NO check NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) 11 15 11 Name of Building Owner/Operator (2) up Poper Management 10 State of New Jersey- Dept of the Agencies Notified Type Notification Street Address **⊠** EPA PO Box 034 DEP DCA (NJAC 5:16) City, State, Zip Code Amendment # 1 ☑ DHSS Trenton, NJ 08625-0034 ☐ Emergency (including □ DCA justification) Name of Contact ASBESTAS GON Nembe (NJAC 5:23-8) ☐ Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Ancora Psychiatric Hospital School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings. 301 Spring Garden Rd ... homes, etc.) City (5) Square Feet # of Floors Bldg. Age Hammonton, NJ 08037 15.000 1 50+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Camden hospital Name of Monitoring Firm Hired by Building Owner (8) ASCM No Name of Abatement Contractor (9) USA Environmental Management, Inc. Controlled Environmental Systems Street Address Street Address 344 West State Street 1121 N. Bethlehem Pike - Suite 60 City, State, Zip Code City, State, Zip Code Trenton, NJ 08618 Spring House, PA 19477 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Bill Wiessgarber 609-743-0493 215-542-7000 00847 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __11__ / _ 7 / _11 1 / 7 / 12 CES Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1121 N. Bethlehem Pike - Suite 60 Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM- PM/5:00PM-Spring House, PA 19477 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf ☐ Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Repair Encapsulate Asbestos-Containing Material (ACM) Remova Asbestos Containing Material (ACM) Amount Maintenance/ nclosure TO BE ABATED (i.e., thermal systems insulation, surfacing, (Specify Custodial Staff? IN Facility VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Exterior - Roof - Larch Hall \boxtimes White Painted tar paper sealant 2520 SF M П Exterior -- Roof-Birch Hall \boxtimes White Painted tar paper sealant 2524 SF M 13 П Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Cubic Yards of Hauler ID No. Waste 120 STG Minerva Landfill 20990 City, State Disposal Date City, State New Castle, DE Waynesburg, OH 44688 Completed By (Print or Type) Patricia Visco Office Manager ASB-41 JUL 01 * Do not use this form for asbestos liceris

State of New Jersey

Notherk

State of New Jersey 1108-4358
NOTIFICATION OF ASBESTOS ABATEMENT Check # 3503 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1) 11/15/11 Agencies Notified Type Notification							Owner / Operato	r (2)		<u>L</u>	造业	W E	-,!!!			
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							Medical Ce									
Name of Monitoring TTI Environment		y Building Ow	mer (8)		A	SCM N	AbateTech,	Inc.		ractor (9)					
Street Address							Street Addres									
1253 North Chur					-		PO Box 25	City, State & Zip Code								
City, State & Zip Co Moorestown, NJ							Lumberton, NJ 08048									
Project Manager for Jim Guilardi		irm	Teler			ımber	Telephone N 609-265-210	umbe			License	Number 005		MAR 1 5.20		
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Lumberton, NJ							Disposal Date 11/21/11		State ytown	, PA						
Completed By (Print or Type) Title				Signature	1_				Date							
Gwen Trumbetti				Opps. Coord. 11/15/11							1					

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1 to			FAC	CILITY IN	FORMATION	energhe					
Name of Facility Where Abatement is T	aking Place	(3)				Type of Facility (4	1)				
Princeton University - JADWIN	HALL					School (K-12)	(Other than K 12)				
Street Address						Subchapter 8 Other (i.e., priv			ilding	S,	
Washington Road						homes, etc.)					
City (5)						Square Feet	# of Floors	Blo	ig. Ag	је	
Princeton											
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Mercer											
Name of Monitoring Firm Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme						
ATC Associates Inc.			0009	8	BRISTOL EN	VIRONMENTAL	, INC.				
Street Address					Street Address						
Bromley Corporate Center - Th	ree Terri l	.ane			1123 BEAVE	1120					
City, State, Zip Code					City, State, Zip Co						
Burlington, NJ 08016					BRISTOL, PA	19007					
Project Manager for Monitoring Firm		17-1000000	phone		Telephone No.		License No.				
Michael Keehn			9-386		215-788-6040		00509				
Start Date (10) Start Date (10	cheduled C	5.0			Name of OSHA M BRISTOL EN	lonitor VIRONMENTAL	, INC.				
Occupancy Status During Abatement (C	Check only	one)			Street Address						
☐ Facility Closed/Vacated During Entire					1123 BEAVE	R STREET					
□ Abatement Performed Outside of No. Time of Abatement: 7:00AM-5:30P EV# \$ - 11/18 GN-Y -	M/P	M	AM	cribe	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that apply)					M.F. II Com	tainment with Nega	ativo Pressure				
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	lo	Locat	ion			Inplot () and the			atem	ent T	ype
Location of Asbestos-Containing Material (ACM TO BE ABATED IN Facility) Use	Norma ed Sole intena todial (12)	lly ely by ince/		Description of estos Containing Ma a, thermal systems surfacing, VAT	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)	Yes	No.	N/A	1	other miscellane	ous)				6	
3 rd floor		×		Floor ti	le and mastic		27,295 SF				
3 rd floor		\boxtimes		Saddle	block		85 each	\boxtimes			
3rd floor				wall va	por barrier mate	rial	220 SF	\boxtimes			
3rd floor	П	\boxtimes		fittings			10 each	\boxtimes			
Name of Registered Waste Hauler			JDEP \	Vaste	Cubic Yards of	Name of Regist	ered Landfill			WOTH D	
SERVICE TRANSPORT GROUP	, INC.	H	lauler II		Waste	GROWS La	ndfill				
City, State NEW CASTLE, DE 19720			20990)	Disposal Date as needed	City, State Morrisville,	PA 19067				
- TOO AND CONTROL OF THE PROPERTY OF THE PROPE	Title				Signature	A CONTRACTOR TO STATE OF THE ST		ite /		,	
Completed By (Print or Type) Brian Scafiro	Title Estima	tor			Brian	~ Scafie	1-je	11/1	18/	//	
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Name of Facility Where Abatement is T	aking Place	(3)	1 //	And I III	er Ordina Hore	Type of Facility (4)	211			
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Bromley Corporate Center - Th	ree Terri l	ane			1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip Co	ode			(
Burlington, NJ 08016					BRISTOL, PA	19007					
Project Manager for Monitoring Firm		Tele	phone	No.	Telephone No.		License No.				
Michael Keehn			9-386		215-788-6040		00509				
Start Date (10) Start Date (10	Scheduled C		tion Da		Name of OSHA M BRISTOL EN	lonitor VIRONMENTAI	, INC.				
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NEW CASTLE, DE 19720					as needed	Morrisville	, PA 19067				
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ASB-41 MAY 11 B 5/10 96 NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)	18/	11	_		Nai	me of Buildi	ng Owner/Operator University - Office	(2)			2011		ij
Agencies Notified ☑ EPA ☑ DOLWD ☑ DHSS	☑ Initial☑ Amend	ded	10/3	31 <u>/1</u> ·	Stre 2 City	eet Address 00 Elm Dr v, State, Zip	ive Code		ASBESTOS	CONTI NSING	101/2		
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(NJAC 5:23-8)					1	ne of Conta	4	1 ASI	Telephone Nu	mber			
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Name of Facility 1865					F.	ACILITY II	NFORMATION	The same		-		J	
				e (3)				Type of Facility					
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								homes, etc.)	iciciai	Dullul	nys,	
Princeton								Square Feet	# of Floors		Bldg.	Age	
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ATC Associates In	c.				000	98		VIRONMENTA			700		
Street Address							Street Address						_
Bromley Corporate	Center - T	Three Te	rri L	.ane			1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip C				_		_
Burlington, NJ 080	16						BRISTOL, PA						
Project Manager for Mon	itoring Firm			Tel	ephone	No.	Telephone No.		License No.				_
Michael Keehn				6	09-38	6-8800	215-788-6040		00509				
Start Date (10)		Schedule	d Co	omple	etion D	ate (11)	Name of OSHA M	Ionitor			-		
09 /01 /								VIRONMENTAL	_, INC.				
Occupancy Status During	Abatement	(Check or	nly o	ne)		F.	Street Address		<u> </u>				
☐ Facility Closed/Vacate	d During Ent	tire Period	of A	Abate	ment		1123 BEAVE	RSTREET					
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ASB-41

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

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Name of Monitoring Firm I		Owner	(8)	ASCN	No.	Name of Abater	ment Contractor (9)				
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Bromley Corporate (Center - Three	Terri	Lane)		1123 BEAV	ER STREET					
City, State, Zip Code						City, State, Zip	Code			- 22 - 32		-
Burlington, NJ 08016	3					BRISTOL, P						
Project Manager for Monito	oring Firm		Te	lephone	No.	Telephone No.		License No.				
Michael Keehn				509-386		215-788-604	0	00509				
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Occupancy Status During A		ok only			EAB	Street Address		2,				
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Time of Abatement: 7:0						City, State, Zip (BRISTOL, P						
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OF HIGH LIGHT OF THE			1	20990		120						
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City, State						Disposal Date	City, State	DA 10007				
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

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Agencies Notified ☑ EPA ☑ DOLWD	☑ Initial☑ Amended	d			Street Addre 200 Elm I	ss Drive		NOV 19	7	1		-
☑ DHSS ☑ DCA (NJAC 5:23-8)	Type Notification EPA		10/26 luding		City, State, Z Princetor Name of Con	n, NJ 08544		ASRES TO AN			11 have	<u></u>
	☐ Cancellat	tion			Robert Or		1/	Telephone I	Numbe	er	1000	
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Princeton Universit	Abatement is T ty - JADWIN	aking F	Place ((3)			Type of Facility School (K-1			-81-51		
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City (5)		22-200					homes, etc. Square Feet	# of Floors				
								# OI Floors		Blag	g. Age	е
Mercer					County Code	(7)(STATE USE ONLY)	Current Use (Pr	rior if being dem	olishe	d)		
Name of Monitoring Firm I	Hired by Buildi	ng Owr	ner (8)	AS	CM No.	Name of Abateme	ent Contractor (0)					
				0	8000		VIRONMENTA					
Street Address						Street Address		L, INC.				
Bromley Corporate (Center - Thre	ee Ter	ri Lar	ne		1123 BEAVER	STREET					
City, State, Zip Code	Burlington, NJ 08016					City, State, Zip Co						
				BRISTOL, PA				Selection				
Project Manager for Monito	oring Firm		1	elepho	ne No.	Telephone No.	19007	1				
Michael Keehn					86-8800	215-788-6040		License No.				
Start Date (10)	Sch	heduled	Com			Name of OSHA Mo	nites	00509				
09/01/	art Date (10) Scheduled Com 09 / 01 / 11 10 /					BRISTOL ENV						
occupancy Status During A	batement (Ch	eck onl	y one)			Street Address	INOMINEMIAL	, INC.				
Facility Closed/Vacated	During Entire I	Period i	of Aha	tement		The state of the s	CTDEET		200			
J Abatement Performed O	utside of Norm	al Faci	lity Ho	ure D	escribe	1123 BEAVER						
V# 6- 10/264 10/6	DAM- <u>5:30</u> PM/	1	DAA.	A 1		City, State, Zip Coo BRISTOL, PA						-
cope of Work (Check all th	at apply)											
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floor	loor 🗆 🗆 🗆				fittings	Darrier material		220 SF				1
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ERVICE TRANSPORT	RVICE TRANSPORT GROUP, INC.				O No. V	Cubic Yards of N Vaste 120	Name of Registered Landfill GROWS Landfill					
State EW CASTLE, DE 19720	,					Disposal Date C	ity, State					
						as needed	Morrisville, PA	19067				
pleted By (Print or Type) trick T. DeCaro	led By (Print or Type) Title					Signature	0	Date	-	-		_
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NOTIFICATION OF ASBESTOS ABATEMENT 100 2 1
(Pursuant to NJAC 8:60 and 5 to)

Name of Beliating Owner/Corp. Princeton University Princeton	Abatement Performed Outside of Norm Time of Abatement: 7:00AM-5:30PM Evaluation of Check all that apply) >3 sf or >3 lf >160 sf or >260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) d floor me of Registered Waste Hauler SERVICE TRANSPORT GROUP, IN y, State	P P S · 3 S	enovatio emolition Locatic Normally d Solely intenant dodial St (12) No No NJC Hau	S - DesAM	Asbes (i.e.,	City, State, Zip Co BRISTOL, PA Full Cont. Mini-Encl Glovebag Non-Exer Description of tos Containing Matthermal systems in surfacing, VAT, other miscellaneo Plaster Cubic Yards of Vaste 120	ainment with Nega osure Procedure npted (*) and Non-erial (ACM) insulation, or us) Name of Registers GROWS North	Amount (Specify SF or LF) 482 SF	Removal	Repair	Encapsulate
8	Abatement Performed Outside of Norm Time of Abatement: 7:00AM-5:30PM EV#6 - 10/26 + 10/28 0N4Y - Boope of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) d floor me of Registered Waste Hauler	P P S · 3 S	enovatio emolition Locatic Normally d Solely intenant dodial St (12) No No NJC Hau	S - DesAM	Asbes (i.e.,	City, State, Zip Co BRISTOL, PA Full Cont. Mini-Encl Glovebag Non-Exer Description of tos Containing Matthermal systems in surfacing, VAT, other miscellaneo Cubic Yards of Vaste	ainment with Nega osure Procedure npted (*) and Non- erial (ACM) isulation, or us)	Amount (Specify SF or LF) 482 SF	Removal	Repair	Encapsulate
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8 / 18 / 11 Princeton University Office of Designant Construction				11		VIRONMENTAL	, INC.				
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Agencies Notified Agencies Notified □ Type Notification □ Initial □ DOLWD □ Amended □ Amendment #6-10/26/11 □ Emergency (including justification) □ Cancellation □ Cancellation □ Cancellation Name of Facility Where Abatement is Taking Place (3) Princeton University - JADWIN HALL □ Street Address Washington Road City (5) Princeton County (6) Mercer Name of Monitoring Firm Hired by Building Owner (8) ATC Associates Inc. Name of Contract (7)(STATE USE ONLY) Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address Street Address Street Address Street Address Bromley Corporate Center - Three Terri Lane Street Address		0			Control of the Contro						
Agencies Notified □ EPA □ DOLWD □ DCA □ (NJAC 5:23-8) □ DCA □ (N		Lane									
Agencies Notified Agencies Notified EPA DOLWD DHSS DCA (NJAC 5:23-8) Name of Facility Where Abatement is Taking Place (3) Princeton University - Office of Design and Construction Cancellation FACILITY INFORMATION Type of Facility (4) Street Address Princeton University - JADWIN HALL Type of Facility (4) Street Address Washington Road City (5) Princeton County (6) Mercer Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)							AINOMAIEMIA	, INC.			
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N IAC 2:50 and 50)

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	Amender Amendm Emergen justificati Cancellal Abatement is 1 ity - JADWIN Hired by Build Center - Thr Coring Firm Abatement (Cr During Entire Dutside of Norm DOAM-5:30PM ONLY hat apply)	Amended Amendment #5-1 Emergency (inclusion) Cancellation Abatement is Taking Printy - JADWIN HALL Hired by Building Owner Center - Three Terr Scheduled 10 Abatement (Check only only only only only only only only	Amended Amendment #5-10/21/1 Emergency (including justification) Cancellation Abatement is Taking Place (3) Ity - JADWIN HALL Hired by Building Owner (8) Center - Three Terri Lane Scheduled Complete of Abate (1) Journing Firm Terrical Scheduled Complete of Abate (1) During Entire Period of Abate (1) During Entire Perio	Amended Amendment #5-10/21/11 Emergency (including justification) Cancellation Abatement is Taking Place (3) Ity - JADWIN HALL Center - Three Terri Lane 6 foring Firm Scheduled Completion Education Scheduled Completion Education Telephone 609-38 Scheduled Completion Education Scheduled Completion Education During Entire Period of Abatement Coutside of Normal Facility Hours - Decuted Course of Normally Scheduled Completion Abatement (Check only one) Buring Entire Period of Abatement Dutside of Normal Facility Hours - Decuted Course of Normally Scheduled Completion Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Scheduled Completion And Course of Normal Facility Hours - Decuted Course of Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A	Amended Amendment #5-10/21/11 Emergency (including justification) Cancellation FACILITY Abatement is Taking Place (3) ity - JADWIN HALL County Code County Code Hired by Building Owner (8) ASCM No. 00098 Center - Three Terri Lane 6 Coring Firm Telephone No. 609-386-8800 Scheduled Completion Date (11) 10 / 31 / 11 Abatement (Check only one) Dutside of Normal Facility Hours - Describe 20AM-5:30PM PM-AM ONLY SAM-1:30 PM hat apply) Renovation Demolition Demolition Demolition Asbes (i.e. City, State, Zi Princeton Name of Control (11) Robert Or FACILITY ASCM No. 00098 County Code County Code ASCM No. 00098 County Code Ascendary Facility Hours - Describe 100-100-100-100-100-100-100-100-100-100	Amended Amendment #5-10/21/11 Emergency (including justification) Cancellation Cancellatio	Mamended Amendment #5-10/21/11 Characteristication Cancellation Princeton, NJ 08544 Name of Contact Robert Ortego FACILITY INFORMATION Type of Facility Type of Facility Subchaples Other (i.e., homes, etc Square Feet County Code (7)(STATE USE ONLY) Current Use (Pacility Current Use (Pacil			Amended	Amended

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Name of Facility Where Abatemer	nt is Takir	ng P	lace (3)	FACILITY	YINFORMATION				7		
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Street Address Washington Road	JOHN-PHOEN SHEET						── Subchapter	8 (Other than I	K-12)	S		
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Michael Keehn					86-8800	215-788-604	•	License No.				_
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Abatement Performed Outside of Time of Abatement: 7:00AM-5:3 REV#5-10/21/11 ON LY	IIDRA/		71.4			City, State, Zip Co	ode					_
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Deleted By (Print or Type)	Title					as needed	City, State Morrisville, PA	19067				

State of New Jerse NOTIFICATION OF ASBESTOS (Pursuant to NJAC 8:60,

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	State 209						ROWS Landfill	(C						
SERVICE TRANSPORT GROUP, IN	C.	H	auler II	n	Cubic Yards of Waste	Nar	ne of Registered I	andfill	1-1	7		_		
Name of Registered Waste Hauler	JDEP I		fittings 10 each					-						
3rd floor	floor							220 SF	\boxtimes			1		
3rd floor	10	⊠ ⊠	1	□ Saddle block 85 each ⊠ □ wall vapor barrier material 220 SE □ □							1			
3 rd floor		⊠ ⊠	吊				2	7,295 SF				1		
3 rd floor		Ø	N/A	+	e and mastic						6	1		
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Used Solel Maintenan Custodial S (12) Yes No						I (ACM) ation,	Amount (Specify SF or LF)	< Removal	baten Repair		-		
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		Renovi Demoli	ition	T	Gloveb	ag Pr	ment with Negativ are ocedure ed (*) and Non-Fr		ure					
Occupancy Status During Abatement (C Facility Closed/Vacated During Entire Abatement Performed Outside of North Time of Abatement: 7:00AM-5:30PM ABATEMENT A	Period mal Fac	ly one of Aba ility H)	t Describe	Street Address 1123 BEAV City, State, Zip BRISTOL, I	/ER S Code PA 19	9007					_		
09 / 01 / 11	10	. / _	31	Date (11)	Name of OSH									
Michael Keehn	chedule	- 1	Felepho 609-	9-386-8800 215-788-6040				License No.			_			
Burlington, NJ 08016 Project Manager for Monitoring Firm	-	- 1-	Tole-1		BRISTOL,	PA 1								
City, State, Zip Code					City, State, Zi									
Bromley Corporate Center - Th	ree Ter	rri La	ne		Street Addres						-			
Street Address				00098	BRISTOL	ENV	RONMENTAL,	ENTAL, INC.						
Name of Monitoring Firm Hired by Buil ATC Associates Inc.	ding Ow	ner (8	DE 1000	SCM No.	Name of Aba		nt Contractor (9)							
Mercer				County Coo	le (7)(STATE USE OF	VLY)	Current Use (Prio	r if being der	molish	ed)		22		
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Princeton University - JADWI	N HALI	riace L	(3)				Type of Facility (-	10.16	n k	10		
Name of Facility Where Abatement is	Takina	Diagram	(0)	FACILIT	Y INFORMATIO	N.	face for a	-	===			-		
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☑ DHSS Amend	lment #4	-10/1	4/11	City, State,		+	+							
☐ EPA ☐ Initial ☐ Amend	led.			200 Eln		-	Lander Mar	\$				-		
Agencies Notified Type Noti	fication			Street Add	ross	Out	e of Design an	# Sinstro	ction					
8 /18 /	11			Princet	on University	erator	(2) LASBESTUS	CONTRUL &		1	1			
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and affect subtraction.

Date of Notification (1)		-		N	lame of Build	ding Owner/Operati		STOS COUNTROL A	1	-	1	
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☑ DHSS ☑ DCA	Amendme	ent # <u>4-1</u> cy (inclu	1/14/1 iding		ity, State, Zi Princeton	p Code , NJ 08544	TL					
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75 100 140	2				FACILITY	INFORMATION	- Set-	1		7		
Name of Facility Where	Abatement is T	aking P	lace (3)				Type of Facilit	y (4)				
Princeton Universi Street Address	ty - JADWIN	HALL					School (K-	12)				
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County (6)				C	ounty Code	(7)(STATE USE ONLY	Current Lice (C	Prince of the city				
Mercer						t was a second	Odirent Ose (P	rior if being dem	nolishe	d)		
Name of Monitoring Firm		ng Own	er (8)	ASC	M No.	Name of Abatem	nent Contractor (9	1				
ATC Associates Inc				00	0098		NVIRONMENTA					
Street Address						Street Address		C, INC.				
Bromley Corporate	Center - Thre	ee Terr	ri Lane			1123 BEAVE	R STREET					
City, State, Zip Code Burlington, NJ 0801	6					City, State, Zip C	ode					_
Project Manager for Monit		-	Te	enhon	ne No.	BRISTOL, P.	A 19007					
Michael Keehn					86-8800	Telephone No. 215-788-604)	License No. 00509				
Start Date (10)					Date (11)	Name of OSHA		00509				
	-			1 /		No. of the contract of the con	VIRONMENTA	L. INC.				
Occupancy Status During						Street Address						_
☐ Facility Closed/Vacated☐ Abatement Performed (During Entire I	Period o	of Abate	ment		1123 BEAVE	R STREET					
Time of Abatement: 7:0	00AM-5:30PM	1	PM-	AN		City, State, Zip Co						
Scope of Work (Check all II	5 AM-	1:30	PM			BRISTOL, PA	19007					
scope of work (Check all the	iat apply)					M					_	
] ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovati emolitic			☐ Glovebac	Procedure					
			s Locat	11570 C. C.	T	L Non-Exer	mpted (*) and Nor	1-Friable Proced				
Location of Asbestos-Containing Ma		Us	Norma ed Sole			Description of				baten	-	Туре
TO BE ABATE		M	aintena	nce/	Asbes (i.e.	tos Containing Mat , thermal systems is	erial (ACM)	Amount	Removal	Repair	Enc	1 5
IN Facility (13)		Cus	stodial (staff?	(surfacing, VAT,	or	(Specify SF or LF)	SVOL	air.	aps	Luciosure
(10)		Yes	No	N/A	-	other miscellaneo	us)	J. J. L.)	=		Encapsulate	ē
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EW CASTLE, DE 1972	20					as needed	City, State	4 4000-				

REV #4

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Date of Notification (1)					Nome	NOAC 6.60 an	ia 5:	ASBESTOS	CONTROL	1	1		50
8 /	18 /	1	1		Princete	ilding Owner/Ope	erator	121 -LICE	NSING .		-	Si	ii.
Agencies Notified	Type Noti	fication	1		Ci	on University -	Offic	e of Design	and Constru	etio	n	7	
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⊠ DOLWD	⊠ Amend	led			200 Elm City, State, 2		111	MON MON	/	- 1	771	1	
☑ DCA	Amend	ment #	3-9/2	1/11				1100	129 2011	$-\frac{\eta}{H}$	had I		
(NJAC 5:23-8)	Justifica	ition)	nciuair	ng	Name of Cor	n, NJ 08544		1			ens.		
	☐ Cancell	ation			Robert O			ASBESTOS	Telephon	e-Mun	ber .		
					The state of the s		7	LICE	NSINE		-	\	
Name of Facility Where A	batement is	Taking	Place	e (3)	PACILITY	INFORMATIO	N	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Same of Same	September 1			
Princeton University	y - JADWII	N HAI	L	(-)			774-07	Abe of Lacill	y (4)		174 _{0 1944}	4	_
Street Address			SCHE - AND	-				School (K.	121	29-00	ronau.	3-	
Washington Road								Subchapter Other (i.e.,	r 8 (Other than	1 K-12)		
City (5)									:)	mmer	cial bu	uilding	S,
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Name of Monitoring Firm H	ired by Build	ding O	wner (8) A	SCM No.	10-	- 1				,		
ATC Associates Inc.			>>> 1500E4 ™		00098	Name of Abai	lemer	nt Contractor (9)					
Street Address						BRISTOL	ENV	TRONMENTA	L, INC.				
Bromley Corporate Co	enter - Th	ree To	erri La	ane		Street Addres	34)						
City, State, Zip Code						1123 BEA							
Burlington, NJ 08016						City, State, Zip							
Project Manager for Monitori	ing Firm			Teleph	one No.	BRISTOL,		9007					
Michael Keehn			- 1		386-8800	Telephone No.			License No).		_	
Start Date (10)	Sc	heduk	ed Cor	noletion	Date (11)	215-788-60			00509				
09 / 01 / 1	1	_ 10	1	31	/11	Name of OSHA	Mon	itor					_
Occupancy Status During Aba	atement (Ch	neck o	nly one	- 1		RKISTOL E	NVI	RONMENTAL	, INC.				
☐ Facility Closed/Vacated Di	urino Entire	Perior	of Ah			Street Address							
	side of Norr	nal Fa	cilib. L	lours -	ll Describe	1123 BEAV							
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Scope of Work (Check all that	BODIV	-/2	AM			BRISTOL, P	A 19	007					
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Location of			Norn	nally							hat		
Asbestos-Containing Materi TO BE ABATED	ial (ACM)	U	sed S	olely by nance/	Asbest	Description os Containing Ma	of oterior	(ACLA)		0.0055	baten		_
IN Facility		C	stodia	I Staff?	(i.e.,	inemal systems	insula	ation,	Amount	Removal	Repair	Enc	Enclosure
(13)		_	(12	2)	1	surfacing, VAT other miscellane	10		(Specify SF or LF)	OVA	air	aps	Sop
		Yes	No	N/A		- mscellane	ous)		100 A 150 A	=		Encapsulate	we
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floor				1					27,295 SF	×			
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a rioor		1			Wall vapor	barrier mater	ial			-	1	7	<u></u>
d floor			×		fittings	Dutilet mater	idi		220 SF		0		

NOV 2 1 2011

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 4:60 and 5:14\$B55TOS.COM

8 /18 /		-		Princeto	ilding Owner/Operato on University - Off	(2) LICENSIN	-		-wind Au-	AL-AL-	
Agencies Notified Type Not ☐ EPA ☐ Initial	fication			Street Addre		or Design a	na Construc	tion	113	ij.	100
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_ Minen		2 0 10 4		City, State, Z							-
DCA □ Emerg	ment #	3-9/21	/11		n, NJ 08544	144	NOV)	寒	7011		_
(145AC 5.25-6) Justific	ation)	Cinomi	9	Name of Con	1, 140 08544			- 50	Jan.		
. ☐ Cancel	lation		- 1	Robert O		117	Telephone N	Numb	er_	_	7
						1 4	The second second		_		-3
Name of Facility Where Abatement is	Taking	Place	(3)	TACILITY	INFORMATION	1- march	10.00			_	-
Princeton University - JADWI	N HAL	L	,			Type of Facility		-	Visite	_	_
Street Address						School (K-12	?)	7		. 1:	1
Washington Road						Subchapter (i.e., p	(Other than K	(-12)			
City (5)							inare and com	merci	al buil	ding)5
Princeton						Square Feet	# of Floors		Bldg) A.	_
County (6)				County Cart	771/074		and the state of t			, ng	ď
Mercer				County Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being dem	olish	<u>d)</u>	_	_
Name of Monitoring Firm Hired by Buil	ding Ov	vner (8		SCM No.	1				,		
ATC Associates Inc.	•	۷. ر		00098	Name of Abateme	ent Contractor (9)				_	
Street Address					BRISTOL EN	VIRONMENTAL	, INC.				
Bromley Corporate Center - Th	ree Te	rri La	ne		Street Address			-			_
City, State, Zip Code					1123 BEAVER						
Burlington, NJ 08016					City, State, Zip Coo			_			_
Project Manager for Monitoring Firm			Telent	one No.	BRISTOL, PA	19007					
Michael Keehn					Telephone No.		License No.				_
Start Date (10)	chedule	d Com	nleti-	386-8800 Date (11)	215-788-6040		00509				
09 / 01 / 11	10	7 CON	31 Piestou	Date (11) / _ 11	Name of OSHA Mo						_
occupancy Status During Abatement (C	hadire	- ' -	-	<u></u>	BRISTOL ENVI	RONMENTAL.	INC.				
Facility Closed/Vacated During Entire	Design	of AL)		Street Address						_
Abatement Performed Outside of Nor	mal Fac	414. L.	riemeni	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1123 BEAVER	STREET					-
					City, State, Zip Code						
EV# 3 - 9/22 \(\text{9/23/11}\) cope of Work (Check all that apply)	TAN	1-10	2AN	1	BRISTOL, PA 1						
			T. Control								
≥3 sf or ≥3 ff ≥160 sf or ≥260 ff		Renovi Demoli	ation ition		Glovehan P	rocodus					
Is Loca				1	L .ton-Exemp	ted (*) and Non-Fr	iable Procedur	e			
Location of Asbestos-Containing Material (ACM)	Norm	ally		Description of			At	pateme	ent T	-	
TO BE ABATED	TO BE ABATED Mainte			Asbesto	os Containing Materia	al (ACM)	Amount				-
IN Facility	Cu	stodia	Staff?	(i.e., i	thermal systems insu surfacing, VAT, or	lation,	(Specify	Removal	Repair	Encapsulate	
(13)	-	(12		4	other miscellaneous)		SF or LF)	leve	5	psu	
	Yes	+	N/A							late	1
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loor				-			482 SF				Ī
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e of Registered Waste Hauler	+=-								=+	5	-

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)						NJAC 8:60 and	:16) ASBESTO		or which we	1	P	1
8/	18 /	11			Princete	uilding Owne Operation University	OF (2)	in Laboratory	1/4	5/	many)	
Agencies Notified ⊠ EPA ⊠ DOLWD ⊠ DHSS	Type Notific ☑ Initial ☑ Amender Amendm	d ent # <u>2-</u> 9	/06/1	Si Ci	reet Addr 200 Elm ty, State,	Drive Zip Code	1411	10V 7 9 20	ĬII			
□ DCA (NJAC 5:23-8)	☐ Emergen justificati	cy (inclu	ding		Princeto me of Co	on, NJ 08544	1 000	ESTOS CONTROL	7	l		
	☐ Cancellat			100	Robert (<i>a</i> -	No.	Telephone I	Vumbe	2	7	
				1		Y INFORMATION	manufacture of the second			7		
Name of Facility Where			ace (3)	TOILI	THEORMATION	Type of Facilit	- 441				
Princeton Universi	ity - JADWIN	HALL					School (K-					
Street Address Washington Road							── Subchapte	r 8 (Other than h	(-12) mercia	ıl buik	lings,	
City (5) Princeton							Square Feet	# of Floors		Bldg	. Age	:
County (6) Mercer				Co	ounty Cod	de (7)(STATE USE ONLY	Current Use (F	Prior if being dem	nolishe	d)		
Name of Monitoring Firm	Hired by Buildi	ng Own	er (8)	ASC	M No.	Name of Abote	ment Contact					
ATC Associates Inc				1	098		nent Contractor (S					-370
Street Address				1		Street Address	IN A INCIMIEN IN	AL, INC.				
Bromley Corporate	Center - Thr	ee Terr	i Lan	9		1123 BEAVE	ER STREET					
City, State, Zip Code	201					City, State, Zip (
Burlington, NJ 0801					BRISTOL, PA 19007							
Project Manager for Monit	oring Firm			lephon		Telephone No.		License No.				_
Michael Keehn					6-8800	215-788-604	0	00509				
Start Date (10)					ate (11)	Name of OSHA	Monitor					_
				/	11	BRISTOL EN	IVIRONMENTA	L, INC.				
Occupancy Status During						Street Address						
Facility Closed/Vacated Abatement Performed (Dutiside of No-	reriod o	i Abati	ement		1123 BEAVE	R STREET					
Time of Abatement: 7:0	00AM- <u>5:30</u> PM		PM	AN	scribe	City, State, Zip C BRISTOL, PA					_	
cope of Work (Check all t	hat apply)											_
] ≥3 sf or ≥3 lf] ≥160 sf or ≥260 lf		_ D	enovat emoliti	on		☐ Mini-End			IIFA			
Location of			s Loca Norma							batem	ent 7	
Asbestos-Containing Ma TO BE ABATE IN Facility (13)	iterial (ACM)	Usi	ed Sole intens todial	ely by	Asb (i.	Description o estos Containing Ma e., thermal systems i surfacing, VAT, other miscellaneo	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
floor		Yes	No	N/A							ate	
		+=-	Ø			ile and mastic		27,777 SF	×			
floor					Saddle			85 each	\boxtimes			1
floor			Ø			por barrier mater	ial	320 SF				1
floor ne of Registered Waste H	laulas			☐ Fittings 10 each ☑ ☐					n	\Box	I	
ERVICE TRANSPORT		C.	Ha	IDEP Worlder ID 20990		Cubic Yards of Waste 120	Name of Registe GROWS Lan		-1			
State						Disposal Date	City, State					_

REV #2

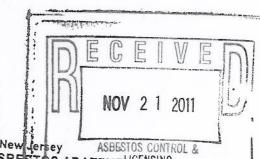
State of New Jersey NOTIFICATION OF ASBESTOS ABATE (Pursuant to NJAC 8:60 and 5:16) ASBESTOS CONTROL & PS2 Date of Notification (1) LICENSING Name of Building Owner Operator (2) 11 Princeton University - Office of Design and Construction Agencies Notified Type Notification Street Address D EPA 200 Elm Drive **⊠** DOLWD DHSS. City, State, Zip Code Amendment #2-9/06/11 DCA ☐ Emergency (including Princeton, NJ 08544 (NJAC 5:23-8) justification) ASBESTOS CONTROL & Name of Contact ☐ Cancellation Telephone Number Robert Ortego **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Princeton University - JADWIN HALL Type of Facility (4) School (K-12) Street Address Subchapter 8 (Other than K-12)
Other (i.e., private and commercial buildings, Washington Road City (5) homes, etc.) Princeton Square Feet # of Floors Bldg. Age County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Mercer Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC Associates Inc. 86000 BRISTOL ENVIRONMENTAL, INC. Street Address Street Address Bromley Corporate Center - Three Terri Lane 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Burlington, NJ 08016 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. Michael Keehn License No. 609-386-8800 215-788-6040 Start Date (10) Scheduled Completion Date (11) 00509 Name of OSHA Monitor 09 / 01 / 11 10 / 31 / 11 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe 1123 BEAVER STREET Time of Abatement: 7:00AM-5:30PM/ City, State, Zip Code PM-BRISTOL, PA 19007 Scope of Work (Check all that apply) Full Containment with Negative Pressure >3 sf or >3 lf □ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 lf □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Location of Normally Abatement Type Asbestos-Containing Material (ACM) Used Solely by Description of Asbestos Containing Material (ACM) TO BE ABATED Maintenance/ Removal Amount Encapsulate Enclosure (i.e., thermal systems insulation, Custodial Staff? IN Facility (Specify surfacing, VAT, or (13)(12)SF or LF) other miscellaneous) Yes No N/A 3rd floor Ø Celling Plaster 482 SF \Box \Box Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill SERVICE TRANSPORT GROUP, INC. Hauler ID No. Waste GROWS North Landfill 20990

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City, State



NOTIFICATION OF ASBESTOS ABATEMENGENSING

(Pursuant to NJAC 2:50 and 5:40)

Date of Notification (1)					(11	ursuant to	NJAC 3:60 and 5	16)	invision () -	#_		-,	
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Agencies Notified				-		Princeto	on University - Offi	ce of Design	nd Const				218.69
⊠ EPA	Type N	Votificatio	n) CONTRACT		Street Addre	900		Constru	action			
⊠ DOLWD	⊠ Initi					200 Elm		IIX				17	I
⊠ DHSS	⊠ Ame					City, State, 2		_ [[] []]					-
Ø DCA	D Eme	endment ergency (# <u>1-8</u>	123/1	11			IN LU I	VOV TS	-0018			_
(NJAC 5:23-8)	Justi	fication)		gnib	1	Name of Cor	n, NJ 08544	11	والمستمر	100			j
	☐ Can	cellation				Robert O		ASI	Telephon	e Num	ber	/	_
Name of Facility Where	Abatama					FACILITY	INFORMATION	h-/	1				1
Princeton Universi	h. IAN	I IS I BKI	ng Pla	ace (3	3)		2	Type of Facility			-	-	J
Street Address	ty - JAD	MIN HA	LL					School (K-1	/ (4) 2)		atomics, in		
Washington Road				Messer				∃ Subchapter	8 (Other the	V 40			
			APR - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					U Other (i.e., I	ofivale and oc	mmer.	(ial h	uildina	
City (5)								1	,		Cial Di	noing	5,
Princeton								Square Feet	# of Floor	Z Z	BI	ldg. Ag	je
County (6)		SELECTION OF			T	County Code	(7)(STATE USE ONLY)				1	- 0	
Mercer						,	() NOTATE USE ONLY)	Current Use (Pr	ior if being de	molist	ned)		
Name of Monitoring Firm I	Hired by B	uilding C)wne	(8)	AS	CM No.	Name of At 1						
ATC Associates Inc.				2 8	1	00098	Name of Abateme	nt Contractor (9)			-		_
Street Address							BRISTOL EN	VIRONMENTAL	L, INC.				
Bromley Corporate (Center -	Three T	erri	Land	8		Street Address				-		_
City, State, Zip Code					_		1123 BEAVER						
Burlington, NJ 08016							City, State, Zip Coo						_
Project Manager for Monito				Tra	lo-1		BRISTOL, PA	19007					
Michael Keehn						one No.	Telephone No.		License No				_
Start Date (10)		School	10-1-0	1 6	103-3	386-8800	215-788-6040		00509				
09 /01 /	11	10	led C	ombl	etion 1	Date (11)	Name of OSHA Mo						_
Occupancy Status During Al		/Chest			<u>-</u>		BRISTOL ENVI	RONMENTAL.	INC.				
T Facility Closed/Algorited 1	Jusine 5-4	(uneck o	o Vinc	ne)	votako.	M410-3-0-0	Street Address						
Facility Closed/Vacated D Abatement Performed Out	teide of M	ire Perio	d of A	Abate	ment		1123 BEAVER	STREET					
Time of Abatement: 7:00	AM-3:301	ormai Fa	acility	Hou	rs - D	escribe	City, State, Zip Code						
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cope of Work (Check all tha	t apply)						J	JUU1					
≥3 sf or ≥3 H ≥160 sf or ≥260 H			Ren Dem	ovatio olitio	on n		Glovebac Pr	Ocedure					
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Location of Asbestos-Containing Mate	rial /A Ot o		No Jsed	mall	y		Description of			A	bater	nent T	v
TO BE ABATED	nei (ACM)		Maint	lenan	ce/	Asbesto	os Containing Materia	I (ACM)	A			_	T
IN Facility		C	ustoo	dial St	laff?	(i.e., t	nermal systems insul	lation,	Amount (Specify	es es	Repair	nc	1
(13)		_	(12)	Specie		surfacing, VAT, or other miscellaneous)		SF or LF)	Removal	15	sde	
		Ye	S	No	N/A		or macenaneous)		2	-		Encapsulate	1
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floor floor		_	-	-			barrier material		320 SF	\boxtimes			

ASBESTOS CONTROL & LICENSING

State of New Jersey! NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2): / 11 Princeton University - Office of Design and Construction Agencies Notified Type Notification **⊠** EPA Street Address Initial DOLWD 200 Elm Drive Amended **⊠** DHSS Amendment #1-8/23/11 City, State, Zip Code Ø DCA ☐ Emergency (including Princeton, NJ 08544 (NJAC 5:23-8) justification) Name of Contact ☐ Cancellation Telephone Number Robert Ortego Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION Princeton University - JADWIN HALL Type of Facility (4) Street Address School (K-12) Subchapter 8 (Other than K-12)

Other (i.e., private and commercial buildings, Washington Road City (5) Princeton Square Feel # of Floors County (6) Bldg. Age County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Mercer Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC Associates Inc. 00098 BRISTOL ENVIRONMENTAL, INC. Street Address Bromley Corporate Center - Three Terri Lane Street Address 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Burlington, NJ 08016 Project Manager for Monitoring Firm BRISTOL, PA 19007 Telephone No. Telephone No. Michael Keehn 609-386-8800 License No. 215-788-6040 Start Date (10) Scheduled Completion Date (11) 00509 Name of OSHA Monitor 09 / 01 / 11 10 / 31 / 11 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement Street Address ☐ Abatement Performed Outside of Normal Facility Hours - Describe 1123 BEAVER STREET Time of Abatement: 7:00AM-3:30PM/ PM- AM City, State, Zip Code Scope of Work (Check all that apply) BRISTOL, PA 19007 □ Full Containment with Negative Pressure
 □ Mini-Enclosure
 □ Glovebao Procedure □ Renovation ≥160 sf or ≥260 ff Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Location of Normally Asbestos-Containing Material (ACM) Used Solely by Abatement Type Description of Asbestos Containing Material (ACM) TO BE ABATED Maintenance/ Repair Removal (i.e., thermal systems insulation, Custodial Staff? Encapsulate IN Facility Amount (13)surfacing, VAT, or (Specify (12)SF or LF) other miscellaneous) Yes No N/A 3rd floor Ø Ceiling Plaster 482 SF П Name of Registered Waste Hauler

NJDEP Waste

State of New Jorsey

NOV 2 1 2011

NOV 2 1 2011

NOTIFICATION OF ASBESTOS ABATEMENT ASBESTOS CONTROL & Date of Notification (1) LICENSING Name of Building Owner Operator 18 Princeton University Office of Design and Construction Agencies Notified Type Notification Ø EPA 0208 Street Address Initial DOLWD0338 200 Elm Drive ☐ Amended Ø DHSS 0215 NOV Amendment #_ City, State, Zip Code Ø DCA 0/6/ ☐ Emergency (including Princeton, NJ 08544 (NJAC 5:23-8) justification) Name of Contact ☐ Cancellation Robert Ortego Telephone Number Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION. Princeton University - JADWIN HALL Type of Facility (4) Street Address School (K-12) Washington Road Subchapter 8 (Other than K-12) City (5) Other (i.e., private and commercial buildings, Princeton Square Feet # of Floors County (6) Bldg. Age County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Mercer Name of Monitoring Firm Hired by Building Owner (8) ASCM No. ATC Associates Inc. Name of Abatement Contractor (9) 86000 Street Address BRISTOL ENVIRONMENTAL, INC. Bromley Corporate Center - Three Terri Lane Street Address City, State, Zip Code 1123 BEAVER STREET Burlington, NJ 08016 City, State, Zip Code Project Manager for Monitoring Firm BRISTOL, PA 19007 Telephone No. Michael Keehn Telephone No. 609-386-8800 License No. Start Date (10) 215-788-6040 Scheduled Completion Date (11) 00509 09 / 01 / 11 Name of OSHA Monitor 10 / 31 / 11 Occupancy Status During Abatement (Check only one) BRISTOL ENVIRONMENTAL, INC. ☐ Facility Closed/Vacated During Entire Period of Abatement Street Address ☐ Abatement Performed Outside of Normal Facility Hours - Describe 1123 BEAVER STREET Time of Abatement: 7:00AM-3:30PM/ City, State, Zip Code Scope of Work (Check all that apply) BRISTOL, PA 19007 ≥3 sf or ≥3 ff □ Full Containment with Negative Pressure
 □ Mini-Enclosure □ Renovation Ø ≥160 sf or ≥260 H ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Location of Normally Asbestos-Containing Material (ACM) Used Solely by Description of Abatement Type TO BE ABATED Asbestos Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, IN Facility Custodial Staff? Repair Amount Encapsulate Enclosure (13)surfacing, VAT, or (Specify (12)SF or LF) other miscellaneous) Yes No N/A 3rd floor X Floor tile and mastic 3rd floor \Box 27,295 SF Ø \boxtimes Saddle block 3rd floor 85 each Ø X wall vapor barrier material П 3rd floor 220 SF X \boxtimes П fittings Name of Registered Waste Hauler NJDEP Waste 10 each SERVICE TRANSPORT GROUP, INC. Ø Cubic Yards of Hauler ID No. Name of Registered I ---

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

			(1	Pursua	nt to NJAC 8:60	and 12:12	20)	- New Wilder	宣 俊 俊	1		图		
Date of Notification (1)	ovember 16, 201	.1			Name of Building		erator (2) L lle Madsen	D	見場当	-W-	-15			
Agencies Notified [x] EPA [] DEP [x] DOL [x] DOH [] DCA	November 16, 2011 Notified		fication		Street Address City, State, Zip Co	ode	rel Lane er, NJ 07930 en		NOV 2	20				
	- National Control		555	FAC	CILITY INFORM	IATION	1840	CONTRACTOR OF THE PARTY.	and the second second		**		THE PROPERTY.	
Res Street Address	idence)				Type of Faci	ility (4)]] X]	School (k-12) Subchapter 8 (cth Other (i.e., priva			ial bui	ldings,	
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		Owner (8	3)		ASCM No.	Name of				Inc				
Street Address		386 585				Street Ac	idress			me.				
City, State, Zip Code	0,000					City, Sta	te, Zip Code			ev 08′	755-1	271		
Project Manager for Monit	oring Firm	- [Telephone 1	Number		Telephor	ne Number	Oms re	License N 00624					
			12/01/1		tion Date (11)	Name of	OSHA Monito E		. Analytical					
[X] Faci	lity Closed/Vacated tement Performed C	During	Entire Perio			City, Sta	1 te, Zip Code		elton Road ray, New Jerse	y 088	54			
[] >3 s	for≥3 lf		[] [x]	Renova Demol		[] [] [x]	Mini-Encl Glovebag	osure Procedu	with Negative Pre re and Non-Friable I		ıre			
									11.	Abat	ement	Туре		
Asbestos-Containing M TO BE ABA in facility	Iaterial (ACM) TED	N	s Location ormally us Solely by enance/Cu Staff (12)	ed	Asi (i.e ins	Description pestos-Con Material (A ., thermal sulation, sur VAT, of the miscellar misc	taining .CM) systems rfacing, or		Amount (Specify SF or LF)	ecify SF M P C				
Exterior			X		Asbestos sidir	ng			900 sf	X				
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Name of Registered Waste		N.	DEP Waste		아님 전에 가는 아이들이 되었다.	ards ofWast	e Name of T.R.F		ed Landfill					
City, State			20	Dispo: 12/02	sal Date	City, Sta								
Completed by (Print or Typ Nicholas Ferr	oe)		t Manage		Signature	c los	1 I	1 vania	1	Date 11/1	6/20	11		
					n for asbestos licer	sure exem	pted activities	S.						

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) Name of Registered Waste Hauler Name of Reg	9		NC		ATION	OF ASBI	ESTOS	ABATE		ME	GE	0 0	7 [6		1
September Sept										Φ Blackp	ort	· · · · ·	117	11	
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DOH	DEP	Amended Amendment						3316	1)L &		600000000
Name of Facility Where Abatement is Taking Place (3) Former Residential Housing Street Address Update (10) Name of Monitoring Firm Hired by Building Owner (8) Street Address County Code (7)	X DOH	justification)		- 60			/ Own	er Rep			A LEAD REAL PROPERTY OF THE PERSON NAMED IN	and the same of th	-		
Name of Facility (Aprez Abatement is Taking Place (3) Street Address Suchapter 6 (Other than K-12) School (K-12) Sch				-1-					-	Office and a	- 60	ځـــــ	!	and a field of	****
Subchapter & Cother han N-LT County Code (7) County (6) County (6) County (6) County (6) County (6) Atlantic City County (6) Atlantic City County (6) County (7)			g Place (3)												
Square Feet									Sub-	chapter 8 (0 er (i.e. priva			dings,	home	es,
Atlantic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Street Address Street Address 151 Forest Ave City, State, Zip Code Fair Lawn, NJ 07406 Scope of Work (Check All That Apply) Street Address City, State, Zip Code Fair Lawn, NJ 07406 Scope of Work (Check All That Apply) Street Address City, State, Zip Code Fair Lawn, NJ 07406 Scope of Work (Check All That Apply) Street Address City, State, Zip Code Fair Lawn, NJ 07406 Scope of Work (Check All That Apply) Street Address City, State, Zip Code Fair Lawn, NJ 07406 Scope of Work (Check All That Apply) Street Address City, State, Zip Code Fair Lawn, NJ 07406 Scope of Work (Check All That Apply) Street Address City, State Cit									Square F	eet i					
Street Address Street Address Street Address Street Address Street Address 151 Forest Ave City, State, Zip Code Lyndhurst, NJ 07071 Project Manager for Monitoring Firm Telephone No. Project Manager for Monitoring Firm Telephone No. Scheduled Completion Date (11) 02/29/11 Cocupancy Status During Abatement (Check Only One) Abatement Performed Outside of Normal Facility Hours Other - Describe: Store 4 Address 20-21 Wagaraw Road City, State, Zip Code Fair Lawn, NJ 07406 Street Address 20-21 Wagaraw Road City, State, Zip Code Fair Lawn, NJ 07406 Scope of Work (Check All That Apply) 33 st or 23 if 25 stor 25 if 26 store 260 if Renovation Demolition Scope of Work (Check All That Apply) Absetsos-Containing Material (ACM) In Facility (13) Please See Attached list NMA Please See Attached list NMA Please See attached list NMA Please See attached list NAME of Registered Landfill T.R.R.F. City, State Lyndhurst, NJ Completed by Title Signature7 Date City, State City, Sta)					hed)			
Star Date (10)	Name of Monitoring Firm	m Hired by Building	Owner (8)		ASCM	l No.		100000000000000000000000000000000000000							
Lyndhurst, NJ 07071 Project Manager for Monitoring Firm	Street Address									/e					
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22/5/11 O2/29/11 Envirovision Consultants	Project Manager for Mo	nitoring Firm		T	elephon	ne No.				5		No.			
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe: Scope of Work (Check All That Apply) Saf or ≥3 If ≥3 sf or ≥260 If Renovation Demolition Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Ty	() - 1 () - 1 () () () () () () () () () (pletion D	Date (11)					its				
Abatement Performed Outside of Normal Facility Hours Other – Describe: City, State, Zip Code Fair Lawn, NJ 07406	Occupancy Status Durin	ng Abatement (Chec	k Only One))	-					aw Road					
23 sf or ≥3 if		ned Outside of Norm			ent			City, S	tate, Zip C	ode	•				
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Please See Attached list Name of Registered Waste Hauler Global Safety Contracting Corp City, State Lyndhurst, NJ Used Solely by Maintenance/ Custodial Staff? (12) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Application of Waste See attached list X Please see attached list X Please see attached list X Name of Registered Landfill T.R.R.F. City, State Lyndhurst, NJ Completed by Title Signature Date			100000000000000000000000000000000000000		22.5								Abate	ement	t
Please See Attached list X Please see attached list X Please see attached list X Name of Registered Waste Hauler Global Safety Contracting Corp City, State Lyndhurst, NJ Completed by Title Please see attached list X Please see attached list X Please see attached list X Disposal Date Date	Asbestos-Containing TO BE AE In Fac	g Material (ACM) BATED ility	Used Main Custoo	Normally ed Solely by aintenance/ stodial Staff? (12) Asbestos (i.e. the				aining M systems cing, VA	faterial (AC s insulation T, or		(Specify	Removal	Repair	Encapsulate	Enclosure
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Global Safety Contracting Corp Hauler ID No. 32604 City, State Lyndhurst, NJ Completed by Title Global Safety Contracting Corp T.R.R.F. City, State Tullytown, PA Signature 7 Date	Please See A	ttached list			Х	PIE	ease se	ee atta	ched list			X			
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Lyndhurst, NJ Completed by Title Signature Date	Global Safety Contr	racting Corp						ste	T.	R.R.F.					
							Dispos	sal Date			PA				
	Completed by Mark Jovic			resid	lent		S	ignature	201	7	100		11		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

	NOTI			o NJAC 8:60			in principality and the second		1	97	95	052.
Date of Notification (1) November 17, 201	1		N	ame of Building	Owner/Ope Abatar	rator (2) e Buil	ders Ine	E P E	<u> </u>	E		1
[] DEP [] Amend [x] DOL [x] DOH [x] Emerging justified	Notificatio ded Notific dment # ency (inclu	ation	C		Brick,		Те	NOV 2	1 20			
Name of Facility Where Abatement is Taking	Place (3)		FACIL	ITY INFORM	MATION	Туре	of Lacility (4)	Charles and State of the Augustian				
Building Street Address 256 Rte. 37 West							[] [] [x]	School (F12) Subchapter 8 (oth Other (i.e., private homes, etc.)			al build	ings,
City Toms River	County (5)		ounty Code (7) TATE USE ON	LY)		re feet 5500 sf ent Use (Prior if Building	# of Floors 1 being demolished)	Bldg.	Age 50	0	
Name of Monitoring Firm Hired by Building Guardian Contract	Owner (8)	-	A	SCM No.	Name o	f Abater	nent Contractor		Inc.			
Street Address 1889 Rte. 9, Unit 6	36				Street A	ddress	1889 Ro	oute 9, Unit 61				
City, State, Zip Code Toms River, NJ 08 Project Manager for Monitoring Firm Nicholas Fernicola Scheduled Start Date (10)		n Date (11)		one Num 19-993 f OSHA	Toms R liber 2 Monitor	License N 00624		55-12	271			
11/17/11 11/18/11 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Check all that apply)				IS a	City, St	ate, Zip	Code Piscatav	elton Road way, New Jerse with Negative Pre		54		
Scope of Work (Check all that apply) [] >3 sf or ≥3 lf				on on	[[[x] N	Mini-Enclosure Novebag Proced		Procedu			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Custo Staff (12) YES NO N				(i	Descript Asbestos-Co Material (i.e., therma nsulation, s VAT, other misce	ontainii (ACM) Il syster surfacin , or	ms ·g,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Ceiling		X		Asbestos tra	ansite pan	els		125 sf	Х			
								-			-	
	-											
Name of Registered Waste Hauler Guardian Contracting, Inc.		IDEP Wast	e Hauler 1	ID No. Cubic	Yards of W		Name of Regist T.R.R.F.	ered Landfill				
City, State Toms River, New Jersey				al Date /11	City, Tull	State ytown	Pennsylvani	a	I Dec			
Completed by (Print or Type) Nicholas Fernicola	Title Projec	t Manag		Signature	chi	1/	fer	1	Date 11/	17/20	11	
Thomas I shired		for asbestos li	censure ex	empted	activities.							

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) School District Egg Harbor November 17, 2011 Street Address Agencies Notified Type of Notification 7 Swift:Dri Initial Notification [X] EPA] DEP Amended Notification City, State, Zip Code Amendment #_ [x] DOL Egg Halbor Twp., NJ 08234 Emergency (including [x] [x] DOH justification) Name of Contact] DCA Cancellation Henry Rodrique **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) [x]School (k-12) Clayton J. Davenport Elementary School Subchapter 8 (other than k12) Street Address Other (i.e., private & commercial buildings, 2501 Spruce Avenue homes, etc.) Bldg, Age County Code (7) # of Floors Square feet County (6) City 40 (STATE USE ONLY) 89,000 sf Current Use (Prior if being demolished) Egg Harbor Twp. Atlantic School Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Guardian Contracting, Inc. Epic Environmental Street Address Street Address 1889 Route 9, Unit 61 130 Brown Road City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271 Newfield, NJ 08344 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 732-349-9932 00624 Jim Eberts 856-205-1077 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) E.M.S.L. Analytical 11/18/11 Street Address Occupancy Status During Abatement (Check only one) 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 Full Containment with Negatve Pressure Scope of Work (Check all that apply) Mini-Enclosure] Glovebag Procedure Renovation >3 sf or ≥3 lf [X] [x]Non-Exempted (*) and Non-Friable Procedure Demolition ≥160 sf or ≥260 lf [x]Abatement Type Description of Is Location E Amount Asbestos-Containing Normally used N Location of E N E (Specify SF Material (ACM) C Solely by P C Asbestos-Containing Material (ACM) M or LF) (i.e., thermal systems L A A Maintenance/Custodial TO BE ABATED 0 P 0 insulation, surfacing, Staff in facility S R S VAT, or (12)(13)U A other miscellaneous) R L L YES NO N/A E X 3800 lf X Exterior caulk Exterior Cubic Yards of Waste Name of Registered Landfill NJDEP Waste Hauler ID No. Name of Registered Waste Hauler 20223 T.R.R.F. Guardian Contracting, Inc. Disposal Date City, State City, State 1/02/12 Tullytown, Pefinsylvania Toms River, New Jersey Date Signature Completed by (Print or Type) Title 11/17/2011 Nicholas Fernicola Project Manager

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

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Agency Notified	Type Notification		Stre	ent Addre			BIN BASEO	NSING THE RECEIPTED TO SEE	-
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			FA		MFORMATION		HIL	1	7
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State of suremanne	Frontage					U School U Subth	(K-12) Aplai 8 (Other these K-12 Le private 8 communic etc.)	18.94	I
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Joe Hill Tale VP . Signature Att 11-18-11	1. 25357 Cutoto Yeards of Resmo of Registered Landill Waste 4cy WAY of Pa	

CK 1271

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

Date of Notification (1)			Name o	f Building Owne	Operato AR	(2) (200) E	TANE SOU		D.W	no?	Tron
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CAMDEN						25,000	A	نداست	u F.	3/4	7.
County (6) CAMDEN				Code (7) USE ONLY)			ior if being demolish	ed).	•		
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	Л No.		of Abatement Co			-		
Street Address			L			9512 L	<u> </u>				
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Project Manager for Monitoring Firm			Telepho	ne No.	856	hone No. -439-10a	50 License No.	2.			
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Hours - Dodori []other - Descri- cope of Work (Check : [] >160 sf or >: [] >160 sf or >: Location of Abbouton (ontal Material (AC TO BE August In Familio	all that apply) 3 16 [X 2260 lf [] of Localing (M) of Decrease (M) sy Constant (M) Stant (M) Stant (M) Stant (M) To Handler (M) To H	Joanolition Is contion continue con	[]Mini-Er [K] Glovebe [] Non-Vri Description Aubortos-Conta Material (Ar (i.e., thermal r insulation, surfac or other miscell: Pipe Insulation Cubic Yards of Wasta . 5	or recedure able brocodure of ining M) Nystems ing, VAY, ancous) OR Same of Registo G.R.O.W.S.	Amount (Epecify SF or LF) 18 1f	Abntons R R R R P Q A I L L K	H V N N N N N N N N N N N N N N N N N N			

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

The same	10	(0)	F-2	D	D.O		-
Ti Ti	E	10	F	11	11//	E	-
111//	1-1	(9)	1	П	17	15	11
11 000	1	11100000000		the party of the last			П
1:1 2	1					- 1	11

Date of Notification (1)				Name	of Buildi	ng Owner/Operato	r (2)	111 111 NO	V 2 1		101			
11-17-1	1			Woodside Associates, Inc										
Agency Notified	Type Notification				Address		000, 1110							
			.			Pleasant	Road	ASBE:	STOS CO	NTR	OL	ŝ		
CKEPA CKDEP	□ Amended		ł		state, Zip		110010		LICENSI	VG.				
E DOL	Amendment #			Che	ster	Heights	PA 190	17						
ĽХООН	☐ Emergency (inclu justification)	ding	ŀ	Name	of Conta	ict	*THY.	Jalanhana Num	her			-	-	
DXDCA	☐ Cancellation			Jen	nife	r Borys		1		-				
				7.000		FORMATION								
Name of Facility Where	Abatement is Taking P	lace (3)				O'tany (1101)	Type of Facility	v (4)			-			
Former BP G														
Street Address							☐ School (K-1:	2) 8 (Other than K-12)					
1010 Saint	Coorgola Ar	tonii	_				☐ Other (i.e. p	rivate & commercia		IS,				
City (5)	George's Av	enu	=			*	homes, etc. Square Feet					_	_	
Rahway							2700	1	+/-					
anna an ann an an an an an an an an an a				Carrat	· Cada /	N IOTATE LIGE				2	0	_	_	
County (6)				ONLY		7) (STATE USE	1	rior if being demoli						
Union						T 37 7.41		gas stati	on		1	9	_	
Name of Monitoring Firm Hired by Building Owner (8) EHS Environmental ASC				No.			nent Contractor (ntractor(9) conmental Services, Inc						
											11	110	-	
Street Address 9 S. Main Street					Street Address 2251 Fraley Street									
14 15 15 15 15 15 15 15														
City, State, Zip Code Mullica Hill, NJ 08067						City, State, Zip (ode phia, PA	19137						
			-16-	M-		Telephone No.							_	
Project Manager for Monitoring Firm Teleph Jack Carney 856			and the same		-0080		00848							
Start Date (10) Scheduled Completion Da													_	
11-29-11 Scheduled Completion D				EHS Environmental										
						Street Address		<u></u>		_			_	
Occupancy Status During Abatement (Check only one)						and the second s	Main St	reet						
Facility Closed/Vacate Abatement Performed						City, State, Zip C								
☐ Other - Describe:						Mullica 1	Hill, NJ							
Scope of Work (Check a	Il that apply) *aba	teme	nt	pri	or to	demo*						-	-	
□≥3sfor≥3lf	, aba	ceme	.110	O Dan	ovation	D Full	demo* □ Full Containment with Negative Pressure □ Mini-Enclosure □ GGlovebag Procedure							
© ≥ 3 1 01 ≥ 3 11 © ≥ 160 sfor ≥ 260 lf	82			APPROXIMATE AND ADDRESS.	nolition									
					,	⊠ Non-	Exempted (*) an	d Non-Friable Proc	Procedure					
			Locat							Abatemeni Type				
Location	on of		Normal ed Sole		l	Description	of	Amount		Т	7			
Asbestos-Containin	g Material (ACM)	Ma	intena	nce/		stos Containing Ma				\mathbb{R}^{\mid}	_	Encapsulate		
TO BE A			Custodi Staff?		(i.e	., thermal systems surfacing, VAT		(Specify SF or LF)	1	em	Repair	aps	Eliciosule	
(13		İ	(12)			other miscellane				Removal	욕	sufa	Sure	
				LAURA				*		-		e	"	
front office		Yes	No	N/A	12212	grayVAT (botte	om laver)	270 SF		x	+	0000	-	
					-		om rayer/			-	+		-	
Roof				х	tar	· · · · · · · · · · · · · · · · · · ·		200 SF		<	+	- 5	H	
										_	_		-	
A CONTRACTOR OF THE CONTRACTOR														
Name of Registered Was	ste Hauler	100000	DEP V No.	Vaste H	auler	Cubic Yards of Waste	Name of Regis	stered Landfill						
Service Tran	sport	10	140.			Trace	A & L S	alvage						
City, State						Disposal Date	City, State						_	
ony, state Morrisville,	PA					Disposal Date	Libson,	OH						
Completed by	Title		2904204174	<u> </u>		Signature • >	LIDBOII,		Date			1000	_	
Jennifer Niv	ven Dir. o	f Op	era	tio	ns	On A			11-1	7-	-1	1		
SB-41			Markey State	WW. 1757	- 4	censure exempted						_		

Check # 1048

; 1121			ATION O	F ASB	ESTOS ABATEMENT C 8:60 and 12:120)	(F) E	V P P P P P		£1		21,11	
Date of Notification (1)	MOV.	11	11]		ing Owner/Operator (2)		o E I W I		CO.	7	-	
11/16/11	- · LUII		Ferro C	orpora	tion 🖟.		/		1			
Agencies Notified	Notification Type ASBESTOS CONTROL & Initial NSING]	Street A			NOV 1 9 2011						
ET OF THE SAME PROPERTY.	Amendment #1		City, St.	ate, Zip	Code 08014	ASPESTOS CONTROL &						
□ DOH		ing	Name o		1.		Telephone Nu	mber			190000	
DCA	Cancellation		John I			francisco						
			FAC	ILITY I	NFORMATION							
Name of Facility Where Abatement is Taking Place (3) Ferro Corporation						Type of Facility (4) ☐ School (K-12)						
Street Address Rt 130 South						☐ Subchapter 8 (other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.						
City (5) Bridgeport						Square Feet	# of Floors	BI	dg.	Age	;	
					ounty Code (7) (STATE SE ONLY)	Current Use (p	prior if being demo	lished	i)			
Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No.				Name of Contractor (9) County Environmer								
Street Address P.O. Box 160					Street Address 461 New Churchmans Rd.							
City, State, Zip Code Kirkwood DE,19708		-			City State, Zip Code New Castle, DE 19	720						
Project Manager for Monitoring Firm Telephone No.				10	Telephone Number (302) 322-8946		License Number	er				
Lew Morrison Scheduled Start Date (10					Name of OSHA Monitor		1 00370			Hillian		
11-18-11 Occupancy Status During	11-18-11	one)			County Environmer Street Address	ntal						
☐ Facility Closed/Vacate			ment		461 New Churchma	ans Road						
☐ Abatement Performed ☑ Other – Describe: Stor	Outside of Normal Facil rage facility				City, State, Zip Code New Castle, DE 19	720						
Scope of Work (Check all	that apply)				☐ Full Conta	inment with Neg	ative Pressure					
\boxtimes ≥ 3 sf or ≥ 3 lf \boxtimes Renovation \square ≥ 160 sf or ≥ 260 lf \square Demolition					ovation	sure Procedure	n-Friable Procedur	re.				
		T		4]	.,,			bate	eme	nt	
	8		ls Location Normall		Description			-	Ту	ре		
Locati			sed Solel laintenar		Asbestos Containing M (i.e. thermal systems	aterial (ACM) insulation,	Amount (Specify	7.		En	ш	
Asbestos-Containing Material (ACM) TO BE ABATED			Custodial surfacing, VA' Staff? other miscellan			T, or SF or LF)			Repair	Encapsulate	Enclosure	
IN Facility (13)			(12)			eous)		Removal	H.	ulate	sure	
		Yes	No	N/A							l å	
Small amount of PACM d been found on top of the		x			Insulation is a thermal a from hot water line.	pplication	4 If	X	X	Х		
Work has to be performed on in area. Remaining 4 L	d so heat can be turned											
removed that is damaged												
*removal of the 70SF of tr	ransite panels on the		-		(2) 4x8 Sheets of Trans	ite Panels	70sf	X	-			
slurry storage building to repairs/welding to the corr	facilitate the											

1) EGEIV				ew Jers	ey BATEMENT	- with	whether with the first of the table or the sales we	N. V. Millianne	٠.,	51 66		
181-182)) (nd 12:120)	ING	CEIN	7 6	7	-	7	
Date of Notification (1	NOV 2 1 2011		Name of I Ferro Cor			Operator (2)	TIME		-15	1	गो	İ	
Agencies Notified	Notification Type ROL &		Street Ad Rt 130 Sc	dress			100 19 2011						
	Initial ENSING		City, State			3	ASBESTOR CONTROL &						
⊠ DOL *	Amendment # Emergency (Include	ina L	Bridgepor			R R	Telephone Number						
☐ DOH ☐ DCA	Justification) Cancellation		John Ne		Cl								
			FACIL	ITY II	NFORMA	TION							
Name of Facility Whe Ferro Corporation	re Abatement is Taking Plac	ce (3)					Type of Facilit	y (4)			200000		
Street Address Rt 130 South							☐ School (K-12) ☐ Subchapter 8 (other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.						
City (5) Bridgeport							Square Feet	# of Floors	Ble	dg. A	∖ge		
						e (7) (STATE	Current Use (prior if being demolished)						
Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. ESI						Name of Contractor (9) County Environmental							
Street Address P.O. Box 160					Street Address 461 New Churchmans Rd.								
City, State, Zip Code Kirkwood DE,19708					City State, Zip Code New Castle, DE 19720								
Project Manager for Monitoring Firm Tele			lephone No. Telephone Number (302) 322-8946				License Number 00578						
Scheduled Start Date 11-18-11	(10) Scheduled Cor 11-18-11	mpletion	Date (11)		1	f OSHA Monitor / Environmer	ntal						
Occupancy Status Du	iring Abatement (Check only	one)			Street A	ddress ew Churchma	ans Road						
☐ Abatement Perform	cated During Entire Period of med Outside of Normal Faci Work will be done in a smal	lity Hour	s -		City, State, Zip Code New Castle, DE 19720								
Scope of Work (Chec	k all that apply)		×		ovation nolition		Procedure	ative Pressure	ıre				
		T	Is Location						A	Abatemer Type			
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)		Us	Normally Used Solely by Maintenance/ Custodial Staff? (12)		Description Asbestos Containing (i.e. thermal system surfacing, V other miscella		laterial (ACM) insulation, T, or	Amount (Specify SF or LF)	Removal			Enclosure	
		Yes	No	N/A									
been found on top of		х				on is a thermal a ot water line.	application	4 If	X	×	X		
											\exists	_	
Name of Reg. Waste Service Transport Gr		ID	NJDEP Waste Hauk ID No.			Cubic Yards of Waste	Name of Re Minerva I					Ī	