC 5:23-8)	☐ Emergency (incl justification)	uaing	t	Name o	f Contact			Telephone Number	er			
(NJAC 3.23-0)	☐ Cancellation			Scott	Fertig			908-241-4177				
				FACI	LITY IN	FORMATION					10000	
Name of Facility Where A	Shatement is Taking	Place	(3)	17.0.			Type of Facility (	(4)				
NJ Training School			(-)				School (K-12	)				
Street Address	Tor Boys		-				Subchapter 8	(Other than K-12) ivate and commerc	اندا ادرا	dinae		
1 State Street							homes, etc.)		iai buli	unigo	•	
		_					Square Feet	# of Floors	Bldg	g. Age	9	
City (5) Jamesburg, NJ												
				County	v Code (7	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ied)			
County (6) Middlesex				oount,	,	,,	Training Sc					
Name of Monitoring Firm	Hirad by Building O	wner (	8)	ASCM N	lo	Name of Abateme	ent Contractor (9)					
Environmental Cor		wiici (	, ,	1001111		AbateTech, I						
	mechon					Street Address						
Street Address 120 North Warren	Stroot					30 Maple Ave	e. PO Box 25					
	Street					City, State, Zip C	200//2012					
City, State, Zip Code						Lumberton,						
Trenton, NJ 08608	n		-Tolo	phone N	lo.	Telephone No.		License No.				
Project Manager for Mor	nitoring Firm		1 7	9-392-		609-265-2107	7	00529				
Dominic Derricole	Calvad	ulad C		tion Date	1	Name of OSHA						
Start Date (10)  10 / 21 /	1			/ _		EMSL Analys						
					<del>/-</del> _	Street Address	XX 2.5 XV					
Occupancy Status Durin	g Abatement (Check	only of	one) Aboto	mant		200 Route 13	30 North					
☐ Facility Closed/Vacat	ted During Entire Per	Facility	Abate	ment rs - Desc	cribe	City, State, Zip C	AND THE RESIDENCE OF THE PARTY		_	-		_
Time of Abatement:	AM- PN	1 aciii. N	PM-	- J	AM	Cinnaminson						
						Cilitaniniso	11, 140 00077					
Scope of Work (Check a	all that apply)					☐ Full Cor	ntainment with Ne	gative Pressure				
≥3 sf or ≥3 lf		⊠ Re				☐ Mini-En						
≥160 sf or ≥260 lf		∐ De	moliti	on			ag Procedure empted (*) and No	on-Friable Procedur	e			
		le	Loca	tion					1 222	ateme	ent Ty	уре
Locatio	n of		Norma			Description	of		R	R	Ш	Ш
Asbestos-Containing				ely by	Asbe	estos Containing M	laterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE AB			intena todial	Staff?	(i.e	e., thermal systems surfacing, VA		(Specify SF or LF)	oval	=	nsd	Sur
IN Fac (13)			(12)			other miscellan					ate	to
(,		Yes	No	N/A								
Wilson School Bldg	. #3		$\boxtimes$		Plaste	r		<25 SF				
Wilson School Bldg	. #3		$\boxtimes$		Pipe F	itting Insulation		60 LF				
Carpentry Shop Blo	lg. #35		$\boxtimes$		Floor t	ile & Mastic		325 SF				
Carpentry Shop Blo	lg. #35		$\boxtimes$		Pipe F	itting Insulation		40 LF				Ш
Name of Registered Wa	aste Hauler	-///		NJDEP \ Hauler II		Cubic Yards of Waste		istered Landfill				
AbateTech, Inc.				18750		32	G.R.O.W.	S. Landfill				
City, State						Disposal Date	City, State					
Lumberton, NJ					(	8/31/16	Tullytown	ı, PA				
Completed By (Print or	Type) Title	е				Signature	CN 00	Di	ate 1		( ,	. 0
Gwendolyn Truml	1 TO THE RESERVE OF T	pera	tions	Coord	inator		OWY	1	191	171	11	U
ASB-41		•				ata a lianna arra	moted activities		V	(	1	
****/ 4.4	*	Do no	f iise	this form	tor asbe	stos licensure exer	ripteu activities.					

Date of Notification (1)				Nar	me of Ruildi	ng Owner/Operator	(2)	111				
	/ _1	6				Job # 1509-4949		Page 2 of 3	1 /	2016		Na.
	Notification	n			eet Address			- L				
<ul><li>☑ EPA</li><li>☑ Init</li><li>☑ Am</li></ul>				P	O Box 03	4	i i	ASBESTOS			)L 8	L
D	endment :	#9		City	, State, Zip	Code		LICE	VIIION	(3		-
□ DCA □ Em	ergency (i		na	Т	renton, N	J 08625						
(NJAC 5:23-8) just	tification)			Nan	ne of Conta	ct		Telephone Nu	mber			_
	ncellation			S	cott Ferti	9		908-241-4				
				F.	ACILITY II	NFORMATION	The second second					
Name of Facility Where Abateme	nt is Takir	ng Pla	ce (3)				Type of Facility	(4)				
NJ Training School for Bo	ys						School (K-1					
Street Address							☐ Subchapter	8 (Other than K-	(2)			
1 State Street							homes, etc.	orivate and comm	ercial	buildi	ngs,	
City (5)							Square Feet	# of Floors		Bldg.	Δαο	_
Jamesburg, NJ										Diag.	Age	
County (6)				Cou	unty Code (	7)(STATE USE ONLY)	Current Use (Pr	rior if being demo	lished	)		-
Middlesex							Training So		orrou,			
Name of Monitoring Firm Hired by	Building	Owne	(8)	ASCN	Л No.	Name of Abatem						_
Environmental Connection	1					AbateTech, I						
Street Address						Street Address					il ester	_
120 North Warren Street						30 Maple Ave	. PO Box 25					
City, State, Zip Code						City, State, Zip Co						_
Trenton, NJ 08608						Lumberton, N						
roject Manager for Monitoring Fir	m		Tel	ephone	No.	Telephone No.		License No.				_
Dominic Derricole			6	09-39	2-4200	609-265-2107		00529				
Start Date (10)	Sched	duled (	Comple	etion D	ate (11)	Name of OSHA M	onitor	00020		1000		_
				1_ /	16_	EMSL Analyti	cal					
occupancy Status During Abateme	ent (Check	k only	one)		/	Street Address						_
Facility Closed/Vacated During	Entire Pe	riad of	Abate	ment		200 Route 13	) North					
Abatement Performed Outside	of Normal	Facili	y Hou	rs - De	scribe	City, State, Zip Co					-	5
Time of Abatement:AM-		VI/	PM		_AM	Cinnaminson						
cope of Work (Check all that appl	y)					,						
☑ ≥3 sf or ≥3 If ☑ ≥160 sf or ≥260 If		⊠ Re	enovati emolitio	ion on		☐ Mini-Encl	Procedure	ative Pressure n-Friable Procedu				
		Is	Locat	ion			ipied ( ) and Noi	i-Filable Procedu				_
Location of			Norma ed Sole			Description of				oatem	1	
Asbestos-Containing Material (A	ACIVI)	Ma	intena	nce/	Asbes	tos Containing Mat	erial (ACM)	Amount	Remova	Repair	Enc	
IN Facility		Cus	todial	Staff?	(i.e.	, thermal systems ir surfacing, VAT,	isulation,	(Specify SF or LF)	3701	a:	aps	
(13)	ŀ	Yes	(12) No	N/A		other miscellaneo	us)	Or Or Ery	=		Encapsulate	
arpentry Shop Bldg. #35			No No	N/A	Dobrio	·					(D	
ottage #10					Debris C			5 cy				
tic						ing Insulation		8 LF				
ilson School #3						d Pipe Insulation	1	20 LF				
me of Registered Waste Hauler						& Mastic		190 SF	$\boxtimes$			1
AbateTech, Inc.			Ha	JDEP V	No.	Cubic Yards of Waste	Name of Register G.R.O.W.S.					_
ty, State				18750		32 Disposal Date		Lanum				
_umberton, NJ							City, State					
mpleted By (Print or Type)	Title	- 2			V	8/31/16/	Tullytown, F	A				
Gwendolyn Trumbetti	1.0000000	0 404.				Signature		Da	le .	1		_
-41	Ор	eratio	טווט C	oordii	nator	U	MA	The state of the s	117	71	16	1

	10		1.	uiouc	10 1407	AC 8:60 and 5:1	·)	11-15-15	= 1)	12/	LS	111
Date of Notification (1)				Nam	e of Buildin	ng Owner/Operator	(2)	<del>1</del>			e .	
6/	/	16		N	J DPMC/	Job # 1509-4949	Check #8011	Page 3 of 3	112	2016		
Agencies Notified	Type Notifica	ation			et Address		i				- 1	
⊠ EPA ⊠ DOLWD	☐ Initial			P	D Box 034	1	ļ	ASSESTOS	001	TDS		
⊠ DHSS				City,	State, Zip	Code	Ĺ	LIGH	MSIN(	J TRO	<u> </u>	
□ DCA	☐ Emergen		na	Tr	enton, NJ	08625			6,711.47			
(NJAC 5:23-8)	justification		ig	Nam	e of Contac	ot .		Telephone Nur	mber	-		
	☐ Cancellat	ion		Sc	ott Fertig	I		908-241-41				
				F/	CILITY IN	NFORMATION						
Name of Facility Where	Abatement is T	aking Plac	ce (3)			0.1	Type of Facility	(4)				-
NJ Training School	I for Boys						School (K-12					
Street Address							☐ Subchapter 8	(Other than K-1	2)			
1 State Street							Other (i.e., piece)     homes, etc.)	rivate and comm	ercial b	uildin	gs,	
City (5)							Square Feet	# of Floors	Tr	01d~ A		
Jamesburg, NJ							Square Feet	# OI FIOOIS	-	3ldg. A	ge	
County (6)				Cor	inty Code (7	7)(STATE USE ONLY)	Current Use (Pri	ior if boing dome	liobod\			
Middlesex					, 0000 (/	HOWITE GOT ONE!	Training Sci		iisrieu)			
Name of Monitoring Firm	Hired by Build	ling Owner	(8)	ASCN	1 No	Name of Abateme	1 270					
Environmental Cor		g omic	(0)	71001	1140.	AbateTech, I						
Street Address							nc.					
120 North Warren S	Street					Street Address	DO D - 05					
City, State, Zip Code						30 Maple Ave						
Trenton, NJ 08608						City, State, Zip Co						
Project Manager for Mon	itoring Firm		I Tal		Al-	Lumberton, N	1J 08048					
Dominic Derricole	normg r mm			ephone	No. 2-4200	Telephone No.		License No.				
Start Date (10)	10	cheduled (				609-265-2107		00529				
10 / _21 /					16	Name of OSHA N						
		1			10	EMSL Analyt	cai					
Occupancy Status During  Facility Closed/Vacate	Abatement (C	neck only	one)	/	7	Street Address						
☐ Abatement Performed	Outside of No.	rmal Facili	ty Hou	ment re Do	coribo	200 Route 13						
Time of Abatement: _	AM	PM/_	PM	- -	AM	City, State, Zip Co						
Scope of Work (Check al					-	Cinnaminson	, NJ 08077					
≥3 sf or >3 If		₽ D				☐ Full Cont	ainment with Neg	ative Pressure				
☐ ≥160 sf or ≥260 lf			enovat emoliti			☐ Mini-Encl						
		_		7.1.0		Non-Exer     Non-Exer	npted (*) and Nor	n-Friable Procedu	ure			
			s Loca							patem	ent T	Type
Location Ashestos Containing			Norma ed Sole			Description of						1 2000
Asbestos-Containing I TO BE ABA		Ma	aintena	ince/		stos Containing Mat , thermal systems i		Amount	Removal	Repair	Encapsulate	Enclosure
IN Facilit	ty	Cus	todial	Staff?	(1.0.	surfacing, VAT,		(Specify SF or LF)	ova	=	psu	nusc
(13)		Voc	(12)	N1/A	-	other miscellaned	ous)	- Complete (CO 2000 € 1			late	G.
45 D		Yes	No	N/A								
15 Rooms at unit ven	t locations				Floor til	е		148 SF				
											П	In
		П										+=
				1					$\perp$		Ц	
Name of Death and												
Name of Registered Wast	e Hauler		31 323	JDEP \ auler II	Will Street and Street	Cubic Yards of	Name of Registe					
AbateTech, Inc.				18750		Waste 12	G.R.O.W.S.	Landfill				
City, State					/	Disposal Date	City, State					
Lumberton, NJ						8/31/16	Tullytown, F	PA				
Completed By (Print or Ty	pe)	Title				Signature			ate		1,00719	
Gwendolyn Trumber	tti	Operat	ions (	Coordi	nator	1	hna	D.	/ 1	2	11	11.
SB-41							1 1 1 1		111	11	11	· V

MAY 11

Date of Notification (1)					Name	of Building	Owi	ner/Operator (2	2)	1111 8 8	0060		1 5	.1
6 /	27 /	16	_		Res	orts Inte	rnat	ional Casino	s /Job#1601-4	984 Check#787	Pe	i.1 o	1.2	
Agencies Notified	Type Notifica	ation			Street	Address								
⊠ EPA	☐ Initial				113	3 Boardw	valk		Ā	SBESTOS CO:		JL 8		
⊠ DOLWD					City, S	state, Zip C	ode			LIGHTYEN	<u> </u>			
☑ DHSS ☐ DCA	Amendme Emergen		udina		Atla	ntic City	, NJ	08401-7329						
(NJAC 5:23-8)	justification	on)	uuiiig		Name	of Contact				Telephone Numb	er			
,	☐ Cancellat	tion			Kat	hy Cham	berl	in		609-340-7704	Ļ			
			-31		FAC	CILITY IN	FOR	RMATION						
Name of Facility Where A	Abatement is T	Taking F	Place (	3)					Type of Facility	(4)				
Resorts Hotel & Ca	sino- Ocear	1 Towe	er						School (K-12					
Street Address	Virginia -									(Other than K-12) rivate and commerc		ilding		
1133 Boardwalk									homes, etc.)		Jai Di	manie	13,	
City (5)									Square Feet	# of Floors	BI	dg. A	ge	
Atlantic City														
County (6)					Coun	ity Code (7)	(STA	TE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
Atlantic								**	Hotel & Cas	ino				
Name of Monitoring Firm	Hired by Build	ding Ow	vner (8	)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)					
Health & Safety Ser	vices						Α	bateTech, Ir	ıc.					
Street Address				-		SALUKTINS.	Stre	eet Address						
PO Box 365							3	0 Maple Ave	. PO Box 25					
City, State, Zip Code							City	, State, Zip Co	ode					
Berlin, NJ 08009							L	umberton, N	IJ 08048					
Project Manager for Moni	itoring Firm			Tele	phone	No.	Tele	ephone No.		License No.				
James Proctor				_8.5	6-452	-1311	6	09-265-2107		00529				
Start Date (10)		Schedul	led Co	mple	tion Da	te (11)	Nar	me of OSHA M	onitor					
/18 /	16(	8	_ /	31	_ / _	16	Е	MSL Analyti	cal					
Occupancy Status During	Abatement (	Check-c	only-or	ie)—			Stre	eet Address						
☐ Facility Closed/Vacate	ed During Entir	re Perio	od of A	bater	nent		2	00 Route 13	0 North					
Abatement Performed			5.5			5.20.00	City	, State, Zip Co	ode					
Time of Abatement: _	AIVI	PIVI/		-PIVI-		AM	С	innaminson	, NJ 08077					
Scope of Work (Check all	that apply)						3.	□ F   Cont	ainment with Nan	enti de Dennadora				
≥3 sf or ≥3 lf		D	⊠ Ren	ovati	on			☐ Mini-Encl	ainment with Neg losure	lative Pressure				
≥160 sf or ≥260 lf			] Den	olitic	n			Glovebag						
			1-1					Non-Exer     Non-Exer	mpted (*) and No	n-Friable Procedure	1			
Location	of			.ocat orma				Description o			Ab	atem		
Asbestos-Containing I		1)	Used	Sole	ly by	Asbes	stos (	Containing Ma		Amount	Rer	Repair	Enc	Enc
TO BE ABA			Mair		nce/ Staff?	(i.e.		rmal systems i		(Specify	Removal	air	aps	Enclosure
IN Facilit (13)	.y		Odote	(12)	Julii.			urfacing, VAT, ner miscellane		SF or LF)	<u>m</u>		Encapsulate	IГе
Y			Yes	No	N/A								a	
2 <sup>nd</sup> Floor- 59 Bathroo	ms (30 SF p	er [				Mastic A	Asso	ociated with	ceramic tile	1,770 SF total			П	П
3rd Floor- 56 Bathroom	ms (30 SF p	er			П	Mastic A	Assc	ociated with	ceramic tile	1,680 SF total			П	
4th Floor- 60 Bathroom	ns (30 SF p	er r							ceramic tile	1,800 SF total		П		
5th Floor- 58 Bathroom		L												
hathroom)	100	ا ا			IDED.				ceramic tile	1,740 SF total		Ш	Ш	Ш
Name of Registered Wast AbateTech, Inc.	te Hauler			1000	JDEP V auler ID		Was	oic Yards of ste	Name of Regis G.R.O.W.S					
City, State					18750	)		Oncal Data		. Landiii				
Lumberton, NJ							(	oosal Date /31/16	City, State Tullytown,	PA				
Completed By (Print or Ty	(ne)	Title						Signature	,	Dat	0	rac.	1	-01-00
Gwendolyn Trumbe	5.00		aratio	ne (	Coordi	nator		Signature	ami	- Dai	1	17	7/1	11
- wendonyn mumbe	LLI	Ob	erauc	115	Joordi	IIatul			9/11/11		4	12	111	V

Date of Notification (1)				Nai	ne of Build	ina O	wner/Operator	(2)	12/					- 1	
6 /	27 /	16					ational Casin		601-49	984 Check	#787	0 <sup>2</sup> P	G.2 (	of 2_	
	Type Notific	ation		Stre	et Address	3			1					-	
F7	☐ Initial			1	133 Boar	dwal	lk		L A	SBESTOS	5.00	INTE	ROL	2	1
☑ DOLWD		5.4		City	, State, Zip	Cod	е		F.1	LIJE					$\rightarrow$
			lina	A	tlantic Ci	ty, N	IJ 08401-7329	9							
(NJAC 5:23-8)	justificati	ion)	mig		ne of Conta	200				Telephone	Numb	er			
	☐ Cancella	tion		K	athy Cha	mbe	rlin			609-340					
				F	ACILITY	NFC	RMATION					-			
Name of Facility Where Ab				)				Type of Fa	cility (4	1)				-	
Resorts Hotel & Casi	ino- Ocear	n Tower						☐ School							
Street Address 1133 Boardwalk								Other (i	.e., pri	(Other than vate and cor	K-12) nmer	cial b	uildin	gs,	
City (5)								homes,		I # 6 E					
Atlantic City								Square Fee	et	# of Floors	>	В	ldg. A	.ge	
County (6)				Co	unty Code	(7)(ST	TATE USE ONLY)	Current Us	e (Prio	r if being der	molish	ned)			
Atlantic								Hotel &							120
Name of Monitoring Firm H		ding Owne	er (8)	ASC	M No.	Na	ame of Abateme	ent Contracto	or (9)						
Health & Safety Serv	ices						AbateTech, I	nc.							
Street Address						St	reet Address								
PO Box 365						-	30 Maple Ave	e. PO Box 2	25						
City, State, Zip Code						Ci	ty, State, Zip Co	ode							
Berlin, NJ 08009							Lumberton, N	NJ 08048							
Project Manager for Monito	ring Firm		T	elephon	e No.	Te	elephone No.			License No	0.				
James Proctor					2-1311	(	609-265-2107	U)		00529					
Start Date (10)1 /18 /		Scheduled			2.5		ame of OSHA M								
				31_ /	16		EMSL Analyt	ical							
Occupancy Status During A						Sti	reet Address								
☐ Facility Closed/Vacated☐ Abatement Performed O	During Entir	e Period	of Aba	itement	o o vila o		200 Route 13	COLUMN TO SERVE							
Time of Abatement:	AM	PM/	П Р	M-	AM		ty, State, Zip Co								
Scope of Work (Check all th						(	Cinnaminson	i, NJ 08077	1						
≥3 sf or ≥3 lf		M	Renov	ation			Full Cont	ainment with	Nega	tive Pressure	е				
≥160 sf or ≥260 lf			Demol				☐ Mini-Enc	osure Procedure							
					37, 391,		⊠ Non-Exer	mpted (*) and	d Non-	Friable Proc	edure				
landin s			Is Loc Norn									Ab	atem	ent T	уре
Location of Asbestos-Containing Ma		U		olely by	Ach	actoc	Description of Containing Mat			٨		Z.	Z.	Щ	Ш
TO BE ABATE	<u>D</u>	l N		nance/			ermal systems i			Amount (Specify		Remova	Repair	ncap	nclo
IN Facility (13)		Cl	1510012	al Staff? 2)			surfacing, VAT,			SF or LF)		val		Encapsulate	Enclosure
(10)		Yes		1		OL	ther miscellaned	ous)						ate	
6th Floor- 57 Bathrooms	s (30 SF p	er 🗆			Mastic	Ass	ociated with	ceramic til	le 1	1,710 SF to	otal		П	П	П
7 <sup>th</sup> Floor- Room 726					Mastic	Ass	ociated with	ceramic til		30 SF					
7 <sup>th</sup> Floor- Room 727					Mastic	Ass	ociated with	ceramic til	e	30 SF		$\boxtimes$			
												П		П	П
Name of Registered Waste I	Hauler			NJDEP	Waste	Cul	bic Yards of	Name of R	egiste	red Landfill					
AbateTech, Inc.				Hauler 1875			ste ·0	G.R.O.\							
City, State						Dis	posal Date	City, State							
Lumberton, NJ						8	/31/16	Tullyto	wn, P	A					
Completed By (Print or Type	)	Title					Signature	1			Date				
Gwendolyn Trumbetti		Opera	tions	Coord	linator										

ASB-41 MAY 11

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

### State of New Jersey

Ctate of New delacy	
NOTIFICATION OF ASBESTOS ABATEMENT	T
(Pursuant to NJAC 8:60 and 5:16)	

v								<b>'</b>	rsi:				1
Date of Notification (1)							ng Owner/Operator (	1.1	11111	11	20	16	
6/	30 /	16			P	oint Pleas	ant Beach School	ol District / Job	#1606-5022 C	heck	#828	35	
Agencies Notified	Type Notific	ation			Stre	et Address							
⊠ EPA	☐ Initial				29	9 Cooks	Lane		ASBESTO	S C(		ROL	. &
☑ DOLWD			t		City	State, Zip	Code		LIL	-EIVIO			
☑ DHSS ☑ DCA	☐ Emergen	_		1	P	oint Pleas	ant Beach, NJ 08	3742					
(NJAC 5:23-8)	justificati		Juding		Nan	e of Conta	ct		Telephone Num	ber			
	☐ Cancella	tion			M	ark McNa	mara		732-899-884	10			
					F	ACILITY II	NFORMATION		9				
Name of Facility Where	Abatement is 7	Taking	Place	(3)				Type of Facility (4	4)				
G. Harold Antrim S	chool							School (K-12)					
Street Address								☐ Subchapter 8 ☐ Other (i.e., pri			ildin	70	
401 Niblick Street								homes, etc.)	vate and comme	rciai Di	anding	30,	
City (5)		1137						Square Feet	# of Floors	В	ldg. A	ge	
Point Pleasant Bea	ich, NJ 0874	2											
County (6)					Co	unty Code (	7)(STATE USE ONLY)	Current Use (Price	or if being demolis	shed)			W. 1981
Ocean								School					
Name of Monitoring Firm	Hired by Build	ding O	wner (	(8)	ASCI	√l No.	Name of Abateme	ent Contractor (9)					
RJB Environmenta	I, Inc.				00	149	AbateTech, II	nc.					
Street Address							Street Address						
56 East Bridge Stre	eet						30 Maple Ave	e. PO Box 25					
City, State, Zip Code							City, State, Zip Co	ode					
Morrisville, PA 190							Lumberton, N	IJ 08048					
Project Manager for Mon	itoring Firm			-	lephon		Telephone No.		License No.				
Richard Beach						1-9212	609-265-2107		00529				
Start Date (10)		-		. 83,		ate (11)	Name of OSHA M						
7/5/		7			8 /	16	EMSL Analyti	ical					
Occupancy Status During							Street Address						
☐ Facility Closed/Vacate ☐ Abatement Performed							200 Route 13	TOTAL TOTAL					
Time of Abatement:						SCIDE	City, State, Zip Co						
							Cinnaminson	, NJ 08077					
Scope of Work (Check at	тпат-арріу)==						☐ Full Cont	ainment with Nega	ative Pressure				
≥3 sf or ≥3 lf			⊠ Re		0.0000000000000000000000000000000000000			losure					
☐ ≥160 sf or ≥260 lf		1	∐ De	moli	tion		☐ Glovebag	g Procedure mpted (*) and Non	-Friable Procedu	re			
			ls	Loc	ation			prod ( ) diid i toi.			atem	ent T	vne
Location	of				nally		Description o	f			_		
Asbestos-Containing		1)			olely by nance/	Asbe	estos Containing Ma	terial (ACM)	Amount	Remova	Repair	nca	nclo
TO BE ABA IN Facili	CONTRACTOR CONTRACTOR			odia	I Staff?	(1.6	e., thermal systems i surfacing, VAT,		(Specify SF or LF)	oval	=	Encapsulate	Enclosure
(13)	5	-		(12		-	other miscellane					late	е
			Yes	No	N/A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
(2) Team Rooms						Fitting	S		45 total				
			П							П		П	
						4							
Name of Decision 1997	es trout		Ц	Ц	N IDEE	1011	To the Vertical	Tale and the				Ш	
Name of Registered Was	te Hauler			- 1	NJDEF Hauler	Waste ID No.	Cubic Yards of Waste	Name of Registe					
AbateTech, Inc.					1875		20	G.R.O.W.S.	Landilli				
City, State							Disposal Date	City, State					
Lumberton, NJ							7/8/16	Tullytown, F	A				
Completed By (Print or Ty		Title					Signature	. 1	Da	ite /	_		
Gwendolyn Trumbe	etti	Op	erati	ons	Coor	dinator		M		01:	30/	16	
A CD 44		-						v \		-	_	-	

MAY 11

### NOCE

Date of Notification (1)					Name	of Building	Ow	ner/Operator (	2)		-			- 17				
6 /	27 /	16	_		Trustees of Princeton / Job #1304-4626 Check #8147													
Agencies Notified	Type Notifica	ation			Street	Address			14 1	VUL		0	South	4				
⊠ EPA	☐ Initial				Tru	stees of F	rin	ceton Unive	rsity E.A. Macl	Millan Bldg.								
⊠ DOLWD					City, S	State, Zip Co	ode			ASBESTOS (	CONTE	TOL	8					
☑ DHSS ☐ DCA	Amendm	_	udina		Prin	nceton, N.	SING											
(NJAC 5:23-8)	☐ Emergen justification		uamg		Name	of Contact	mber											
	☐ Cancellat				Rol	pert Orteg	10, F	P.E.		609-258-1841								
					FA	CILITY IN	FOF	RMATION										
Name of Facility Where A	batement is 7	Taking F	Place (3	3)					Type of Facility	(4)								
20 Washington Roa	d								School (K-12)									
Street Address	The state of the s		9270						Subchapter 8 (Other than K-12)									
20 Washington Roa	d, Princeto	n Univ	ersity	Ma	in Ca	mpus			Other (i.e., private and commercial buildings, homes, etc.)									
City (5)									Square Feet	# of Floors	В	dg. A	ge					
Princeton									1,000,000	5		85						
County (6)					Cour	nty Code (7)	(STA	TE USE ONLY)	Current Use (Pri	or if being demo	lished)							
Mercer									University									
Name of Monitoring Firm	Hired by Build	ding Ow	/ner (8)	Π.	ASCM	No.	Nar	me of Abateme	ent Contractor (9)	<u> </u>								
ATC Associates					0009	98	Α	bateTech, I	nc.									
Street Address			777				Stre	eet Address										
3 Terri Lane							3	0 Maple Ave	e. PO Box 25									
City, State, Zip Code							City	y, State, Zip Co	ode									
Burlington, NJ 0801	6						L	umberton, N	NJ 08048									
Project Manager for Moni	toring Firm			Tele	phone	No.		ephone No.		License No.								
Michael R. Keehn				_60	9-386	-8800	6	09-265-2107		00529								
Start Date (10)	15	Schedul	ed Cor	nple	tion Da	te (1,1)	Nar	me of OSHA M	lonitor									
2 /18 /	_16	8	/	31	/	16	Е	MSL Analyt	ical									
Occupancy Status During	Abatement (	Check o	nly on	e)—				eet Address										
☐ Facility Closed/Vacate					nent			00 Route 13	0 North									
Abatement Performed						cribe		, State, Zip Co										
Time of Abatement:	AM	PM/		PM-		AM		innaminson										
Scope of Work (Check all	that apply)						_		<u> </u>				_					
☐ >3 sf or >3 lf		Г	Reno	wati	on			☐ Full Conf	tainment with Neg	ative Pressure								
≥160 sf or ≥260 lf		Ĺ	Dem						g Procedure									
							Non-Exempted (*) and Non-Friable Procedure						ure					
				ocat							At	atem	ent T	уре				
Location Asbestos-Containing N		.	No Used	rmal Sole				Description o			R	Re	Щ	Ш				
TO BE ABA		1)	Maint	tena	nce/			Containing Ma rmal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure				
IN Facilit			Custo		Staff?	,,,,,	s	surfacing, VAT	, or	SF or LF)	val	-	lusc	sure				
(13)		-		(12)	T	-	oth	her miscellane	ous)				ate	(D				
Throughout				No	N/A	\A/:	0-											
		I						ulk and Glaz	zing	900 LF								
Exterior		1				Roof Fla				30 SF								
South Tower Lower R	oof			1		Roof Fla	shi	ng		100 LF								
		] [	] [						1									
Name of Registered Wast	e Hauler			10000	JDEP V			oic Yards of	Name of Regis	tered Landfill								
AbateTech, Inc.				Н	auler II 18750	)		2	G.R.O.W.S	. Landfill								
City, State					posal Date	City, State												
Lumberton, NJ						1	8/	/31/16	Tullytown,	Tullytown, PA								
Completed By (Print or Ty	pe)	Title			Signature					]	Date   Col.							
Gwendolyn Trumbe	tti	Оре	eratio	ns C	Coordi	inator		0.000	mit		U	12	111	1				

			(Pu	rsuan	t to NJA	C 8:60 an	d 5:16	5)	19 15 W	- U	127	Ξ.						
Date of Notification (1)	1000			Name	of Buildin	g Owner/Ope	erator (2	2)	1.71: 									
6 / 27 /	16					Princeton			502-4871 Chec	K#1	2016							
Agencies Notified Type Notifica	tion			Street	Address				11 000									
⊠ EPA ☐ Initial						Princeton	Unive	rsity F A Mac	Millan Bldg			-	2					
☑ DOLWD ☑ Amended				City S	State, Zip (	ode	Omve	ioity E.A. Mac	ASSESTO	S CO	NIR	UL	X					
□ DHSS Amendme	ent #3					J 08544		LICENSING										
□ DCA □ Emergen		uding							Talanhana Number									
(NJAC 5:23-8) justification					of Contac				Telephone Number									
Cancellat	ion				pert Orte				609-258-1841									
Name of Facility Where Abatement is T	aldaa D	21	(2)	FAC	CILITY IN	IFORMATI	ON	T F = - 1014										
The same of the sa		lace	(3)					Type of Facility										
Princeton University-Dillon Gy	m							School (K-1.	<sup>∠)</sup> 8 (Other than K-12	2)								
Street Address	N 1212	280485	5237		640			Other (i.e., p	rivate and comme		uilding	IS,						
Elm Drive Princeton, NJ -Prince	eton U	Inive	rsity	Main	Campus			homes, etc.										
City (5)							80	Square Feet	# of Floors	BI	dg. A	ge						
Princeton								214,000	8		68							
County (6)				Coun	ity Code (7	)(STATE USE	ONLY)	Current Use (P	rior if being demoli	shed)								
Mercer								University	Gymnasium									
Name of Monitoring Firm Hired by Build	ling Ow	ner (8	3)	ASCM	No.	Name of A	bateme	ent Contractor (9	)									
Cardno ATC				0009	8	AbateT	ech, Ir	nc.										
Street Address						Street Add	ress											
3 Terri Lane						30 Map	le Ave	e. PO Box 25										
City, State, Zip Code						City, State	, Zip Co	ip Code										
Burlington, NJ 08016							1. H.	NJ 08048										
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone			License No.									
Michael R. Keehn				9-386		609-265			00529									
Start Date (10)	chedule	ed Co				Name of O												
_5_/_2_/_16				/		EMSL A												
Occupancy Status During Abatement (0	Check o	nlv o	ne)-			Street Add	ress	110000										
☐ Facility Closed/Vacated During Entir						G10802-1419-0418-25-11002-201902-1		0 North										
Abatement Performed Outside of No					cribe	City, State						17						
Time of Abatement:AM	PM/_		_PM-		AM			, NJ 08077										
Scope of Work (Check all that apply)						o i i i i i i		,, 110 00077										
	W-1	2							Negative Pressure									
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			novati nolitio					nclosure ag Procedure										
△ ≥100 si 0i ≥200 ii	_	] Dei	ПОППС	)(1)		⊠ N	on-Exe	g Procedure mpted (*) and No	on-Friable Procedu									
		Is	Locat	ion				1		1	atem	ent T	vne					
Location of			ormal			Descr	iption o	of										
Asbestos-Containing Material (ACM	)		d Sole ntena					terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure					
TO BE ABATED IN Facility				Staff?	(1.€	e., thermal sy surfacin			(Specify SF or LF)	evo	H.	squ	nso					
(13)			(12)			other mis			Of Or Ery	_		ılate	ē					
	,	Yes	No	N/A								(D						
Work Area #WC1, A Level Shows	er [			$\boxtimes$	Pipe &	fitting insu	ulation	1	280 LF									
Work Area #WC1, A Level Restro	om [	7	П	$\boxtimes$	Pine &	fitting insu	ılation	1	100 LF		П	П						
A Level Locker Rooms/North Win	na r	=			Fire Do			•	29 total									
Rooms					THE DO	1015			25 total		片		늗					
	L		Ц									Ш	Ш					
Name of Registered Waste Hauler			100000	JDEP V auler ID		Cubic Yard Waste	is of	1	stered Landfill									
AbateTech, Inc.			171	18750		40		G.R.O.W.S	R.O.W.S. Landfill									
City, State			2/2	Disposal Date City, State														
Lumberton, NJ									wn, PA									
Completed By (Print or Type)				Signa	ture	/\ Date												
Gwendolyn Trumbetti	Оре	eratio	ons (	Coordi	inator		umt	1/10/7/11/										

-,					St	tate of Ne	w Jersey												
XINCK			NOTI				BESTOS AB C 8:60 and 5				ER.	[ ]	$\mathbb{V}$	7 [		7			
Date of Notification (1)					Name	of Building	Owner/Operate	or (	2)	115					+	+			
6 /	26 /	15	<del></del> 8				niversity-Offic			and 0	onstruction	ori 1	20	16		اراد			
Agencies Notified	Type Notific	ation			Street	Address									1				
☐ EPA					200	Elm Dr.	ASBESTOS CONTROL 8												
□ DOLWD					City, S	State, Zip C	ode					ENSI		HOL	čt				
□ DHSS	Amendm			1000	Prir	nceton, N	J 08544		,		LIO	LIVOII	vu						
DCA (NJAC 5:23-8)	☐ Emerger justificat		cluding			of Contact					Telephone Number								
(NJAC 5.25-6)	☐ Cancella	200 (200 -				pert Orteg					609-258-1841								
					FAG	CILITY IN	FORMATION												
Name of Facility Where A	batement is	Taking	Place	(3)				1	Type of Fa	cility (	4)								
Princeton Universit	y-Fireston	e Libi	rary						School			IZ 40)							
Street Address											(Other than I ivate and con		ıl bui	ildina	S.				
Washington Rd								Other (i.e., private and commercia homes, etc.)											
City (5)						11222			Square Fee	et	# of Floors	3	Bld	lg. Ag	je				
Princeton																			
County (6)					Cour	nty Code (7	(STATE USE ONL	Y)	Current Us	e (Prid	or if being der	molishe	d)						
MERCER									Library										
Name of Monitoring Firm	Hired by Bui	lding C	Owner (	8)	ASCM	No.	Name of Abatement Contractor (9)												
ATC Associates Inc							BRISTOL ENVIRONMENTAL, INC.												
Street Address							Street Address												
Three Terri Center							1123 BEAVER STREET												
City, State, Zip Code							City, State, Zip												
Burlington, NJ 0801	6						BRISTOL, PA 19007												
Project Manager for Moni	toring Firm		777	Tele	ephone	No.	Telephone No				License No	0.							
Michael Keehn				6	09-386	-8800	215-788-60	040			00509								
Start Date (10)		Sched	luled C	omple	tion Da	te (11)	Name of OSH	A N	Onitor										
7 / 6 /			N		106.		BRISTOL ENVIRONMENTAL, INC.												
Occupancy Status During	Abatement	(Check	c only o				Street Address	S											
☐ Facility Closed/Vacate					ment		1123 BEA		R STREET										
Abatement Performed Time of Abatement: 7	Outside of N	lormal	Facility	/ Hou	rs - Des	scribe	City, State, Zip	Co	ode										
Scope of Work (Check all		-					BRISTOL,	PA	19007										
Scope of Work (Check all	triat apply)									h Neg	ative Pressur	re							
≥3 sf or ≥3 lf     ≥3 sf or ≥3 lf			⊠ Re	novat moliti			⊠ Mini-l		losure p Procedure										
≥160 sf or ≥260 lf			Пре	HOIL	JII						n-Friable Prod	able Procedure							
			Is	Loca	tion								Aba	ateme	ent T	уре			
Location	of			Norma			Description	on o	of				R	R	Ш	Ш			
Asbestos-Containing I		M)			ely by ance/		stos Containing				Amount	t	em	Repair	nca	nclo			
TO BE ABA IN Facilit					Staff?	(i.e	, thermal system surfacing, V			0	(Specify SF or LF		Removal	=	Encapsulate	Enclosure			
(13)	y			(12)			other miscella					<b>'</b>			late	(Đ			
			Yes	No	N/A				···	_						<u> </u>			
Throughout Levels C	, B and A						e and mastic				2,035 S								
Level C North Atrium						Window	/S				14 ea					Ш			
Level A offices						Window	/S				20 ea					Ш			
Ext. Trustees Reading		$\boxtimes$			Waterpi			-		1300 SF									
Name of Registered Wast SERVICE TRANSPO		Waste D No.	Cubic Yards of Waste	f			tered Landfill LANDFILL												
City, State					20990	,	Disposal Date		City, State	9									
NEW CASTLE, DE									III - 57.33		LE, PA 190	067							
Completed By (Print or Ty		Signature	Signature / Date / /																
Brian Scafiro	Constitution of the Consti									Frian Scafino 1 7/8/16									
ASB-41 MAY 11 13 5/50 (										s.	1								

No	4			(F	Pursua	int to NJ	AC 8:60 and 5:1	6)	E EGE	B W		F	71					
Date of Notification (1)		100			Nam	e of Buildir	ng Owner/Operator	(2)	1 5 6950			1	-111					
6/	26 /	1	5				University-Office		Construction	4 00	140							
Agencies Notified	Type Notif	ication	ľ.		Stre	et Address		- 111	JUL 1	7 21	Hp	1	-					
☐ EPA  ☑ DOLWD	☑ Initial ☑ Amend	ba			20	0 Elm Dr	•	14	h:3.1									
☑ DHSS	Amend		±14_7/8	3/16	City,	State, Zip	CON	THO	L &									
☐ DCA	☐ Emerge				Pr	inceton,	NJ 08544		ASBESTOS LICEN	ISIN	3							
(NJAC 5:23-8)	justifica	ition)		5	Nam	e of Conta	ct		Telephone Nur									
	☐ Cancel	ation				bert Orte			609-258-1841									
NI					F/	CILITY II	NFORMATION		*									
Name of Facility Where A				e (3)				Type of Facility (4)										
Princeton Universit	y-Firestor	ie Lib	rary					School (K-12)										
Street Address								Subchapter	8 (Other than K-1 private and comme	2) arcial h	uildin							
Washington Rd	-17-							homes, etc.		Ji Ciai L	dilaii	ys,						
City (5)								Square Feet	# of Floors	Е	Ildg. A	\ge						
Princeton																		
County (6) MERCER					Cou	nty Code (	7)(STATE USE ONLY)		rior if being demol	ished)		11000						
Name of Monitoring Firm	Hired by Bu	ildina	Owner	(8)	ASCM	l No	Name of Abateme	Library										
ATC Associates Inc		airig	Owner	(0)	ASON	1140.	그님 그 이 사이에 가장 된 맛이 되고 가장 없어 하지만 없었다.	VIRONMENTA										
Street Address							Street Address	VIICORMERTA	L, INC.									
Three Terri Center							1123 BEAVE	R STREET										
City, State, Zip Code							City, State, Zip Co											
Burlington, NJ 0801	6						BRISTOL, PA											
Project Manager for Monit	toring Firm			Tel	ephone	No.	Telephone No.		License No.									
Michael Keehn				6	09-386	8-8800	215-788-6040		00509									
Start Date (10)	74-5	Sched	duled C	ompl		ate (11)	Name of OSHA M	onitor										
		_	<u>O</u> N	-	HO		BRISTOL EN	VIRONMENTA	L, INC.									
Occupancy Status During							Street Address											
Facility Closed/Vacated	d During Ent	ire Pe	riod of	Abate	ement		1123 BEAVER	RSTREET										
Abatement Performed Time of Abatement: 7:	Outside of N	lormal	Facility	/ Hou	rs - Des	scribe	City, State, Zip Co	de										
		1 1411 0.	001 101	1.00	/\IVI		BRISTOL, PA	19007										
Scope of Work (Check all	that apply)						□ Eull Coate	oinmont with No.										
≥3 sf or ≥3 lf			⊠ Re				☑ Mini-Encl	ainment with Neg osure	jative Pressure									
≥160 sf or ≥260 lf			∐ De	moliti	on		☐ Glovebag											
			İs	Loca	tion	T	⊠ Non-Exer	inpled ( ) and No	n-Friable Procedu									
Location of	of		١	lorma	illy		Description of				atem		ype					
Asbestos-Containing M		A)		d Sol	ely by		stos Containing Mat	erial (ACM)	Amount	Removal	Repair	Enc	Enc					
TO BE ABAT IN Facility					Staff?	(i.e.	, thermal systems in surfacing, VAT,		(Specify SF or LF)	NOV	음	aps	Enclosure					
(13)				(12)			other miscellaneo		SF OI LF)	<u>n</u>		Encapsulate	ire					
D. I.			Yes	No	N/A							a						
B LEVEL SECURITY O	FFICE					PIPE IN	SULATION (WRA	AP & CUT)	20 LF									
C LEVEL						FLOOR	TILE & MASTIC		900 SF									
GREEN ROOF STAIR #	<del>*</del> 8					WATER	PROOFING		135 SF									
Green Roof						Waterpr	oofing		22 SF									
Name of Registered Waste				1333	JDEP V	CONTRACTOR OF THE PARTY OF THE	Cubic Yards of	Name of Regis	tered Landfill									
SERVICE TRANSPOR	RT GROUP	INC			20990	4 505500	Waste	G.R.O.W.S. LANDFILL										
City, State			4			Disposal Date	City, State											
NEW CASTLE, DE					MORRISVILLE, PA 190					067								
Completed By (Print or Typ	e)	Title	esea				Signature	1 1 1	. Da	te /	/							
Brian Scafiro	i(*	Es	timat	or			Brian &	lastino /-	f	7/8/	1/6	7						

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11.1							-
te-fig.							50

CF					4				1:					111				
Date of Notification (1)  6 /	30 /	16			Nam	e of Buildi bert Wo	ng Ov od J	wner/Operator ( ohnson Job#	2) 1606-5028 Chi	¢# 8362 JUL 1	1	2016		النا				
Agencies Notified	Type Notifica	ation			Stree	et Address Hardent			i de la companya de l	ASBESTOS	CON	ITR		Ì.				
⊠ DOLWD	☐ Amended	1								1 1:01-1	11315	<u>G_</u>						
⊠ DHSS	Amendme				110000000	State, Zip												
□ DCA		cy (ind	cluding	1				c, NJ 08901										
(NJAC 5:23-8)	justification				2.20	e of Conta			Telephone Number									
	☐ Cancellat	tion			Fa	ith Orsin	ni		732-249-1030									
					F/	CILITY	NFO	RMATION										
Name of Facility Where A	Abatement is 7	aking	Place	(3)					Type of Facility (4)									
RWJ Hospital									☐ School (K-12)									
Street Address									Subchapter 8 (Other than K-12)  Other (i.e., private and commercial buildings,									
ONE RWJ Place									homes, etc.)	ivate and comment	Jai Du	mumg	5,					
City (5)				-					Square Feet	# of Floors	Ble	dg. A	ge					
New Brunswick																		
County (6)					Cou	inty Code	(7)(ST	ATE USE ONLY)	Section Section Children	or if being demolish	ned)							
Middlesex									Hospital									
Name of Monitoring Firm	Hired by Build	ding C	wner (	(8)	ASC	No.	Na	ame of Abateme	ent Contractor (9)									
Omega Environme	ntal							AbateTech, li	nc.									
Street Address							St	reet Address										
280 Huyler STreet							1	30 Maple Ave	e. PO Box 25									
City, State, Zip Code		-					Ci	ty, State, Zip Co	ode									
S. Hackensack, NJ	07606							Lumberton, N	J 08048									
Project Manager for Mon				Те	lephone	No.	Te	elephone No.		License No.		-						
Geiser Fajardo	•			177.000		9-8700		609-265-2107		00529								
Start Date (10)	5	Sched	uled C	omp	letion D	ate (11)	Na	ame of OSHA M	lonitor									
7 / 5 /	2000000			1150		16		EMSL Analyt	ical									
Occupancy Status During		-						reet Address										
☐ Facility Closed/Vacate					oment		1 6.00	200 Route 13	0 North									
☐ Pacifity Closed/Vacate	경우 바르마일 5년 개급하다 하나 있다.					scribe		ty, State, Zip Co	POLICE STRUCTURE									
Time of Abatement: _								ty, State, Zip Ot Cinnaminson										
Scope of Work (Check al	Il that apply)													-				
M > 2 of or > 2 If			⊠ Re	5.	tion			☐ Full Cont	ainment with Neg	ative Pressure								
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			☐ De					☐ Glovebag										
										n-Friable Procedure	е							
					ation				1900		Abatemen			уре				
Location				Norm	ally lely by			Description o			R	R	ш	ш				
Asbestos-Containing TO BE ABA		1)			ance/			Containing Ma ermal systems		Amount (Specify	Remova	Repair	Encapsulate	Enclosure				
IN Facili			Cust		I Staff?	/		surfacing, VAT		SF or LF)	val	-	lusc	sure				
(13)				(12		_	0	ther miscellane	ous)				ate					
			Yes	No	N/A	V					-	-						
2 <sup>nd</sup> Floor Room #218						Floor	Tile a	and Mastic		120 SF								
Name of Registered Was	te Hauler					Waste	1 1355 230	ibic Yards of	Name of Regis	tered Landfill								
AbateTech, Inc.					Hauler 1875			aste 5	G.R.O.W.S.	Landfill								
City, State					Disposal Date City, State													
Lumberton, NJ					7/6/16 Tullytown, PA													
Completed By (Print or Ty	vpe)	Title	-					Signature	1	Dat	ė į	Cres III	i					
Gwendolyn Trumbe		0.0000000000000000000000000000000000000		ons	Coor	dinator		(M)	(R) 1 [6] 30[1]									
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Data of Notification (4)				- 10	Т.,		_					ا را	5 1	W	15	111			
Date of Notification (1)	07	40						ner/Operator (	2)	14									
	07 /	16			IVI.	ARCEL P	ALE	RMO	4	In.	-		1 1	004	,				
Agencies Notified	Type Notific	ation			Stree	Address					J	UL	11	ZUH	<del>}</del>	-	+		
□ EPA																			
⊠ DOLWD	Amended				City, S	State, Zip (	Code				ODE	STO	SCC	NTF	OL	8	1		
☐ DHSS	Amendm  Emergen		cludina		Cal	dwell, N.	J 07	006	ASBESTOS CONTROL & LICENSING										
(NJAC 5:23-8)	justificati		Gluuling	l	Name	of Contac	t		Telephone Number										
X 33 45 5 5 5 7	☐ Cancella	10000			Jin	Bestys	i i												
					FΔ	CILITY IN	IFO	RMATION											
Name of Facility Where A	hatement is 7	Takino	Place	(3)	17	CILITI II	er Or	NIATION	Type of	Engility	(1)				->//-				
Residential House	ibatomont io	aking	1 1000	(0)					Type of Facility (4)  ☐ School (K-12)										
Street Address				_					Subchapter 8 (Other than K-12)										
Oli GOL / Idal GOS									Othe	r (i.e., p	rivate	and c	comme	ercial h	ouildi	ngs,			
City (5)									J (10000110.00)	es, etc.)		( = 1							
Caldwell, NJ									Square I	reet	0.000	of Floo	ors	1	Bldg.	_			
County (6)					0	h . O l - /	71/07/	TE 110E 011110	2144		1 '	3			191	0			
Essex					Cour	ity Code (/	)(517	ATE USE ONLY)	Current			eing (	demol	ished)					
	11: 11: D 11	" 0	. ,	0)	10011		1		2002000	nt / Ho	-								
Name of Monitoring Firm			)wner (	8)	ASCM		Name of Abatement Contractor (9)												
Health and Safety S	services, in	C			001	17	Superior Abatement Inc												
Street Address								eet Address											
PO Box 365							_	Henderson											
City, State, Zip Code							Cit	y, State, Zip Co	ode										
Berlin, NJ 08009							V	Vest Caldwe	II, NJ 07	006									
Project Manager for Moni	toring Firm			Tel	ephone	No.	Tel	ephone No.			Lic	cense	No.						
Jim Proctor		856)45	2-1311	(	973) 808-161	6			0041	1									
Start Date (10)					etion Da	C. C.	Na	me of OSHA N	onitor										
07 /19 /	16	0	7_/	_2	2 /	16	S	Superior Aba	tement	Inc									
Occupancy Status During	Abatement (	Check	only o	ne)			Str	eet Address	-2-27								_		
□ Facility Closed/Vacate					ement		2	Henderson	Drive										
☐ Abatement Performed	Outside of No	ormal	Facility	Hou	ırs - Des	cribe	Cit	y, State, Zip Co	ode										
Time of Abatement: _	AM	PN	//	_PN	l	AM	1	Vest Caldwe		006									
Scope of Work (Check all	that apply)								,										
	., , , ,							☐ Full Conf		vith Neg	gative	Press	sure						
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			☐ Rei							IFO.									
Z3 _ 100 01 01 _ 200 11			M Del	HOIL	IOH					ed (*) and Non-Friable Procedure									
				Loca			4510				2227/1000				bater	nent 7	Type		
Location				lorm	ally lely by			Description o							_		-		
Asbestos-Containing I TO BE ABA		1)			ance/			Containing Ma ermal systems				Amou		lem	Repair	nca	ncl		
IN Facilit			Cust		Staff?	(1.6		surfacing, VAT,		'		(Spec SF or I		Removal	=	Encapsulate	Enclosure		
(13)				(12	71 Tay	-		her miscellane						_		ılate	l e		
			Yes	No	N/A											O			
Basement						Pipe Ins	sula	tion/Pipe Fit	ting			225 L	_F						
1st Floor Front Door I	Entrance Ri	ser			$\boxtimes$	Pipe Ins	sula	tion				10 L	F						
2 <sup>nd</sup> Floor Front Landin	ng Riser				Pipe Ins	sula	tion ·				10 L	F							
														T					
Name of Registered Wast	e Hauler		-	NJDEP \	Vaste	Cub	oic Yards of	Name	of Regis	tered	Landf	fill							
Service Transport G	roup, Inc	Hauler II		Wa			erva La												
City, State	SW21	17	Disp	posal Date	City, St	, State													
New Castle, DE			7/22/2016 Waynesburgh, OH																
Completed By (Print or Ty																			
Nick Petrovski	F-5)	Title	eside	nt				Signature	Date 7-7-/(										
ok i odovski				1111	1/1/	11/	1	In'	120	/	-1	-/	(-						