Sets of Netters (6)								-	1/1	702	
Date of Notification (1)			Name o	f Building Ow	ner/Operator	(2) SEF	, LLC #3	60	·	6/	//
Agencies Notified Type Notification	i		Street A	ddress	1702	- 302	1 200	.01	35.8	70	
EPA Initial	į.		20	00 P	EVOL	1 AVE	. #3	(٤Ľ,	CE	100
EPA Initial Amended Amendment	a	,	City, Sta	ate, Zip Code		r //	60106			0/-	13/
I I Emergency	(including	, -	DL	NOSEN	VILL	E, 12	60106				
DOH justification)			MONING O	Cuntact			Tolonhana M.	•••		and the second	
DCA Cancellation	1			2. MI							
Name of Facility Where Abatement is Takir	ng Place ((3)	PAG	LITY INFORI	VIATION	Type of Facility	(4)				
TALMADGE SGE						School (K-		*			
Street Address	0 1	,				Subchapte	er 8 (Other than K-12				
44 TALMADGE	COAN					Other (i.e. etc.)	private & commercia	al buil	ldings	, hom	es,
City (5)						Square Feet		T	3ldg.	Age	
EDISON			2020			230,000	/		5	2	
County (6) MIDDLESEX				Code (7) USE ONLY)		Current Use (Pr	ior if being demolish	ed)	1		
Name of Monitoring Firm Hired by Building	O (0	$\overline{}$					T WAREHO	156	10	FF	CE
	Owner (8)	ASCN	I No.		of Abatement Co lac Contractin					
Street Address	G.			1920	1	Address Lowell Road	The second of th				
City, State, Zip Code					City, 8	State, Zip Code	***************************************				
0.1.11						Rock, N.J. 0	7452				
Project Manager for Monitoring Firm		1	Telepho	ne No.		none No. -262-5841	License No 00156).			-
Start Date (10) /0/8/12	Schedu	ed Co	mpletjon/	Date (11) / 2		of OSHA Monitor	ental Services In	C.			-
Occupancy Status During Abatement (Chec	k Only O		- A			Address					
Facility Closed/Vacated During Entire	Period of	Abater	nent		280	Huyler Street					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	nal Facilit	y Hour	S			itate, Zip Code kensack, NJ 0	7606				-
Scope of Work (Check All That Apply)					1100		7,000				
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demoli		C.S.	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure						
					Ž	Non-Exempte	d (*) and Non-Friabl	e Pro	cedu	1 20	
	Is	Locat	ion				1	1		emen	ŧ
Location of		Normal	lly		Description	of				/pe	
Asbestos-Containing Material (ACM) TO BE ABATED		ed Sole			Containing N	faterial (ACM)	Amount			m	Г
In Facility	Cus	todial S	Staff?		rmal systems urfacing, VA		(Specify	Re	20	Encapsulate	Enclosure
(13)		(12)			ner miscellar		SF or LF)	Remova	Repair	usq	Sol
	Yes	No	N/A					22	-	late	ē
OFFICE AREAS			×	VAT	+ MA	ASTIC	43, 716 SF	x	-	-	-
OFFICE / WAREHOUSE			X		PIPE		8,8000		 	-	
OFFICE WAREHOUSE			X	Out	CT INS	ULATION	200sF		-	-	-
			+				0003/		-	-	_
Name of Registered Waste Hauler		IN	JDEP W	aste I Cu	ubic Yards	Nama af	Dogistered Lands				
Rovic Transport	H	lauler ID I 0785		Waste 50	1	Registered Landfill A Bethlehem La	ndfill	Cor	p.		
City, State Riverdale, New Jersey 07457					sposal Date	City, Stat	e hem, PA 18015				
Completed by	Title				Signature	7			,		
R. McDonald	0.0110.00000000000000000000000000000000	ident			Signature	Miland	ld Dat	0	5	1,2	

* POSTPONE

103770.02			State of	New Jers	01/				0-0	hec	k#_		
	N	(Pur	ATION OF AS	SBESTOS AC 8:60 ar	ABATE	(0)		201-	REC	EI	VE	'n	
Date of Notification (1) 7 / 1 2		Ne	TAL	ng Owner	Operato	r (2)	SEF	-812	10CT 11	PA			
Agencies Notified Type Notification	n	St	reet Address	0-			0 . 0	bot	Sin	- 17	1:	42	
☐ Initial ☐ Amended ☐ Amendme		C	y, State, Zip	DE	UOK	_	AUE	, d-	Tire C	OM	In.		
	nt # y (including	*	BENS,	ENV	ILL	E,	SGE AVE IL	60	0106	ING	מא	٤.	
DOH justification	1)	1	ine or conta	CL				Te	lenhone Nu	ımber	. (
E Guidella			MR. FACILITY IN			-6-							
Name of Facility Where Abatement is Tak TALMADG-E SG-E	ing Place (3)				··oit	Ту	pe of Facility	(4)					
Street Address							School (K-		orthon K	10)			
City (5)	ROAD					×	Other (i.e. etc.)	private	ner than K-1 & commerc	iz) cial bu	ilding	s, hor	nes,
EDISON							uare Feet		f Floors	T	Bldg.		
County (6)		Co	unty Code (7)		Cu	30,000 rrent Use (Pr	ior if he	inn demolis	(hed)	5	<u>人</u>	
MIDDLESEX		(ST	ATE USE ON	ĹŊ		V	ACAN	T. W	AREH	1451	E/0	OFF	ICE
Name of Monitoring Firm Hired by Building	Owner (8)	1	ASCM No.				batement Co Contractin		(9)		/		
Street Address				Street 105		ress vell Road							
City, State, Zip Code					City, S	tate,	Zip Code	7450					
Project Manager for Monitoring Firm		Tel	ephone No.		Teleph	none	No.	432	License N	lo.			
Start Date (10)	Scheduled	Comple	tjon Date (11	1)			-5841 SHA Monitor		00156				
POST PON	E			7 0			Environme		ervices l	nc.			
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire			Street Address 280 Huyler Street										
Abatement Performed Outside of Nor Other – Describe:	mal Facility H	ours	urs City, State, Zip Code Hackensack, NJ 0										
Scope of Work (Check All That Apply)					Hack	COLIS	sack, NJ U	7000					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Carrier	novation nolition	Olition Mini-Enc					ainment with Negative Pressure osure Procedure mpted (*) and Non-Friable Procedure			20		
	Is Lo	cation						1/55		T		emen	ıt
Location of Asbestos-Containing Material (ACM)		mally Solely by	,	Des	scription	of				-		/pe	_
TO BE ABATED	Mainte	enance/ ial Staff	Asbe	stos Cont e. thermal	aining Mi systems	ateria insu	al (ACM) lation.		mount pecify	70		g	m
In Facility (13)	- E	12)		surfac	ing, VAT	T, or			or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes N	NO N	/A				,			Val	#	ulate	ure
OFFICE AREAS		>	(VA	+ T +	mA	1.57	70	42	716 SF	V	-	-	-
OFFICE / WARRHOUSE)		Pir			, _		800 F		-		-	
OFFICE WAREHOUSE	×	c .	DUCT		ULA	NOTE		300SF	1-			-	
N							•	-7,700 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
Name of Registered Waste Hauler Rovic Transport	NJDEP Waste Cubic Yards Hauler ID No. of Waste 20785			IECI DA Pothiches I - ISU O									
City, State Riverdale, New Jersey 07457		2010	-	Dispos			City, State	·			. 001	μ. 	
Completed by	Title			1	7c/12	_	Bethleh	em, P	A 18015			(9)	
R. McDonald	ent Signature Mc					Date 8/7/12							

Date of Notification (1) 10/05/12					Owner / Operate Glass, Inc.		E#12 0C	III PM				
Agencies Notified Type Notification		Street				:	45BEST		1:4	1		
EPA	+	537 C	rys	tal Av	e. '		10 ac 21	OS COM	_			ž.
DEP Initial		0.50		& Zip			or [1	CENSIN	PROI			
DOL Amended				, NJ 0		<u> </u>		-MOING				
□ DOH □ Emergency				ontact					Telep	ne l	Numl	oer
☐ DCA ☐ Cancellation	-	C/O P	atri	ick La	rney							
		FAC	CILI	TY INI	ORMATION							
Name of Facility Where Abatement is Taki	ng Place (3	3)			Type of Faci							
Building 106, Hot End Street Address					School			4.00				
							her than K-		100.		-4- \	
537 Crystal Ave.					Other (i.		of Floors	-			etc.)	
City (5) County (6	3) (6)	unty C	'odo	(7)	Square Feet	8.0	OT FIOOIS	1	Ildg. A			
Vineland Cumber	(a)	unity C	oue	(1)	~60,00 Current Use		nina damali		~ 40 `	Year	S	
Villeland	iand											
Name of Monitoring Firm Hired by Building	Ourpor (9)		140	CM No	Manufactu							_
EHS Environmental, Inc.	Owner (o)		AS	CM No	. Name of Aba Altchem E							
Street Address					Street Addre		ental Serv	1005				
9 South Main Street					1300 Indus		hwav					
City, State & Zip Code					City, State &			- Hardonic II		-		
Mullica Hill, NJ 08062					Southampt							
Project Manager for Monitoring Firm		hone		ber	Telephone N			License N	umber			
Jack Carney		223-00			215 953-85	and the same of th			007	41		
Scheduled Start Date (10) Scheduled 10/17/12	Completio 10/18		e (11	1)	Name of OSI Altchem E			vicos		¥		
Occupancy Status During Abatement (Chec			-		Street Addre		ental Serv	/1005			-	
Facility Closed/Vacated During Enti	re Period	of Aba	teme	ent	1300 Indus		hwav					
Abatement Performed Outside of N					City, State &			WW				
Describe:					Southampt	A THE REAL PROPERTY OF THE PARTY OF THE PART						
Facility Occupied During Abatemen	t					,						
Scope of Work (Check all that apply)		01817		-02927	111-79-		WAS 180 NO 180	90. 7729900 WY	2000			
N >2 of on >2 if						- C.C.D.	II Containm		egative	Pre	ssure)
≥3 sf or ≥3 lf ≥160 sf ≥260 lf	\bowtie	Reno					ni-Enclosur					
2160 SI 2260 II		Dem	olitio	n	Glove Bag Procedures Non-Exempted and Non-Friable Proce						ora en ver e nn	
Location of	la I			T	D							
Asbestos-Containing		ocationally U			Description Asbestos-Con			Amount Specify	Ab	atem	ent I	ype
Material (ACM)		lely by		V.	Material (A			F or LF)			ш	_
TO BE ABATED		enanc			(i.e., thermal s	ystems			Rer	20	nca	Inc
in Facility (13)	Custo		taff?		nsulation, surfac				Remova	Repair	Encapsulate	Enclsoure
(13)		(12) No	N/A	1	or other miscell	aneous)			<u>a</u>		late	9
Building 106, Hot End Rest Rm's				-	Sheet Floo	rina		49 SF		\vdash		
James Jos, Free Line Root Rine	ᅥᆏᅥ	H	H		Officer 1 100	inig		49 31	10	H	H	H
	TH	ĦŦ	H		1				$\vdash \sqcap$	H	H	H
	THE	ĦĦ	Ħ						吊	H	H	H
	THE	Ħ	Ħ						卅	H	H	H
			Ī						17	H	H	H
Name of Registered Waste Hauler		11 12 12 12 12 12 12 12 12 12 12 12 12 1			Cubic Yards	Name of	Registered	Landfill				
A14-1		100000000000000000000000000000000000000		O No.	of Waste		25 7000000					
Altchem Environmental Services, Inc City, State		231	24		~ 6 Cu Yd							
Southampton, PA					Disposal Date 11/2012	City, Stat	te sburg, PA					
Completed By (Print or Type)		Title			Signature	wayiies	buly, FA		Date			
Patrick Larney				Ops.	Oignature	7	_		10/05	5/12		
€)			٠. ١	- PO.	tuttery 10,000,12							
								1				



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

DC		NOT				AC 8:60 and 5:1		2012 OC 1	ECE				
Date of Notification (1)						g Owner/Operator (20120	-	1	EI	7	
9/	13 / _	12		Tre	ustees of	Princeton Unive	ersity	1200	711	200	- 1_	J	
Agencies Notified	Type Notifica	tion			t Address			A SOF STO		M	1: 1		
⊠ EPA	⊠ Initial		į.			llian Building		25/1	20 -		. 4		
☑ DOLWD ☑ DHSS		nt # <u>1-10/5</u>	/12	City,	State, Zip	Code		" LIC	FACO	4TO	١.		
☑ DCA	☐ Emergence			Pri	nceton, I	NJ 08544			-182/A	'G'	UL		
(NJAC 5:23-8)	justificatio	n)	•	Name	e of Contac	t		Telephone Nur	nber	-		V.	
	☐ Cancellati	on		Ro	bert Orte	ga		1.	_		Va	Š.	
90 W W	9			FA	CILITY I	NFORMATION							
Name of Facility Where	Abatement is Ta	aking Place	(3)				Type of Facility	(4)					
Princeton Univers	sity-Elementar	y Particle	Lal	-Build	ling 25		School (K-12		2)				
Street Address								8 (Other than K-1 private and comm		ildino	S.		
Faculty Rd							homes, etc.			•			
City (5)			A				Square Feet	# of Floors	Blo	lg. A	ge		
Priceton						A Property of the Control of the Con	11,000	1	- S	+06			
County (6)				Cou	inty Code (7)(STATE USE ONLY)		rior if being demo	lished)				
MERCER							MRI Suite a	and storage					
Name of Monitoring Fir	m Hired by Build	ing Owner	(8)	ASCN	1 No.	Name of Abatem	ent Contractor (9)	r (9)					
ATC Associates,	Inc.			000	98	BRISTOL EN	IVIRONMENTA	AL, INC.					
Street Address						Street Address							
3 Terri Lane						1123 BEAVE	R STREET						
City, State, Zip Code			11,000			City, State, Zip C	ode						
Burlington, NJ 08	8016					BRISTOL, PA	A 19007						
Project Manager for Mo	onitoring Firm		Te	lephone	No.	Telephone No.		License No.					
Michael R Keehn				609-38	6-8800	215-788-6040 00509							
Start Date (10)	S	cheduled (Comp	letion D	ate (11)	Name of OSHA Monitor							
9 / 27	/ _12_	10	<i>'</i>	15_ /	12	BRISTOL EN	IVIRONMENTA	L, INC.					
Occupancy Status Dur	ing Abatement (C	Check only	one)			Street Address							
☐ Facility Closed/Vac				ement		1123 BEAVE	R STREET						
☐ Abatement Perform						City, State, Zip C	ode						
Time of Abatement	: <u>7:00</u> AM- <u>3:30</u> P	PM/F	M	AN	1	BRISTOL, PA	A 19007						
Scope of Work (Check	all that apply)									3. 4.11			
				-4:		⊠ Full Con ☐ Mini-End	tainment with Ne	gative Pressure					
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			enova emoli				g Procedure						
24 _ 100 01 01 _ 200 11								on-Friable Proced	lure				
		1		ation					Ab	atem	ent T	ype	
Location		Lis	Norm ed So	nally olely by		Description		Amount	R	Re	m	回	
Asbestos-Containin TO BE A		, N	ainte	nance/	(i.	estos Containing Ma e., thermal systems		(Specify	Remova	Repair	сар	Enclosure	
IN Fac	cility	Cu	stodia (1)	al Staff?	1	surfacing, VAT	, or	SF or LF)	l a	0.10	Encapsulate	ure	
(13	3)	Yes	T			other miscellane	eous)	7			ê		
1 st Floor -Workarea	. 44					tile and mastic		355 SF	\boxtimes		П		
1 st Floor- Workarea				_		te panels		1,200 SF			-	H	
		4	-								-	H	
1 St Floor- Workarea	a #1				Pipe a	nd fitting insulat	ion	30 LF	_	님	무		
						Tau is a	TN	1			Ш		
Name of Registered W					Waste	Cubic Yards of		stered Landfill	DEU 1				
BRISTOL ENVIRO	ONMENTAL, IN	IC.		Hauler ID No. Waste G.R.O.W.			G.R.O.W.S	W.S. NORTH LANDFILL					
City, State					We William	Disposal Date	City, State		200				
BRISTOL, PA 19007							MORRISV	ILLE, PA 1906	7				
Completed By (Print or	r Type)	Title				Signature	0 1 1		Date /	_ /	_		
Brian Scafiro		Estim	ator			Brians	Scofies /-	el	10/3	5/	10		
			207			1	/ /	1				-	

ASB-41
MAY 11 B S / 2 0 9 3 - B * Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)					I N	ame of Build	ling Owner/On	(0)	CR	MET	7	<u>ر</u>	
9 / _	13	/	12		Name of Building Owner/Operator (2) Trustees of Princeton University Street Address								
Agencies Notified EPA 4734 DOLWD 4758 DHSS 4741	Type Not Initial Amen			í	St	reet Addres E.A. MacN ty, State, Zip	s fillian Building Code	\$ 368°	STOS CO LICENSIA	M I: 4 MTROL	0		
□ DCA 6727 (NJAC 5:23-8)	☐ Emerg	gency cation)	(includ	ling		Princeton, me of Cont	NJ 08544				A	21 Smal T-20	
(13.15 5.26 6)	☐ Cance				1	Robert Or			Telephor	e Numbe			
					1	FACILITY	INFORMATION						
Name of Facility Where A	batement	is Taki	ing Pla	ice (3))			Type of Facili	ty (4)				-
Princeton Universit	y-Elemer	ntary	Partic	cle La	ab-Bu	ilding 25	<u> </u>	School (K	-12)				
Faculty Rd								Other (i.e.	er 8 (Other tha	in K-12) commercis	l build	inae	
City (5)			W					homes, et	c.)		i Duliu	mys,	
Priceton								Square Feet	# of Floo	ors	Bldg.	Age	-376.
County (6)	-		-	-	To	nunty Code	/7\/CTATE HOE ONLIN	11,000	1		60	+	
MERCER						bunty Code	(7)(STATE USE ONLY)				d)		
Name of Monitoring Firm	lired by B	uildina	Owne	r (8)	ASC	M No.	Name of Abot	MRI Suite	and storage	9			
ATC Associates, Inc		9		. (0)		NO. 1098	Name of Abatem						
Street Address			-					IVIRONMENT	AL, INC.				
3 Terri Lane							Street Address	D CTDFF-					
City, State, Zip Code							1123 BEAVER STREET City, State, Zip Code						
Burlington, NJ 0801	3						BRISTOL, PA						
Project Manager for Monito	oring Firm	Median As		Te	lephor	e No	Telephone No.	19007	1				
Michael R Keehn	270 90000					36-8800	215-788-6040		License I			0.000.000	
Start Date (10)		Sche	duled			Date (11)	Name of OSHA N	00303					
_9 / _27 / _	12					_12		VIRONMENTA	AL INC				
Occupancy Status During							Street Address						
Facility Closed/Vacated	During En	tire Pe	eriod o	f Abat	ement		1123 BEAVE	RSTREET					
Abatement Performed (Time of Abatement: 7:0	outside of l	Norma DPM/	l Facil	ity Hou ⊃M-	urs - De	escribe	City, State, Zip Co						-
Scope of Work (Check all to						vi	BRISTOL, PA	19007					
	iat apply)						⊠ Full Cont	-1					
] ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			□ R □ D	enova emolit	tion ion		☐ Mini-Enci						
**************************************			1000	s Loca					1 10000 110		baten	ont T	
Location of Asbestos-Containing Ma		M)		Norma ed Sol	ally lely by		Description of					7	Ť
TO BE ABATE	D	,	Ma	ainten	ance/	Aspe (i.e	stos Containing Mat ., thermal systems in	erial (ACM)	Amoun (Specifi		Repair	Encapsulate	Liciosule
IN Facility (13)			Cus	(12)	Staff?	,	surfacing, VAT,	or	SF or LF		=	psu	1 2
(1.5)			Yes	No			other miscellaneo	ous)			810	late	9
st Floor -Workarea #1				Ø		Floor til	e and mastic		355 SF				-
st Floor- Workarea #1						Transite	panels		1,200 S		-	1	1
St Floor- Workarea #1				×		Pipe an	d fitting insulation	n	30 LF		+		7
											12		_
ame of Registered Waste I	lauler			IN	JDEP	Waste	Cubic Yards of	Name of Regis	tered Landfill		10		
BRISTOL ENVIRONME	NTAL, II	NC.		Н	lauler I	7555 1 MODEL	Waste		NORTH LA	NDEILI			
ty, State BRISTOL, PA 19007					1870	0	Disposal Date	City, State					
		Title	-					MORRISVII	LLE, PA 190	67			
mnleted Dy /Driet as Time		A I ITIO					Classition						_
ompleted By (Print or Type Brian Scafiro	1		timat	or			Signature Buan	la 1. 1	. ,	Date	112		



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

hell		NOT				BESTOS ABAT C 8:60 and 5:10		RECEIVED 2012 OCT 11 PM 1: 39					
Date of Notification (1)	13 /	12				g Owner/Operator (i Princeton Unive	334	201200	27/1	A.	27	0	
Agencies Notified	Type Notific	ation	-	Street	Address			ASSES		PM	1: :	30	
□ EPA	Initial	-		E.A	. MacMil	lian Building		escs.	TOSO		,	"3	
⊠ DOLWD			:140	City, S	State, Zip (Code		& L/	CENS	WI	Rn	,	
☑ DHSS ☐ DCA	☐ Emergen	ent #3-10/5		Pri	nceton, N	IJ 08544			/0/	NG	.01		
(NJAC 5:23-8)	justificati	on)	9	Name	of Contac	t		Telephone N	umber	7.974V. Tu-	C.		
	☐ Cancellat	tion		Rol	bert Orte	ga					Ī	•	
		F		FA	CILITY IN	IFORMATION						-0.02	
Name of Facility Where A	Abatement is 7	Taking Place	e (3)				Type of Facility	(4)	<u> </u>			1,100	
Princeton Universit	y-Elementa	ry Particle	e Lai	b-Buildi	ing 25		School (K-1						
Street Address				-			Subchapter	8 (Other than K- private and comm	-12) mercial bu	ildin	70		
Faculty Rd							homes, etc.		nercial bi	mani	J 5,		
City (5)			80-11-				Square Feet	# of Floors	В	dg. A	ge		
Princeton							11,000	1		60+			
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (P		olished)				
MERCER						2		nd storage					
Name of Monitoring Firm		ding Owner	(8)	ASCM		Name of Abateme		0					
ATC Associates, In	С.			0009	98		RISTOL ENVIRONMENTAL, INC.						
Street Address						Street Address							
3 Terri Lane						1123 BEAVE							
City, State, Zip Code						City, State, Zip Co							
Burlington, NJ 0801			1=			BRISTOL, PA	19007						
Project Manager for Moni	toring Firm			elephone		Telephone No.		License No.					
Michael R Keehn		0-1-1-1-1	- 1	609-386		215-788-6040 00509 Name of OSHA Monitor							
Start Date (10)9 /27 /		Scheduled 0	370	ietion Da 15 /	- 150 FV	277274737777444444444444444444444444444	ionitor VIRONMENTA	LING					
				- CONT CO.	12	L, INC.							
Occupancy Status During Facility Closed/Vacate						Street Address							
☐ Abatement Performed					cribe	1123 BEAVER							
Time of Abatement: 7					oribe	City, State, Zip Co BRISTOL, PA							
Scope of Work (Check all	that annly)	39											
	that apply)					☐ Full Cont	gative Pressure						
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		⊠ Re □ De				☐ Mini-Encl	losure						
<u>⊠</u> ≥100 si di ≥200 ii			HIOH	uon		☐ Glovebag ☑ Non-Exer	g Procedure mpted (*) and No	n-Friable Proce	dure				
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Name of Registered Wast						v glazing	[N (5)	25 LF		Ц	Ш		
BRISTOL ENVIRON		NC.		I Haveley ID Ale 130/				ne of Registered Landfill .R.O.W.S. NORTH LANDFILL					
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City, State						Disposal Date	City, State	IIE DA 4000	27				
BRISTOL, PA 19007							INIOKKISVI	LLE, PA 1906		200			
Completed By (Print or Ty Brian Scafiro	(pe)	Title	to-			Signature	1.1.		Date 10/5	-1.1			
ASB-41		Estima	LOF	Brian Scoloro 10/3						115	`		

MAY 11 B S12093-A

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

					ie oi buildi	ng Owner/Operator	(2) (Uf) no	•				_		
9 /	13 /	12		Name of Building Owner/Operator (2) Trustees of Princeton University Street Address E.A. MacMillian Building City, State, Zip Code Princeton, NJ 08544										
Agencies Notified	Type Notification	n		Stre	et Address		SEFCY	777	<u> </u>					
☐ EPA ☑ DOLWD	☑ Initial	25		E.	A. MacM	illian Building	& 11	US CONTR						
☑ DOLWD	Amended Amendment	#2-9/	06/40	City,	State, Zip	Code		EKSING RO	<u></u>					
□ DCA	☐ Emergency			Pr	inceton,	NJ 08544		1110	7h					
(NJAC 5:23-8)	justification)		5	Nam	e of Conta	ct		Telephone Nur	الشر 3					
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Name of Facility Where A	hatement is Tak	ina Pla	00 (3)	F/	CILITY	NFORMATION								
Princeton University				h D	din 05		Type of Facility				E 400 (21)			
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City (5)							homes, etc	.)						
Princeton							Square Feet	# of Floors		Bldg.	Age			
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MERCER				1000	inty Code (7)(STATE USE ONLY)		rior if being demoli	ished)				
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ATC Associates, Inc		011110	(0)	000		Name of Abateme								
Street Address				000			VIRONMENTA	L, INC.						
3 Terri Lane						Street Address 1123 BEAVE	CTDEET							
City, State, Zip Code					-	City, State, Zip Co								
Burlington, NJ 08016	6					BRISTOL, PA								
Project Manager for Monito	oring Firm		Те	lephone	No.	Telephone No.	13007	I lianna - No						
Michael R Keehn			1	09-386		215-788-6040		License No. 00509						
Start Date (10)	Sche	duled	Compl	etion Da	ate (11)	Name of OSHA M	00000							
9 / 27 /	12	10	/ _ 8	3_/	12	BRISTOL EN		LINC						
Occupancy Status During A	Abatement (Chec	ck only	one)			Street Address								
☐ Facility Closed/Vacated	During Entire Po	eriod of	Abate	ement		1123 BEAVER	STREET							
Abatement Performed C	Outside of Norma	al Facili	ty Hou	ırs - Des	scribe	City, State, Zip Co								
Time of Abatement: 7:0	00AM-3:30PM/_		·M	AM		BRISTOL, PA								
Scope of Work (Check all ti	hat apply)					•								
☐ ≥3 sf or ≥3 if		M P	enova	ion		Full Conta	ainment with Neg	jative Pressure						
≥160 sf or ≥260 lf			SHOAG	IOII		☐ Mini-Encle	osure							
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Date of Notification (1)		-			Name of B	uildir	ng Owner/Opera	2012	OCT				
	_ / _	12	_		Trustee	s of	Princeton Ur	or (2) hiversity SBE	OCT 11 PM	1:3	0		
Agencies Notified Ty	pe Notifica	tion	7	-	Street Addr	220		- ASBE	Sinc	ν,	3		
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	Amended			-	City, State,	Zin /	nan Building		LASING	, ,OL	1		
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	Emergenc justification	y (inclu	iding	-	Name of Co		NJ 08544			41			
	Cancellation	on		- 1.	Robert (7		Telephone	Numbe	r		_
Name of Facility Where Abate	ment is Ta	king P	lace (3	3)			FORMATION	T (8)			70000		
Princeton University-El	ementary	y Part	icle L	ab-B	uildina 2!	5		Type of Facil			2012-1-1		
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City (5)								nomes, et	C.)			ınıya,	Ü
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Name of Monitoring Firm Hired	by Buildin	a Own	or (8)	IAS	CM No.			MRI Suite	and storage				
ATC Associates, Inc.	-,	y Own	01 (0)			- 1	Name of Abater	ment Contractor (9)				
Street Address				1	00098		BRISTOL E	NVIRONMENT	AL, INC.				
3 Terri Lane							Street Address						
City, State, Zip Code							1123 BEAV	ER STREET					
Burlington, NJ 08016							City, State, Zip (Code					
							BRISTOL, P	A 19007					
Project Manager for Monitoring	Firm				ne No.	1	Telephone No.		License No.				
Michael R Keehn		0			386-8800		215-788-604	0	00509				
Start Date (10)	Sch	eduled	Comp	letion	Date (11)	1	Name of OSHA	Monitor	00303				
ON HOLD	- -				/			IVIRONMENTA	I INC				A
Occupancy Status During Abate	ment (Che	ck only	one)			-	Street Address		CL, 1140.				
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	e of Norma	al Faci	ity Ha	1100 F	\	-	ity, State, Zip C						
Time of Abatement: 7:00AM			PM	^	M	1	BRISTOL, PA						
cope of Work (Check all that ap	ply)		7.120-120-1				DINIOTOL, FA	13007					
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≥160 sf or ≥260 lf			emolit					iosure	,				
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Location of Asbestos-Containing Material	/ACLAN		Norma ed Sol		.		Description o	f I		Al	batem	ent T	ype
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IN Facility		Cus	stodial	Staff?) (1.	e., tr	nermal systems i surfacing, VAT,	nsulation,	(Specify	Removal	Repair	São Bộ	Co
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Floor- Workarea NF #1			×		Floor ti	ile			25 SF	Ø	П	ᆔ	
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RISTOL ENVIRONMENTA	L, INC.]H	auler 1870	ID No.	Wa	ste		NORTH LAND				
, State				10/0	0	Die	posal Date		TORTH LAND	rill			III I
RISTOL, PA 19007						0.3	Posai Date	City, State					\neg
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rian Scafiro		timat	or				Signature	1 1.	Da	te /	1		\dashv
11		- anniel	Ο Ι	2500			Drian.	Scalin	(9/18	112	2	

Date of Notification (1) 9 / 13				Name of Bui	ilding Owner/Opera	0.10)	BES TOS	123	42	- <i>C</i>	
	/ _12	2		Trustees	of Princeton Ur	ior (2)	OBEST		7	3.2	-
Agencies Notified Type No	tification			Ctroot A L		liversity	& 7,0S	Ca		0	100
☐ EPA ☐ Initial ☐ Amen				Street Addre	ss Millian Building		& LICE	VS/N	477	01	_
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Justing	Cation)	ouding	ŀ	Name of Con	1, 110 00044					100	
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Name of English Milhorn Advis					INFORMATION						
Name of Facility Where Abatement i	is Taking	Place	(3)		HAPORMATION	19					
Princeton University-Elemen	itary Pa	rticle	Lab-B	luilding 25		Type of Fac	ality (4)				_
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ATC Associates, Inc.		•	8 1 00 00 10	00098	Name of Abatem	ent Contractor	(9)				_
Street Address					BRISTOL EN	VIRONMENT	AL, INC.				
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City, State, Zip Code					1123 BEAVE	R STREET					
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ccupancy Status During Abatement (C	Check on	ly one)			Street Address	TO THIS IN THE	L, INC.				
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Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Floor -Workarea NF #1 Floor -Workarea NF #1 Floor -Workarea NF #2 Floor -Workarea NF #1 Floor -Workarea NF #1 Floor -Workarea NF #2 Floor -Workarea NF #1	Yes	Normal No	N/A N/A DEP W	Floor tile Pipe Insula Floor tile Window gla Vaste No. Wa	Description of os Containing Material systems ins surfacing, VAT, or other miscellaneous ation azing bic Yards of ste	ame of Register	Amount (Specify SF or LF) 1400 SF 20 LF 25 SF 25 LF	Removal 🖾 🗆 🖾	Repair	sulate 🗆 🗆 🗆	
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Floor -Workarea NF #1 Floor- Workarea NF #2 Floor- Workarea NF #1 Floor- Workarea NF #2 Floor- Workarea NF #1 Floor- Workarea NF #2 Floor- Workarea NF #2 Floor- Workarea NF #2 Floor- Workarea NF #3 F	Yes	Normal No	N/A N/A DEP Wuler ID	Floor tile Pipe Insula Floor tile Window gla Vaste No. Wa	Description of os Containing Mater hermal systems ins surfacing, VAT, or other miscellaneous ation azing bic Yards of este posal Date Ci	ame of Register G.R.O.W.S. N	Amount (Specify SF or LF) 1400 SF 20 LF 25 SF 25 LF red Landfill	Removal 🖾 🗆 🖾	Repair	sulate 🗆 🗆 🗆	
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Floor -Workarea NF #1 Floor- Workarea NF #1 Floor- Workarea NF #2 Floor- Workarea NF #2 Floor- Workarea NF #1 Floor- Workarea NF #2 Floor- Workarea NF #1 Floor- Workarea NF #1 Floor- Workarea NF #2 Floor- Workarea NF #1	Vs M Cut	Normal No	N/A N/A DEP Wuler ID	Floor tile Pipe Insula Floor tile Window gla Vaste No. Wa	Description of os Containing Mater hermal systems ins surfacing, VAT, or other miscellaneous ation azing bic Yards of este posal Date Ci	ame of Register	Amount (Specify SF or LF) 1400 SF 20 LF 25 SF 25 LF red Landfill	Removal 🖾 🗆 🖾	Repair	sulate 🗆 🗆 🗆	

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Data af Natification (1)				II			DECE-				
Date of Notification (1) October 8, 2	012			Name of Build	ing Owner/Or Schw	erator (2) eitzer-Mauduit 2012	L'CEIA	ED	0	161	
Agencies Notified Type of Noti	fication			Street Address		2012	OCT II			01	
	itial Notif				85 M	ain Street	PH	1:3	E		
	mended N mendmen	lotification t#		City, State, Zip	Code	- MODE	STUS COL				
[] E ₁	nergency	(including			Spots	wood, New Jessey	L98884, 940N	ROI			
I A I DOIL	stification			Name of Conta		T	Telephone Numb	er _	~ _		
[] DCA	ancellatio	n		Hal	Bernstein						
Name of Facility When Abeter is Tal	· DI	(2)	FA	CILITY INFO	RMATION						
Name of Facility Where Abatement is Tal Schweitzer-Mau			Bldg.			Type of Facility (4	School (k-12)				
Street Address						l ii	Subchapter 8 (oher th	an k-12	2)	
85 Main Street						[x]	Other (i.e., priv				uildings
City	Cou	nty (6)		County Code (7)		Square feet	homes, etc.) # of Floors	l pi	d		
	000			(STATE USE O		4,000 sf	2	1510	dg. Ag	65	
Spotswood	Mic	ldlesex				Current Use (Prior		d)			
Name of Monitoring Firm Hired by Build	ing Owne	r (8)		ASCM No.	Name of	Power Abatement Contractor					
Guardian Contra				115011110.	I vaine o		ian Contracting	g, Inc.			
Street Address	I i. C 1				Street A	ddress		7.67			
City, State, Zip Code	nit 61				City Str	1889 F ate, Zip Code	Route 9, Unit 6	1			
Toms River, NJ	08755	Maria de la compania			onj, on	100	River, New Jer	sey 08	3755-	1271	
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone				ne Number	License				
Scheduled Start Date (10)	-	732-349 Scheduled		tion Date (11)		9-9932 OSHA Monitor	00624				
10/22/12		10/24				L. Analytical					
Occupancy Status During Abatement (Che					ddress						
Facility Closed/Vac Abatement Performe						100000000000000000000000000000000000000	telton Road				ñ
[x] Other - Describe					City, Sta	te, Zip Code Piscata	way, New Jers	ev 08	854		
Scope of Work (Check all that apply)					<u> </u>		***	•			
scope of work (eneck all that apply)					[]	Mini-Enclosure	t with Negative Pre	essure			
$[X]$ >3 sf or \geq 3 lf		[x]	Renova	ation	[x]	Glovebag Proced	ure				
[] ≥160 sf or ≥260 lf		[]	Demoli	ition	[]	Non-Exempted ('	*) and Non-Friable	Proced	lure		
						_	T T	Aba	tement	Туре	
Location of		Is Location		1	Descriptio			R	R	Е	E
Asbestos-Containing Material (ACM)		Normally u Solely by		A	sbestos-Cor Material (A		Amount (Specify SF	E	E	N	N
TO BE ABATED	100000000000000000000000000000000000000	ntenance/C			.e., thermal	systems	or LF)	M	PA	C A	C
in facility (13)		Staff		ir	sulation, su			O V	I	P	0
(13)		(12)			VAT, o ther miscella			A	R	S	S
	YES	NO	N/A					L		L E	RE
Oil line-basement	X	1	1	Asbestos pir	e insulatio	in .	30 lf	X	-	- 1	-
Condensate line-basement	1		Asbestos pir		250 250	40 lf	X	+	\vdash	+-	
Maintenance line-basement			Asbestos pip			30 lf	X	<u> </u>	+	+	
								1			
Name of Registered Waste Hauler		Yards of Wast		red Landfill							
Guardian Contracting, Inc		2	Dispos	sal Date	City, Sta	T.R.R.F.		_			
Toms River, New Jersey			10/25			w∞ Pennsylvania	,				
Completed by (Print or Type) Nicholas Fernicola	Title	oct Mana	or	Stgnature	101	1.1		Date		2	
Tylenolas Felilicola	Froje	ect Manag	CI	1/11/	1001	te		10/8	3/2012	2	

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

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

a						0.	3.00	115			
Date of Notification (1) October 8, 201	2			Name of Building		erator (2)	CEIVED	L ;	20-	760)
	al Notifica			Street Address		ain Street	CEIVED	i5			
[x] DOL Ame	nded Noti ndment #_ rgency (in			City, State, Zip Co	ode Spotsv	wood, New Jersey	28889440AO	L			
	fication) cellation			Name of Contact Hal B	ernstein		elephone Sumbe	r_			
			FAC	LILITY INFORM	IATION		(8)				
Name of Facility Where Abatement is Takin Schweitzer-Maudi)				Type of Facility (4)	School (k-12)			9	
Street Address 85 Main Street	·					[x]	Other (i.e., privalentes, etc.)				ldings,
City	County	(6)		County Code (7) (STATE USE ONL	Y)	Square feet 60,000 sf	# of Floors	Bld	g. Age	80	
Spotswood	Middl					Current Use (Prior it Main p	lant	i)			
Name of Monitoring Firm Hired by Building Guardian Contract				ASCM No.	Name of	Abatement Contractor Guardia	(9) an Contracting	, Inc.			
Street Address 1889 Route 9, Uni	it 61				Street Ac	100000000000000000000000000000000000000	oute 9, Unit 61				
City, State, Zip Code Toms River, NJ 08	3755				City, Sta	te, Zip Code Toms F	liver, New Jers	sey 08	755-1	271	
Project Manager for Monitoring Firm Nicholas Fernicola	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Telephone Nu 732-349-99			Telephor 732-34	ne Number 9-9932	License 1 00624	Number			
Scheduled Start Date (10) 10/22/12		Scheduled Cor 10/24/12	mpleti	ion Date (11)	Name of	OSHA Monitor E.M.S.	L. Analytical				
Occupancy Status During Abatement (Check [] Facility Closed/Vacate			of Ab	atement	elton Road						
Abatement Performed				TO THE PERSON NAMED IN COLUMN TO THE	City, Sta	te, Zip Code					
[X] Other – Describe_area	we are	working in	1S CI	losed	7.88		way, New Jerse	ey 088	354		
Scope of Work (Check all that apply)					[]	Full Containment Mini-Enclosure	with Negtive Pres	ssure			
$[x]$ >3 sf or \geq 3 lf		[x] R	enova	tion	[x]	Glovebag Proced	ure				
[] ≥160 sf or ≥260 lf		[] De	emolit	tion	[]	Non-Exempted (*) and Non-Friable	Proced	ure		
								Aba	tement	Туре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	No	s Location rmally used Solely by nance/Custo Staff (12)		Asb M (i.e.	Description destos-Conflaterial (A thermal station, sur VAT, o	taining CM) systems facing,	Amount (Specify SF or LF)	R E M O V	R E P A I R	E N C A P S	E N C L O S
	YES	NO N	I/A	othe	er miscella	neous)		A L		U L E	U R E
Roll storage	X		Asbestos pipe	insulatio	n	120 lf	X				
Stock prep	X		Asbestos pipe	insulation	1	80 lf	X				
								_			\square
Name of Registered Waste Hauler	DEP Waste H	ID No. Cubic Va	rds of Wast	e Name of Register	red Landfill		<u></u>				
Guardian Contracting, Inc.	2022	5		T.R.R.F.	ou Dailtiiii						
City, State Toms River, New Jersey			isposa 0/25	al Date	City, Sta	te wn, Pennsylvania	0	5 (F. 1995)	T.		
Completed by (Print or Type) Nicholas Fernicola	Manager	JI <u>2</u> JI	Signature	hol	- Levisy Ivalia		Date 10/8	3/2012	2		

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

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

-		7.4	
1	CHECK	# 19493; 1953	9

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

Date of Notification (1) (2)10-04-12	1			f Building Own dler Elevato					2012 0C	- 6	E1	AE	D
Agencies Notified Type Notification EPA Initial		1000	Street A 20 Wh	^{ddress} ippany Roa	d				1		P	4 /:	36
DEP Amended Amendment			City, Sta Morris	ite, Zip Code town					& []	OS	COP	ITA	۵.
DOH Emergency (justification) DCA Cancellation	including			f Contact I Rafferty				Tele	ephone Nur	nber	5/N	Ġ"	G)
			FACI	LITY INFORM	ATION								43
Name of Facility Where Abatement is Taking Street Address	Place (3)	231935					of Facility (2)	er than K-12	۵۱			
20 Whippany Road						×	Other (i.e. p		commerci		dings,	home	es,
City (5) Morristown			<u> </u>			_ e	etc.) re Feet	# of	Floors		oldg. A		
County (6) Morris				Code (7) USE ONLY)			nt Use (Prio	or if bei	ng demolish	ned)			
Name of Monitoring Firm Hired by Building C TBD	Owner (8)		ASCN	1 No.			tement Con		7 7	15-1			
Street Address			b none	7	1	t Addres Broad	Street						
City, State, Zip Code						State, Zi stadt,	p Code NJ 07072	<u> </u>					
Project Manager for Monitoring Firm		T	elepho	ne No.	0.0000000000000000000000000000000000000	hone No -939-6			License N 00756	0.			
Start Date (10) (2)10-09-12	Scheduled 10-31-12		pletion I	Oate (11)	300000000	of OSH	IA Monitor						
Occupancy Status During Abatement (Check	Only One)				Stree	t Addres	S						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Area is vacant			ent		City,	State, Zi	cson Ave		01				
Scope of Work (Check All That Apply)					Lon	y Islan	u City, iv	1 111	01				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	novati	100000			Min Glo	i-Enclosure vebag Prod	edure	Negative P			9	
	le Le	catio	n					7		T	\$600 BS	ment	
Location of	Nor	mally	,		Description	n of					Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Maint Custod	enan	ce/	Asbestos C (i.e. therr		Material ns insula AT, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
55	Yes	No .	N/A							-		te	
2nd Floor: West Wing			x	F	Pipe Fitti	ngs		12	20LF	х			
		-											
Name of Registered Waste Hauler			DEP W		bic Yards Vaste				red Landfill				
ATC, Inc. / TriState Transfer (50071)			310	TB	D		Minerva		rprises				
City, State Shirley, NY / Bronx, NY	-			TB		\mathcal{I}	City State Waynes		OH 4468				
Completed by John Tancredi	Title Project	Mar	nager	4	Signatur	¢		L	Da 10	te -04-	12	1	

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

RECECHECK # 1949

Date of Notification (1) 09-20-12(1)09-27-12	!			Name o	of Building	Owner/C	Operator	(2) 2	BECOM	Ing	VED			-	
	Type Notification		+	Street /	Address			4	1 130 2	1-	11 1. 2				
EPA EPA	Initial				hippany ate, Zip C			95	BESTOS	100	1.0%)		1	
X DOL	X Amended Amendment			Morris		ode			& LICE	NSI	MTROL				
☑ DOH ☐ DCA	justification) Cancellation		1		of Contact				BESTOS & LICE	Tel	ephone N	mber			
					ILITY INF	B	ON			-					
Name of Facility Where Ab	patement is Takin	g Place (3)						Туре	of Facility (4	1)					
Street Address									School (K-12 Subchapter		er than K-1	21			
20 Whippany Road								×	Other (i.e. pretc.)	rivate	& commerc	ial bui	ldings	, hom	es,
City (5) Morristown		ji							re Feet	# o	f Floors		3ldg. 20 yr		
County (6) Morris					Code (7) USE ONLY)	_		nt Use (Prio nmercial	r if bei	ng demolis	hed)			
Name of Monitoring Firm H TBD	lired by Building	Owner (8)		ASCI	И No.				tement Cont nvironme						
Street Address							Street 200 E		ss Street						
City, State, Zip Code									p Code NJ 07072						
Project Manager for Monito	oring Firm		T	elepho	ne No.		Teleph 201-9				License N 00756	lo.			
Start Date (10) 10-01-12(1)Job on Ho	old	Scheduled 10-31-12		pletion	Date (11)		Name (A Monitor				,		
Occupancy Status During A	Abatement (Chec	k Only One)					Street		-						
Facility Closed/Vacate Abatement Performed	ed During Entire F	Period of Aba	ateme	ent					son Aven	ue					
X Other – Describe: Are	a is vacant								d City, NY	111	01				
Scope of Work (Check All T ≥3 sf or ≥3 lf	hat Apply)	П ве	! !					1							
≥160 sf or ≥260 lf		personal .	ovati				×	Min Glo	Containmer i-Enclosure vebag Proce	edure	-				
		Is Lo	catio	n		All the State		INOI	n-Exempted	(") and	Non-Friad	le Pro		ement	
Location of			mally				cription					-	Ty	ре	
Asbestos-Containing Ma TO BE ABATE		Mainte	enand	ce/		tos Conta thermal:	systems	insula			mount pecify	₽.	71	Enc	5
In Facility (13)			12)	an r			ing, VAT			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes N	No	N/A								<u>a</u>	7	late	ıre
2nd Floor: Wes	t Wing			x		Pipe	Fitting	gs		12	20LF	х			
Name of Registered Waste	Hauler		NJI	DEP W	aste	Cubic	rards		Name of R	eaiste	red Landfill				
ATC, Inc. / TriState Tra	ansfer (50071)	CONTRACTOR OF THE PARTY OF	uler ID 310	No.	of Was	te		Minerva	. Ta						
City, State Shirley, NY / Bronx, NY	(n yez (EW)		Disposa	al Date	7/	City, State Waynesh	oura.	OH 4468	88			
Completed by		Title					gnatúre	1	111	. 31	Da	te			
John Tancredi		Project	Man	ager			(A)	4	F/61	`	09	-27-	12.		

Date of Notification (1) 09-20-12			T	Name o	of Building Own	er/Openio	STOO	* CU)	-			
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment Emergency			20 111	Address nippany Roa ate, Zip Code stown	ASUE d &	STOS CON	TROL	5			ı	
DOH DCA	justification) Cancellation				of Contact II Rafferty		// // // // // // // // // // // // //	G	ephone Nu	mber			
Name of Facility Where A	batement is Takir	g Place (3)		FAC	ILITY INFORM	ATION	Type of Facili	ty (4)					
Street Address 20 Whippany Road			8 11112				School (Subchar Other (i.etc.)	ter 8 (Otl	ner than K-1 & commerc	2) ial bui	ldings	, hom	nes,
City (5) Morristown							Square Feet	3	of Floors		Bldg. 20 yr		
County (6) Morris					Code (7) USE ONLY)		Current Use (Commercia		ing demolis	hed)			
Name of Monitoring Firm I TBD	Hired by Building	Owner (8)		ASCN	/ No.		of Abatement (acle Environ						
Street Address							Address Broad Street						
City, State, Zip Code							tate, Zip Code stadt, NJ 070)72	9				
Project Manager for Monit	oring Firm		T	elepho	ne No.		one No. 939-6565		License N 00756	10.		-	-
Start Date (10) 10-01-12		Scheduled 10-31-12		oletion I	Date (11)		of OSHA Monit -Air Inc.	or			17.		
Occupancy Status During				*			Address			311			
Facility Closed/Vacate Abatement Performed Other – Describe: Are	d Outside of Norm	eriod of Ab al Facility H	ateme lours	ent		City, S	Jackson A tate, Zip Code						-
Scope of Work (Check All						Long	Island City,	NY 11	101				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,	Comments.	novatio molitio			×	Full Contain Mini-Enclos Glovebag P Non-Exemp	ure rocedure				e	
			ocation								Abat	emen	t
Location of Asbestos-Containing M TO BE ABAT In Facility (13)	laterial (ACM) ED	Used S Maint Custod	enanc	by e/	Asbestos C (i.e. thern su		laterial (ACM) insulation, T, or	(5	mount Specify or LF)	Remova	Repair	e Encapsulate	Enclosure
		Yes	No	N/A					9	_		ate	6
2nd Floor: Wes	st Wing		X	Р	ipe Fittin	gs	1	20LF	x				
Name of Registered Waste	Hauler		T NJE	DEP W	aste Cut	oic Yards	Name	of Registe	ered Landfill	<u> </u>			Щ
ATC, Inc. / TriState Tr	ansfer (50071)	. 20237777	uler ID		Vaste		va Ente					
City, State Shirley, NY / Bronx, N	Υ				Disp TBI	oosal Date	City, St Wayn		OH 4468	38			
Completed by John Tancredi	3	Title Project	Man	ager		Signature	1/10-		Da 09	te 0-20-	12		



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

RECEIVED

Date of Notification (1	4/12		N	ame of	Building (ATHON	110 19176	HO LED K	باقن		
Agencies Notified	Type Notification	1	S	reel Ad	ddgess						=
D BA	☑ Initial .					BOX 19		STOS CON	TRUL		
] ∞0r] ∞€	Amended =Amendment i		C	ry, Stal	ie, Zip Cox	se C	OURT 14	PLICENSIN	G	19	
7 рон	Emergency (i	ncluding	- R	ame of	Contact	1/2/ 0		Telephone Numi)er		
J OCA	Cancellation				SAM	Ē		-			
				FACILI	MY INFO	NOTTAKE					
ame of Facility When		g Place (3)				Type of Facility (4)			
RES	IDENCE						School (K-12) i (Other than K-12	?)		
reet Address	SENTONI	vē.						ivate & commerci		gs.	
- 15)			===				Square Feet	# of Floors		Age	
(r) (5)	PE MAY						1000	1		0 +	·
ounty (6)				County (Code (7)	(STATE	The second contraction of the second contract of the second	or If being demoti	shed)		
CNE			-			/ A balam	eni Contractor (9)	CONT			
ame of Monitoring Fir	m Hired by Building	Owner	AS	CM No.		L.C.M	co ZN	CI			
<u> </u>	7/1		<u>. 1 = </u>		-						
reet Address	**					369 9	SPRU	LE AVE.			
ity State. Zip Code					7	Car Ciala Fin C	Me		A 8.5 S	۲	
117. 3216. Up COC			-			MAP	LE SHOI	License No	0000		
rojeci Manager for M	onitoring Firm		Telephy	one No.		836-7	19-0472	_004	44		
	T Caba	duled Con	ndelin	Date	(11)	LAMPO TO SMALL	Jonitos.				
Sian Date (10)	2 /0	124	1/2	7		JOSEI	OKALEM	M			
coupancy Status Du		7		_							
Facility Closed Vac	ated During Entire P	eriod of Ab	pateme	กเ	1-		Spruce	= /1 0 0 1		===	
Abatement Perform	ed Outside of Norma	al Facility h	Hours		Γ,	City, State, Zip C	E SHAD	= NT	080	57	
Other - Describe						MAPL	-E JANY	<u> </u>			
Scope of Work (Chec	k all that apply)					Full Co	ntainment with Ne	gative Pressure	9		
] ≥3 s1 o1 ≥3 l1		Reno	ovation	98		Claush	closure ag Procedure	First Broom	1		
2160 st or ≥260 it		(X) CALL				M NON-EX	sempted (') and N	on-Friable Proces	A	Da:er	Té C
			cation							170	*
Localid	on of	Used S Mainte	Solely t		Ashesin	Description of s Containing Ma	aterial (ACM)	Amount			g:,
Aspesios-Containin	g Material (ACM)	Cus	todial		(i.e., t	nermal systems	insulation,	(Specity SF or LF)	Removal	Нерыя	Encapsolat
IN Fac		- T	aff? 12)			surfacing, VAT	eous)	0.0.7	NOV J	, ž	1 1
(13)	-	$\overline{}$	NIVA						1	5
		Yes	No	N/A				20004	V		
51910	va		,	-	TRA	IWSITE			-f-	Г	
									=+-	-	-
		-						-	=+-	+-	†
						A IT V	T Name of Re	gistered Landfill		٠	-
Name of Registered	Waste Hauler		H ₂	UKAY ID	No.	Cubic Yards of Waste	0.1	, C, M.	U, A	,	
KLEMO	O INC		-11	790	4_	Disposal Date	Circle				
City State	11	7 118	205	2		UDWS31 Uate	Woo	DBINE,	NU	,	
	LADE, Ni	5,00				Signature	, 10 ,	Dat	0/4	1/00	
Completed By	.54640	o w	NE	R		20	sigh I Se		0/4	110	=
JOSEPH K	LEMM .					1					

PETER & TOM GAVE OR

VERBAL FOR WAIVEN

RECEIVED

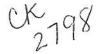
OS ARATEMENT

State of New Jersey PROTECUTION OF ASSESTED ASSESSED.
(PROSUME to MAKE 8:60 and 13:130)

0 8 0				School street Sec.	proposed to the second	121			1:3	3	
Date of clothcation (1)	Q. 1412		Namo	of Halldan	De Serionario	OPERT	SESTOS CI & LICENS 2	0417			.
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Agencies Natified	Type Notification	1	50000	117	1 115	HWY 2	2	INU	awing a	46	44.
NEDA	Amondod	1.	The C	130 760	Colle		The second second	7		30	
1 X XVI	Amondmont		c.ny,	J. A.	1100/	NIS	0708)		:::::.	
"/	L. Emergency (· · · · ·	of Coula	de de Williams		Telophone Mimb	GI.			
I NOH I TIXW	apatification)		Manna A	321	"CO						
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and promise the state of the st		er eggi et liggetii	1.1/(781'94 A 1848	-Cutthern (Cara	STEVE Type of Facility	(4)				
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Street Address						homes, etc	The special state of the speci	, ,,,,,,,			
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Project Managor for Mc	mlierlini Pirro	Tale	phone	No.	Talaphone No.	1	Liconse No.				
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Other - Describe:	IAM-	7/°/^		+ + - + + + + + + + + + + + + + + + + +	COLTL	N: U	N.S. 0.22				
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Date of Notification (1) 09/28/12			Name of Passa	Building of Street	Owner/C	perator y Asso	(2) ciate	2.0CT 1	l Pi	1:15	j		J. 111. 1172	
Agencies Notified Type Not			SueerA	ddress saic Stre										
DEP Ame	ended endment #			te, Zip Co ld, NJ 07			M.C	BESTO	ENS	ING	19			realise S
DOH justi	ergency (includ fication) cellation	aing		Contact ranchini					Tele	ephone Nu	mber	d		
			FACI	LITY INFO	RMATI	ON								
Name of Facility Where Abatement Auto Plaza	is Taking Plac	ce (3)					Deline.	of Facility (School (K-1	50					
Street Address					0.179.75		П	Subchapter	8 (Othe					
2 Passaic Street					H-18870000000			Other (i.e. petc.)	orivate 8	& commerc				es,
City (5) Garfield							Squa 8,00	re Feet 00	# of	Floors	100	8ldg. <i>A</i> 6 0+-	ge	
County (6)			County (Curre	ent Use (Pri	or if bei	ng demolis	hed)			
Passaic Name of Monitoring Firm Hired by E	Luilding Owner	- (0)	ASCM	JSE ONLY)		Nome		Plaza	tractor	(0)				
N/A	dilding Owner	(6)	ASCIV	i No.				Contract						
Street Address						Street 27 E		ss Drive			160611151 4-233	W		
City, State, Zip Code								Tip Code		***************************************		-		
Project Manager for Monitoring Firm	1		Telepho	ne No.		Teleph	none N	lo.		License N	No.			
Start Date (10)	I Sobo	eduled Co	mplotion I	Data (11)			864-2	2022 HA Monitor		01137				
10/14/12		17/12	mpiedom	Jale (11)		Ame		TIA WOITIO					(8	
Occupancy Status During Abateme	nt (Check Only	y One)		1		Street		- I						1
Facility Closed/Vacated During Abatement Performed Outside								30th Stree	∋t 					
Other – Describe:	-					2000		, NY 100	16					
Scope of Work (Check All That App	ly)	1				Г	1 -							
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Location of Asbestos-Containing Material (A	(CM)	Used Sol		Asbest		scription aining N		I (ACM)	A	mount			ш	200
TO BE ABATED In Facility	2000000	Maintena Custodial			thermal		s insula			pecify or LF)	Rer	20	nca	Enc
(13)		(12)				niscellar			31	UI LF)	Remova	Repair	Encapsulate	Enclosure
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East side of mechanic gar	age >	(Pipe	Insula	tion		13	0 L.F.	X			
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			-								+	ļ		
Name of Registered Waste Hauler		1	NJDEP W	aste	Cubic	Yards		Name of	Registe	red Landfil	1			\Box
PRO-TECH, LLC	- 11	Hauler ID 90713		of Was					NDFILL					
City, State New Haven, CT						al Date mpletio		City, State		RGH, OH	1			
Completed by	Tit	de				igpaure		1		/ Da	ate			_
Marko Stankovic	Pr	resident			/	Yar.	10	You	KU	eno o	9/28/	12		



Date of Notification (1) 10/3/12			T	Name of	of Building Zimmer	Owner/	Operator Residen	(2)			~	the t	-	1 4 (: ()	
Agencies Notified	Type Notification	4		Street A						2	1120	CT	П	PH	1:	14
EPA DEP DOL	Initial Amended Amendment Emergency				ate, Zip C adies No		8			A	58E	STU)S (CON	TRO	DL.
DOH DCA	justification) Cancellation			Name of Tom	of Contact					Tel	ephon	e Nur	nber	-1158 1	4	(1)
				FAC	ILITY INF	ORMAT	ION			_	-1-	0.000				
Name of Facility Where Tom Zimmerman		ig Place (3)						-	of Facility (4 School (K-1)							
Street Address 119 Laguna Lane								×	Subchapter Other (i.e. poetc.)	8 (Oth				dings,	hom	es,
City (5) Loveladies NJ 080	008		- 10000	7.000 500	-				re Feet	# o	Floor	S		3ldg. A 35+	ge	
County (6) Ocean	· · · · · · · · · · · · · · · · · · ·				Code (7) USE ONLY)		Curre	ent Use (Prio	r if bei	ng der	nolish	ned)			
Name of Monitoring Fir	m Hired by Building	Owner (8)		ASC	M No.			of Aba	tement Con	tractor	(9)					
Street Address				l			Street	aco li Addre:				_				
City, State, Zip Code							15 1950	30x 32	29 ip Code							
Project Manager for Mo	onitoring Eirm			7-1			West	t Berli	in NJ 0809	91						
ATMA COSTRACT	onitoring Firm			Telepho			100000000000000000000000000000000000000	none N 753-9			Licer 0072		0.			
. Start Date (10) 10/15/12		Scheduled 10/19/12		pletion	Date (11)			of OSI aco Ir	HA Monitor							
Occupancy Status Duri	ng Abatement (Chec	k Only One)			r		Street	Addres	ss							
Facility Closed/Va	cated During Entire med Outside of Norn	Period of Ab	atem	ent				30x 32				A.O 25-3				
Other – Describe:		nat racility r	louis			_			ip Code in NJ 0809	91					u-a	
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Ali That Apply)	Proposition	novat	70(E-000)		to	×	Mir Glo	ll Containme ni-Enclosure ovebag Proc n-Exempted	edure					e	
			ocation rmall											Abate	ment pe	t
Locatio Asbestos-Containin <u>TO BE Ai</u> In Fac (13	g Material (ACM) BATED sility	Used Maint Custoo	Solel	y by ice/	Asbes (i.e.	tos Con thermal surfa	scription taining M systems cing, VA miscellan	laterial insula T, or	(ACM)	(8	mount specify or LF		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A	- Luagrae								-		te	Ф
Exterior	Siding			x		Exte	rior Sic	ding		24	00 SF	3	x			
Name of Registered Wa	aste Hauler		I N.	JDEP W	/aste	Cubic	Yards		Name of R	Panieta	red I a	ndfill	<u> </u>			
United Containers	10 SW 450 FLOD SQFE		Ha	auler ID		of Wa			G.R.O.V		, ou La	. raini				
City, State Elm NJ						Dispo:	sal Date 9/12		City, State Morrisvil		1906	 67				
Completed by Anthony T Perna		Title Preside	ent			S	Signature	e				Da 10	te /3/12	2		
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To + Emergency?

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	e of Notification (1) /3/12			4		Building (Ginsbur			(2) e	20120 ASEC	OP .	-IAI	ED			
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×	DEP DOL	Initial Amended Amendment		_		te, Zip Co haven I		J 0809	91	ASBES & L	ICE	CONT	Roi			
×	DOH DCA	justification)	0.70	Ī	Name of David	Contact					Tel	enhone Au	mber	9		
-					FACIL	LITY INFO	ORMATI	ON								
	ne of Facility Where Aba		g Place (3)						of Facility (4	ā.					
Stre	eet Address West California Av	•						200-21102		School (K-12 Subchapter of Other (i.e. programme)	8 (Oth			dings,	home	es,
City	(5)								Squa	etc.) re Feet	10/10/20/20	Floors		ldg. A	ge	
	ach haven Park NJ	08091			County C	- Code (7)			1000) + ent Use (Prio	2	na demalie		5 +		
Oc	unty (6) cean	122			(STATE U	JSE ONĹY,							neu)	.42000		
Nar N/	ne of Monitoring Firm Hir A	ed by Building	Owner (8)		ASCM	1 No.			of Aba aco I	nc	tractor	(9)				
Stre	eet Address	•							Addre	7.5		ė				
City	, State, Zip Code	· · · · · · · · · · · · · · · · · · ·								ip Code in NJ 0809	91					
Pro	ject Manager for Monitor	ing Firm			Telephor	ne No.			hone N 753-9			License N	lo.			-
Sta	rt Date (10)		Schedule	ed Cor	nnletion I	Date (11)	V.			HA Monitor		00727				
	/3/12		10/3/12		iipiouoii i	Julio (11)		Sam		i ii (iii ciiii ci						
Oc	cupancy Status During A	batement (Chec	k Only Or	ne)			1	Street	Addre	SS						
×	Facility Closed/Vacated Abatement Performed Other – Describe:						_	City, S	State, Z	ip Code					A	
Sco	ppe of Work (Check All T	hat Apply)								40						
×	≥3 sf or ≥3 if ≥160 sf or ≥260 if		-	Renova Demoli			1.02	3	Mi	III Containme ni-Enclosure ovebag Proc on-Exempted	edure		38		e	
			Is	Locat	ion;		//								ement pe	
	Location of Asbestos-Containing Ma TO BE ABATE In Facility (13)	aterial (ACM)	Use Ma	Norma ed Sole intena todial (12)	ely by nce/ Staff?		tos Con therma surfa	escription taining I I system acing, VA miscella	Materia is insul AT, or		(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
_			Yes	No	N/A			10	-121			00.05		-		
_	Gable end of h	nouse	-		X		EXTE	erior Si	albg		31	00 SF	×	-		
-					-								+-			-
-								10 1 10 mm					+-	-	_	-
Na	me of Registered Waste	Hauler		1	NJDEP W	/aste	Cubic	Yards		Name of F	Registe	ered Landfi				
Un	ited Containers	n (nastini) (st. 1)			Hauler ID 2459	No.	of Wa			G.R.O.\						
	y, State n NJ			2000			Dispo	sal Date	3	City, State Morrisvi		A 19067				
Co	mpleted by thony T Perna		Title	ident				Signatur	e Ø	1		D	ate 0/3/12			



CK799

Date of Notification (1)	7			Name	of Building	Owner	Operato	r (2)		M	ECI	~/1			
10/3/12				Zaino	o / Resid	lence	Operato	r (2)	2	Bto.	(-1 ¥	EL)	
Agencies Notified	Type Notification	1			Address East Holl	ly Banl	ks Stre	et		H2OC	7//	PH	1.0		
EPA DEP DOL	Amended			City, S	tate, Zip C	ode			- 45	BEST	ne.		1. U		
	Amendmen Emergency	(including	_	Commence of the	Beach 7		IJ 0800	8		& LI	CEN:	ONT	RAI		
DOH DCA	justification Cancellation			Erik	of Contact					& LI	phone	NAMOR	ا مر	».	
Name of English Manage	Abeten - II T II			FAC	CILITY INF	ORMAT	TION							9	
Name of Facility Where Zaino / Residence	e Abatement is Takii	ng Place (3)		•			Тур	e of Facility	(4)					
Street Address								-	School (K- Subchapte	12) r.8 (Othe	r than k	(_12)			
128 East Holly Ba	nks Street							×	Other (i.e. petc.)	private &	comme	ercial b	uilding	s, hon	nes,
City (5) Long Beach TWP	NJ 08008				-			Squ 100	are Feet	# of 2	Floors		Bldg 35+	Age	
County (6) Ocean				County (STATE	Code (7))		Curr	rent Use (Pri		g demo	lished)			-
Name of Monitoring Fir N/A	m Hired by Building	Owner (8)		ASC	M No.		Name Pern	of Ab	atement Cor	ntractor (9)				
Street Address			-				Street								
City, State, Zip Code							PO E								
25 26 257.0						City, S West	tate, z t Ber	Zip Code lin NJ 080	91						
	1.		Telepho	•	N.	Teleph 856-				License 00727		11155			
10/16/12	tart Date (10) Scheduled 10/25/12						Name Perna		HA Monitor nc				13-7/2		
Occupancy Status Durin		3	100	1200-122			Street					Ti			
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire I ned Outside of Norm	Period of Anal Facility	Abater Hour	nent s				tate, Z	Zip Code						
Scope of Work (Check /	A						West	Berl	lin NJ 080	91					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	а такаруу	STATISTICAL	enova		3	æ	×	Mi Gle	III Containme ni-Enclosure ovebag Proc n-Exempted	edure					
	1999	ls	Locat	ion.				140	n-Exempled	() and	NOII-FII	able Pr		re temen	1
Location Asbestos-Containing	n of	l N	lormal d Sole	lly			scription						T	уре	
TO BE AB In Faci	ATED lity	Mai Cust	ntena odial S (12)	nce/ Staff?		thermal surface	taining M systems cing, VAT niscelland	insula r, or		(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior (Oldin a	Yes	No	N/A										6	
Exterior	Exterior Siding						rior Sid	ing		2500	0 SF	x			
Name of Registered Was	ste Hauler		N	JDEP W	asto I	Cubia	Varda		1 1						
United Containers	Н	auler ID 2459	30505050V	of Was			Name of R		d Landf	ill					
City, State Elm NJ	ity, State						al Date /12		City, State Morrisvil		9067				
Completed by Anthony T Perna		Title Presid	lent			Si	gnature					ate 0/3/1:			\exists

State of New Jersey

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

			1		NJAC 6.60-7 and 12	2.120-7)		RF	CEN	C	heck	# 69	927	
Date of Notification (1) 10/4/12			on Co	(T)	r/Operator (2)									
Agencies Notified [] EPA [] DEP [x] DOL Type of Notified [] Initial Notificati [x] Emerger	cation S 5	treet A	Address Newark ate, Zip (ey City,	Ave.		į		2012 OCT 4 5 8 E S T & L I	OS CO	M I:	C 0 1			
[x] DOH Amende Notificati	ion		of Contac		7300			Telephone Nu	umber	VG.	G.)		
[] DCA [] Cancellat	1 33		Galage	er			1				46	r.		
				FACILI	TY INFORMATION	-300							ñ.	
Name of Facility Where Abatement is Hudson County Public Safe Street Address 555 Duncan Avenue			anne de la constante de la con			Type []	of Facility School Subch Other ((4) I (K-12) Lapter 8 (Othe (i.e. private a s, etc.)	er than K-1 nd comme	2) rcial b	uildin	gs,		
	County	(6)	271-21-2	1 Ce	ounty Code (7)	Squa 2500	re Feet	# of Flo	ors	Bldg ~ 50	g. Age	Ž		
City (5) Jersey City	Huds	70.00			TATE USE ONLY)	Curre		rior if being de	emolished)					
Name of Monitoring Firm Hired by Bui Whitman Companies, Inc.	lding Owne		ASCM N 00110		Name of Abate			nmental S	Services	. Inc).			
Street Address	105				Street Address					•			-	_
7 Pleasant Hill Road							Court							
City, State, Zip Code Cranbury, NJ 08512					City, State, Zip		ln Park,	NJ 0703	5					
Project Manager for Monitoring Firm Kevin Lovely			Number 0-5858		Telephone Nun		09-020	0 .	Licen	se Nu		85	2	
	hed. Comp	letion	Date (11		Name of OSHA	Monitor	6				0202 2			-
10/6/12		9/12				J&S	Enviror	mental L	aborato	ries,	LLC	; 		
Occupancy Status During Abatement [] Facility Closed/Vacated Durin [] Abatement Performed Outside Describe: Page 18 Page 18	ng Entire P e of Norma	eriod	of Abater		City, State, Zip	Code	Route 2							
[X] Other - Describe: partially v	acateu				1		,							_
Scope of Work (Check all that apply) [] Demolition [x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥260 lf			[X]	Reno	vation		[x] Mir	ll Containmer ni – Enclosure ovebag Proce n – Friable P	e edure	ative	Press	ure	â	- 3
Location of Asbestos – Containing Material (ACM) TO BE ABATED In Facility	No.	Solely tenan	Used		Asbestos Mate	rial (ACM rmal syst surfacing	iining (I) tems g, VAT,	*	Amou (Spec SF or I	ify	Aba Typ R E M O V		CA	N
(13)	Yes	No	N/A		OI OUIOI I	moonan	0000)				A L	R	S	
Narcotics Division Office		X		Plaste	er/spray-on ceiling	9			12 SF		X	-	+	
											H	-		
Name of Registered Waste Hauler Jupiter Environmental Servi			Waste D No. 2	C	Cubic Yards Of Waste 1	Mir	nerva La	stered Landfil andfill						
City, State Lincoln Park, NJ					Disposal Date 10/12/12		, State aynesbu	ırg, OH						
Completed By (Print or Type) Pane Repic	Title Ger	eral	Mana	 	Signature	7 (10	7	Dat 10	e /4/1:	2		35%	

State of New Jersey

NOTIFICATION OF ASBESTOS (BATEMENT) (Pursuant to NJAC 8150-Zaha 12-1207)

Check # 6927

Date of Notification (1)	10/4/12			Building C n Coun	owner/Ope	rator (2) 112 OCT 11	PM 1: 01		APPROVED		_	7
	Type of Notific		eet Ad					Ma Depti of 1	leaith & Seni	or Sei	vice	2
Agencies Notified	Type of Notific			ewark A	lve.	rarerne	CONTRA	L Josef C	- Man	2	_	-
[] EPA	[] Initial	1			D	205210	CONTRO	1	(signature)	-1.2	- 5 6	Ma
[] DEP	Notification [x] Emergence		y, Stat	e, Zip Co			TADING	(bate: 10 L	H/2_Time	1:5	31	7
[X] DOL	[] Amended		ersey	City, N	IJ 0730	6		****				
[x] DOH	Notification	on Ne	man of	Contact				Telephone Numi	ber			
[] DCA	Amend [] Cancellati								_			
	[1 Cancellan	O., K	ay G	alager			i					
			(0)	FA	ACILITY IN	FORMATION	Type of Facili	IV (4)				
Name of Facility When	e Abatement is	raking Plac	e (3)				: Il Schr	sol (K-17)	Dan (/ 42)			
Hudson County	Public Safet	th Ralial	ng				X Sub	chapter 8 (Other ter (i.e., private and	commercial b	uildin	JS.	
Street Address							hom	nes, etc.)				
555 Duncan Ave	enue						Square Feet	# of Floors	Bldo	. Age		
514.76		County	'6\		County	Code (7)	250000	13	~ 50			
City (5)		Hudso				USE ONLY)		Prior if being den	nolished)			
Jersey City		1000 - 1000 ABS-100					Office building				~	
Name of Monitoring F		ding Owne	3 2500	SCM No.	1	Name of Abstern	ent Contractor	(9) montal Co	antices Inc			
Whitman Compa	anies, Inc.] 0	0110			Jupiter Envi	ronmental Se	sivices, tric	<i>.</i>		
Street Address	ware oran					Street Address						
7 Pleasant Hill F	Road				₋		3 Lynn Cour					
City, State, Zip Code					110	City, State. Zip C	lincoln Dor	k, NJ 07035				
Cranbury, NJ 08						Telephone Numi		K, 140 E7 000	License No	mber		~
Project Manager for N	lonitoring Firm	0.0000000000000000000000000000000000000		Number			973-709-02	กก			852	2
Kevin Lovely	/40) I 0-1	hed. Comp		~5858	I	Vame of OSHA						-
Scheduled Start Date 10/6/1			9/12	Jake (11)	11'	vaile of oos in	J&S Envir	onmental Lal	boratories,	LLC	;	
						Street Address		~~				
Occupancy Status Du [] Facility Close	nng Abarement ed/Vacated Durin	na Enfire Pe	eriod o	f Abateme			2333 Route	22 W				
[] Abatement Pe	erformed Outside	of Norma	Facili	ly Hours -	1 4	City, State, Zip C						
Desc	ribe:				11	oly; owle, 24	Union, NJ (07083				
[X] Other – Des	cribe: partially ve	eçateg				~	0111011, 110		-111		~~~	
Scope of Work (Chec	k all that spply)						[]	Full Containment	with Negative	Press	ure	
11 Demolition				[X]	Renovatio	n .	ľxľ	Mini - Enclosure				
[] Demolition [x] ≥3 sf or ≥3 if				6.4			Ĺĵ	Glovebag Proced	ure			
[] ≥180 sf or ≥2							[]	Non - Friable Pro	cedure			
			Locati		~					1	atem	ent
			mally i				ription of - Containing		Amount	R		ELE
Location Asbestos ~ 0			Sciely t	e/Cus			rial (ACM)		(Specify	E	E	N N
Material		E 144 (100 (100 (100 (100 (100 (100 (100	al Staf			(i.e., ther	mal systems	1	SF or LF)	M		CC
TO BE A	BATED		,				surfacing, VAT. niscellaneous)			0 V		A L P O
in Fac		Yes	No	N/A		of other it	mscenariecus)			A		5 5
(13	,	168	140	1						L		UU
Narcotics Division (Office	~	X	İ	Plaster/sp	pray-on ceiling]		12 SF	X	1	<u> </u>
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	-											
Name of Registered V	Vaste Heuler	7,000,000	DEP V			Yards		egistered Landfill				
Jupiter Environm	nental Servi	ices H	auler 10 04782		Of W	25t6 1	Minerva	Landfill				
- C'1 - C'1-1-			04/02		Dieno	sal Date	City, State					
City, State	1					12/12		burg, OH				
Lincoln Park, N. Completed By (Print of		Title			1 .01	Signature	7 /	OI .	Date		-	
Pane Repic	y Type)	3	eral	Manag	er	1	1 / 2	-	10/4/1	2		
(alle Neplu		001	.o.ai	.ararrag	, ~,	K.		3, romer				
ASB-41							180					

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

2012 OCT 11 PM 11 DE & LICENSING Date of Notice 9/28/12 Name of Building Owner / Operator (2) Type Notification Prymar, Inc. Agencies Notified Street Address **EPA** X **Emergency Notification** 34 Washington Street X DEP City, State & Zip Code Initial Notification X DOL Amended Notification Clark, NJ 07066 X DOH Cancellation Name of Contact Telephone Number DCA Richard Marhold **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **Commercial Property** School (K-12) Subchapter 8 (Other than K-12) 33 Westfield Avenue X Other (i.e., private & commercial buildings, homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 5000 60 Clark Union Current Use (Prior if being demolished) Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Tactics, Inc Global Abatement Services, LLC Street Address Street Address 64 Broad Street 443 Schoolhouse Road City, State & Zip Code City, State & Zip Code Matawan, NJ 07747 Monroe Township, NJ 08831 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Tom Geiger 732-290-2217 732-605-9062 00714 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10/12/12 10/15/12 Global Abatement Services, LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code Describe: Area Isolated During Abatement Monroe Township, NJ 08831 Other - Describe: Scope of Work (Check all that apply) Demolition X Renovation Full Containment with Negative Pressure Large Project Mini-Enclosure Quantity is ≥ 3 SF or ≥ 3 LF ACM X Glovebag Procedure Quantity is ≥ 160 SF or ≥ 260 LF ACM Other: Clean up Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify: Removal, (Specify Material (ACM) Solely by Material (ACM) Square Feet Repair, Encapsulation TO BE ABATED Maintenance or (i.e., thermal systems or Enclosure) or in Facility Custodial Staff? insulation, surfacing, VAT Linear Feet) (13)or other miscellaneous) (12)Basement N/A TSI Pipe 60 LF Removal Name of Registered Waste Hauler NJDEP Waste Hauler ID # Cu. Yds. of Waste Name of Registered Landfill Freehold Cartage 18693 TRRF City, State Disposal Date City, State Freehold, NJ 10/15/12 Tullytown, Pa Completed By (Print or Type) Title Signature Date Dominick Tringali Pres. Dominick Tringali 9/28/12 ASB-41 JUN 95 G4667

RECEIVED.

Date of Notification (1) 10/02/12		Name of Building Owner/Operator (2)2220CT PM 12: 59 Street Address															
Agencies Notified	Type Notification		Street A	ddress	3	72.	ASE	3FST00	, <u>je</u>	H 12:	59						
X EPA X DEP X DOL	Initial Amended Amendment				ate, Zip Co rk NJ 07				ESTOS & LICE	Ksi!	NTRI VG	OL.					
DOH DCA	Emergency (i justification) Cancellation	ncluding		Name o	f Contact otz				-	Tel	enhone	NE A					
_				FAC	LITY INFO	ORMAT	ION										
Name of Facility Where Residential Proper	Same and the comment of the section of the	Place (3)							of Facility (4 School (K-12	2)							
Street Address 54 Morristown Rd.								×	Subchapter Other (i.e. pr etc.)					dings	, hom	es, ·	
City (5) Bernardsville								Squar 1700	re Feet)	# o 2	f Floors		12.53	Bldg. Age 110			
County (6) Somerset					Code (7) USE ONLY				nt Use (Prio dential	r if bei	ing dem	olishe	ed)				
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASC	ИNo.		11/2/2015/19/2019		tement Cont vices Inc.		(9)						
Street Address								Addres									
City, State, Zip Code			W 201				City, S	State, Zi	ip Code NJ 0705	7							
Project Manager for Mor		Telepho	ne No.		Teleph	none No 406-7	o.		Licens 0110		Ç.						
Start Date (10) 10/03/12	d Con 2	pletion	Date (11)			of OSH	A Monitor										
Occupancy Status Durin								Addres									
l h é								Maple									
	ated During Entire Poned Outside of Norma						1		p Code NJ 0705	7							
Scope of Work (Check A	II That Apply)						110	ington	110 0100		_						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
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16 2	120		_ocati ormal			4									ре	3	
Location Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ACM) <u>ATED</u> lity	Used	Sole Stenar	ly by nce/	Asbestos Contain (i.e. thermal sys			escription of ntaining Material (ACM al systems insulation, acing, VAT, or miscellaneous)			mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A											Ф		
basem	ent			*		pipe	e insula	tion		2	50lf.		*				
1st flo	or			*		- 1	loor tile	9		2	00sf.		*				
dilapidated		*		roc	of flashing 10sf. *												
Name of Registered Was	N	JDEP W	/aste	Cubic	Cubic Yards Name of Registered Landfill												
Nowark Carting Inc					Hauler ID No. of Waste 5				GROWS								
City, State Newark NJ						Disposal Date 10/13/12			City, State Morrisville PA								
Completed by Leslaw Nalodka Title President					sident Signature Date 10/02/12												



Date of Notification (1) 10/02/12		Name of Building Owner/Operator (2) Frank Ricker Street Address 50 Morristown Rd. City, State, Zip Code Bernardsville N I 07924								2: 5	59					
Agencies Notified	Type Notification	1	10.25	Street A 50 Mo	^{ddress} rristown	Rd.			,		BEST & III	US C	ON	- Rn	1	
× EPA × DEP × DOL	Amended Amendment				ite, Zip Co rdsville i		24					-EN.	HIG		G)	
DOH DCA	Emergency justification) Cancellation	,	3.0	Name of Bill Ho	f Contact tz			1		Tel	ephone N	umber				
				FACI	LITY INFO	ORMAT	ION									
Name of Facility Where Residential Propert		ng Place (3)						Туре	of Facility (4							
Street Address	у								School (K-12 Subchapter		er than K-	12)				
50 Morristown Rd.								×	Other (i.e. pr				dings,	home	es,	
City (5)					-				etc.) re Feet	# 0	f Floors	F	Bldg. Age			
Bernardsville								2970		2		100	30	3-		
County (6)			T	County (Code (7)			Curre	ent Use (Prio	r if bei	ng demoli	shed)			-	
Somerset			- (STATÉ	JSE ONLY)				idential							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	I No.		10.000000000000000000000000000000000000		tement Cont		(9)					
N/A							Lesc	o Ser	vices Inc.							
Street Address								Addre: Maple								
City, State, Zip Code							17. SANSA 10. TO SANSA 10.		ip Code NJ 0705	7						
Project Manager for Mor			Telepho	ne No.		1.0000000000000000000000000000000000000	none N 406-7		License No. 01107							
Start Date (10)		Scheduled	Com	pletion I	Date (11)		Justice 7/4	1.755	HA Monitor	r						
10/03/12		10/12/12					Lesla	aw Na	alodka							
Occupancy Status Durin	g Abatement (Che	ck Only One)						Addre: Maple								
Facility Closed/Vac Abatement Perform									ip Code							
Other – Describe:	ed Outside of North	nai i aciiity i	ours				0 1 1 1 1 1 T 1 1 1 1 1 1 1 1 1 1 1 1 1		NJ 0705	7						
Scope of Work (Check A	II That Apply)						5.00000	3		433						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		and the same of th		vation					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
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	j		ocation rmall											ре		
Location Asbestos-Containing		Used	Solel	y by	Asbes		scription taining N		(ACM)	A	mount			т		
TO BE AB	ATED	Maint				thermal	systems	s insula			Specify	Rer	72	Encapsulate	Enclosure	
In Facil (13)	ity	1.0000000000000000000000000000000000000	12)	2001210			cing, VA niscellar			SI	or LF)	Remova	Repair	psul	losu	
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roof		+	-	*		4 5	ng mat			4	20sf.	*	1			
											\vdash					
Name of Registered Was	ste Hauler		70713	JDEP W		200 SANCE (C.)	Yards	rds Name of Registered Lan		red Landf	fill					
Newark Carting Inc.	Hauler ID No. of Waste 5 GROW				VS											
City, State Newark NJ		Disposal Date City, State 10/13/12 Morrisville F					e PA									
Completed by Leslaw Nalodka	ident Signature					Date 10/02/12										
Losidar I valodika					~	_/Van										



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Print Form

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Date of Notification (1) 10/4/12	10/4/12							2 OCT	PH	2: 4	5			
Agencies Notified Type Notification	1			lon Nuc t Address 388			ASI	& LICE	CON	TRO	L.			
DEP Amended Amendmen Emergency				State, Zip ed Rive	Code er, N.J.	08731			HOIME	i	7)			
DOH justification Cancellatio)	ng		of Conta				Te	elephone N	Numbe	r		-	
Name of Facility Where Abatement is Takin	no Place	(3)	FA	CILITY IN	FORMA	TION	T = 15							
Oyster Creek Nuclear	ig i lacc	(5)					Type of Fa							
Street Address PO 388					10		Subcl	ol (K-12) napter 8 (Ot (i.e. private	her than K & comme	-12) rcial bi	uilding	js, ho	mes,	
City (5) Forked River							Square Fee 800,000	et #	of Floors	T	Bldg. Age 45 years			
County (6) Ocean				Code (7			Current Us Nuclear I	e (Prior if be	ing demol	ished)	•			
Name of Monitoring Firm Hired by Building AET	Owner (8)	ASC 000	M No. 21		Name Adva	Name of Abatement Contractor (9) Advanced Nuclear LLC							
Street Address 28 North Pennell Rd						10.000000000000000000000000000000000000	Address North Lime	St						
City, State, Zip Code Media, Pa. 19063	Media, Pa. 19063							le 17602						
Project Manager for Monitoring Firm Tony Smith			one No.	4	Teleph	one No. 399-5213	*	License 01186	No.					
Start Date (10) 10/22/12	Schedu 12/31		mpletion	Date (11)		of OSHA Mo Smith Al							
Occupancy Status During Abatement (Chec	k Only C	ne)					Address						2 22	
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Refuel Outage Maint	al Facili	V Hour	e				orth Penne ate, Zip Code							
	enance i	ersonr	ner				a, Pa. 19							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	TOTAL CO.	Renova Demoli				×	Mini-Enclo Glovebag	ninment with sure Procedure opted (*) and				re		
A		Locat Normal								T	Abat	emen	t	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use	ed Sole intena todial S	ely by nce/	Asbe:	stos Conta thermal	scription of aining Ma systems king, VAT	iterial (ACM) insulation,	(S	nount pecify	Re	Π	/pe Enc	E	
(13)	Yes	(12) No	N/A			niscellane		SF.	or LF)	Removal	Repair	Encapsulate	Enclosure	
Various locations Reactor/Turbine			the	mal sys	stems in	sulation	10	0 LF	x	×	x			
		-				-0.00								
Name of Registered Waste Hauler Hittman Transport	<u> </u>	H.	NJDEP Waste Cubic Yards Hauler ID No. of Waste TND98778065 6				Name Dura	of Register tek	ed Landfill					
City, State Dak Ridge, TN	Disposal Date 12/31/12					City. State Barnwell, S.C.								
Completed by	Title					gnature			Da	te			-	

NOTIFI (Pi

State of New Jersey ICATION OF ASBESTOS ABATEMENT ursuant to NJAC 8:60 and 12:120)	RECEIV#02/69
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Date of Notification (1) 10/04/12		Name of Building Owner/Operator (2) Victor Slezak Street Address A S R S C T T														
Agencies Notified	Type Notification			Street A	ddress Iwood F	Road	í		ASB	STO	S CON ENSIN	TDO				
EPA DEP DOL	Initial Amended Amendment				te, Zip Co Grove,		009		Q ;	LIC	ENSIN	G RU	L An			
DOH DCA	Emergency (i justification) Cancellation	ncluding		0.00	Contact Slezak	_				Tele	ephone Nu	ımber				
				FACI	LITY INFO	DRMATI	ON					(C)				
Name of Facility Where Residential Propert		Place (3)							of Facility (School (K-1	12)						
Street Address 37 Elmwood Road								×	Subchapter Other (i.e. petc.)				dings	home	es,	
City (5) Cedar Grove	RI .								re Feet	# of 2	Floors	Bldg. Age 50+				
County (6) Essex					Code (7) JSE ONLY)		Curre	ent Use (Pri	or if bei	ng demolis	shed)	7			
Name of Monitoring Firm	n Hired by Building C	Owner (8)		ASCN	1 No.				atement Con Contractin			0.0011-0.00				
Street Address	· · · · · · · · · · · · · · · · · · ·							Addre Sarge	ss eant Aver	nue						
City, State, Zip Code							City, State, Zip Code Clifton, NJ 07013									
Project Manager for Mor	nitoring Firm			Telephor	ne No.			none N 689-6			License 01099	No.				
Start Date (10) 10/20/12		d Com	pletion I	Date (11)				HA Monitor onmenta		ratories	LLC					
Occupancy Status Durin	g Abatement (Check	Only One	∌)				Street	Addre	ss							
Abatement Perform	ated During Entire P ned Outside of Norm	eriod of A al Facility	batem Hours	ent		-	City, S	state, Z	te 22 We	st						
Other – Describe:						_	Unio	n, NJ	07081							
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	************	enova emoliti				×××	Mir	II Containm ni-Enclosure ovebag Pro n-Exempte	e cedure	273			A		
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Location	n of		ormail	0.000		Des	Type Description of									
Asbestos-Containing TO BE AB In Fact (13)	Material (ACM) ATED lity	Mair	d Solei ntenar odial S (12)	ice/	Asbes (i.e.		Material s insula T, or	10019000110	(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure		
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Basem			X		Pipe	ipe Insulation 20 LF x										
Name of Registered Wa	0.000	JDEP W		Cubic of Was	oto .											
Pyramid Contracting	g Corp.		Hauler ID No. of Wa 32613 1				SIC .	G.R.O.W.S., Inc.								
City, State Clifton, New Jersey			Disposal Date City, State Morrisvitte, Penns				ennsylva	sylvania								
Completed by Title																
Dimo Golcev General I							14	W	4 4		/1	0/04/1	12			
ASB-41 (R-06-08)				(Do no	ot use t	this form for	asbest	os licensu	re exen	npted	activit	ties.			

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

Job #: 1209-1678-3

Date

10/5/12

Check #: 2856 (Pursuant to N.J.A.C. 8:60 and 12:120) RECEIVED Date of Notification (1) Name of Building Owner / Operator (2) State of NJ Department of Children & Families - Office of Education
Street Address
10 Quakerbridge Plaza 10/5/12 Agencies Notified Type Notification \bowtie EPA & LICENSING Telephone Number 1 DEP Initial : City, State & Zip Code X DOL Amended Trenton, NJ 08625 \boxtimes DOH Emergency Name of Contact DCA Cancellation Mr. Ronald Wybraniec, Operations Mgr. **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **Atlantic Campus** School (K-12) Street Address Subchapter 8 (Other than K-12) 252 Tilton Road Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 11,253 1970 Egg Harbor Twp. Atlantic Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Connection, Inc. 00030 Asbestos and Mold Services, Corp. Street Address Street Address 120 North Warren Street 3859 Sylon Blvd. City, State & Zip Code City, State & Zip Code Trenton, NJ 08608 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **Brian Holbig** 609-462-3218 609-702-0400 00862 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10/15/12 10/18/12 EMSL Analytical Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 107 Haddon Ave. Abatement Performed Outside of Normal Hours City, State & Zip Code Describe: Westmont, NJ 08108 Isolated Area Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure ≥160 sf ≥260 lf Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate TO BE ABATED Maintenance or Remova (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A (13) Window Openings \boxtimes Asbestos Glazing 1,125 LF \boxtimes Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Horizon Disposal 22612 **GROWS** City, State Disposal Date City. State Trenton, NJ 10/18/12 Morrisville, PA

Title

Admin.

Signature

Completed By (Print or Type)

Kim Trumbetti

Courtesy Notification -Government Property

Job#:	1207-1655
CHRON	#: NA

Date of Notification	1 (1)			Nar	ne of I	Buildin	g Owner / Opera	tor (2)		2012	20-	~/	NE	'n		
7/16/12	T=			Fed	deral	Aviat	on Administra	ation WJ	H Technic	al Cente	CT//	- 2	•	Manage .		
Agencies Notified EPA	Type Notificat	tion		Stre	et Ad	dress		2*		SBEO		PA 0840	12.			
DEP	☐ Initial			City	Vironi	menta	I & Safety Sec	ction AN	G-# 332 A	CY Late	PONJ C)840	5 4	12		
⊠ DOL	The second secon	ded #2 OFF		Atla	antic	City,	g Owner / Opera on Administra al & Safety Sec Code NJ 08405			- 4/	CENSI	DAT NG	ROI			
□ DOH	☐ Emerg	ency		Nar	ne of (Contac	t		_		Teleph	One	NLAST.			
DCA	Cance	llation		_			est, Asbestos	Program	n Manager		relepii	one	NUMBER	per		
Name of Facility W	here Abatemer	nt is Taking DI	200	F (2)	ACILI	TY IN	FORMATION				1000					
Building #162-A	SR-9	it is raking Fi	ace	(3)			Type of Fac	(K ₋ 12)								
Street Address									ther than K-	12)						
Building #162 F/	AA TC Atlanti	c City Intl. A	lirpo	ort			Other (i.e. private	e & commer f of Floors	cial buildi			etc.)			
City (5)	IC	County (6)	C	ounty	Code	(7)	4731			- 1	Bldg. A	_				
Atlantic City	100	Atlantic		,		. (.)	Current Use	Prior if h		52 years						
							Airport	, (1 1101 11 1	being demoi	isileu)						
Name of Monitoring	Firm Hired by	Building Own	er (8)	AS	CM N		atement (Contractor (9	9)				_		
Criterion Labora Street Address	tories						Asbestos	Corp.								
3370 Progress D	rive, Suite J						Street Addre 3859 Sylor	ess								
City, State & Zip Co Bensalem, PA	de						City, State 8	Zip Code								
Project Manager for	Monitoring Fire		Ŧ.,				Hainespor		036							
Mike Panapresso)		215-	244	e Num -1300		Telephone N 609-702-04		License I	Number 0086						
Scheduled Start Da 10/9/12	105 105/1	heduled Com	pleti	on D	ate (1	1)	Name of OS		or			12				
Occupancy Status [Ouring Abateme	/9/12 ent (Check onl	v on	e)			EMSL Ana Street Addre			. X						
Facility Clos	ed/Vacated Du	ring Entire Pe	riod	of Al	oatem	ent	107 Haddo									
Abatement I	Performed Outs	side of Normal	Ηοι	ırs			City, State &)							
☐ Describe:☐ Isolated Are							Westmont,									
Scope of Work (Che	77	v)														
		,						☐ Fi	ıll Containm	ninment with Negative Pressure						
≥3 sf or ≥3 lf			\boxtimes		novati			⊠м	ini-Enclosur	e	regative	ries	soure	1		
≥160 sf ≥260	זו ל			De	molitic	n		GI	love Bag Pro	ocedures						
10	cation of		lo l		· · · · ·	_		No	on-Exempte	d and Nor	n-Friable	e Pro	cedu	ıre		
Asbesto	os-Containing			_oca	Used		Description Asbestos-Cor	n of		Amount	Aba	ateme	ent T	уре		
	erial (ACM)	1	S	olely	by		Material (A	CM)		Specify F or LF)			т			
	E ABATED Facility				nce or Staff?		(i.e., thermal s	ystems		. 0, _,	ᇛ	Z.	inca	Enc		
· · · · · · · · · · · · · · · · · · ·	(13)		Justic	(12)	Stair?		insulation, surfactor or other miscell	cing, VAT			Remova	Repair	Encapsulate	Enclsoure		
		Y	'es	No	N/A	1	or ouror miscon	uncous)			<u> </u>	7	late	le l		
Building #162						Doub	e Layer Floor Tile	and Plyw	ood 20 SF	=			П			
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					\boxtimes							뉘	片	Η		
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ame of Registered Waste Hauler					DEP V						\boxtimes					
lorizon Disposal					uler I	No.	of Waste									
City, State					22612 5 GROWS											
Γrenton, NJ							Disposal Date City, State 10/9/12 Morrisville, PA									
ompleted By (Print		Titl	e -		Signature /											
(im Trumbetti		Ac	lmin		10/5/				0.555	12						
	250						11-1/									

980370

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

RE	Print Form
20.	CEIL
CO12 OFT	ED

Date of Notification (1) 10/4/12				Name	of Buildi	ing Owner/	Operato	r (2)		A	I.C.	٠,	//	P	4.
Agencies Notified Tyr	gencies Notified Type Notification										OAF	Sr	0	e. /	1/
EPA E	Initial			PO 3	Address 888	į.				1	\$ ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ±	Lic	13/	CON	7
X DEP	Amended			City, S	state, Zip	Code							-185	TANC	P
DOL DOL	Amendmer Emergency	nt#				er, N.J.	08731							6	
DOH DCA	justification)	ig		of Conta						none N		Thursday Toy		
	Cancellatio	n										_			
Name of Facility Where Abate	ment is Taki	ng Place	(3)	FA	JILITY II	FORMAT	ION	Тур	e of Facility ((4)					
Oyster Creek Nuclear Street Address									School (K-1						
PO 388								×	Subchapter Other (i.e. p	8 (Other t	han K- ommer	12) cial bu	uilding	ıs, hor	nes.
City (5)								Squ	etc.) Jare Feet	# of Fig				. Age	
Forked River County (6)				,				800	0,000	6				ears	
Ocean					Code (7			Cur	rent Use (Prio	or if being	demoli	shed)			
lame of Monitoring Firm Hired	by Building	Owner (8	3)		M No.		Name		patement Con						
AET				000			Adva	nce	d Nuclear	LLC					
Street Address 28 North Pennell Rd							Street	Street Address							
City, State, Zip Code								120 North Lime St							
Media, Pa. 19063	edia, Pa. 19063							v, State, Zip Code Incaster, Pa. 17602							
Project Manager for Monitoring		Telepho	ne No.		Teleph				cense l	No					
i ony Smith Start Date (10)	ony Smith						717-3			7	1186	₩.			
10/22/12		Schedu 12/31/	led C	ompletion	Date (11)			SHA Monitor			-			
Occupancy Status During Abat	ement (Chec						1-commence (50%)		ith AET						
Facility Closed/Vacated D	uring Entire I	Doring of	A la	ement	Street Address 28 North Pennell R							w - o Ne.			
Abatement Performed Out Other – Describe: Refuel	side of Norm	al Facilit	LIA.		City, State, Zip Code										
cope of Work (Check All That		- nanoc r	51301	11/61			Media, Pa. 19063								
The state of the s	~hhià)	.													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renov Demo	vation lition			×	Fu	ill Containmer	nt with Neg	jative i	Pressu	ure		
		Comments 200					×	Gl	ovebag Proce	edure					
		Is	Loca	ntion			ᆜ	No	n-Exempted	(*) and No	n-Friat	ole Pro	A STATE OF THE PARTY OF THE PAR		
Location of		1 1	Vorma	ally		Des	cription o	of						ement ype	1
Asbestos-Containing Materia TO BE ABATED	ai (ACM)	Ma	inten	ely by ance/	Asbe	stos Conta	ining Ma	teria	I (ACM)	Amour			T	m	
In Facility (13)		Cust	odial (12)	Staff?	(i.e	thermal s surfaci	ng. VAT	OF.	auon,	(Specion SF or L	y F)	Rem	Re	ncap	Encl
		Yes	No	N/A		other mi	scellane	ous)			A.57	Removal	Repair	Encapsulate	nclosure
arious locations Reacto	r/Turbine	X	.10	14/	44.5	mal								e	
		1	-	+	tne	mal sys	ems in	isula	ation	100 L	F	x	x	x	
		-						0.8							
		-		+											
me of Registered Waste Haule	er		-	LIDERIA	neto.	T									
ttman Transport				JDEP Wa	Vo.	of Waste	ubic Yards Name of I Waste			gistered L	andfill				
ity, State				ND9877	6	Duratek			<u> </u>						
Oak Ridge, TN					40.00 4140				City, State						
Completed by Title				12/31/12				Barnwell, S.C.							
James Hess Project				et Manager					. //		Dat	е	181	/_	- 1

ASB-41 (R-06-08)

Do not use this form for asbestos licensure exempted activities.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT CHECK #4536 (Pursuant to N.J.A.C. 8:60 and 12:120) RECEIVED

1208-4536

Date of Notification (1)		Name of Building Owner / Operator (2) The College of New Jersey Street Address PO Box 7718												
8/11/1 Agencies Notified Type No			t Addre		New Jersey		AM	10: 2	3					
EPA	uncation		Box 77			AS	BESTOS CON & LICENSINU	.0. 68						
<u></u>	nitial		State &	_	ode		& I ICE CON	TDO		20 222				
	mended #		g, NJ				LICENSINI	LUOL						
□ DOH □ E	mergency		of Co				Te	leph	Nui	mber				
	ancellation	Ama	nda R	adosi	ti									
		FA	CILITY	Y INF	ORMATION	<u> </u>								
Name of Facility Where Abat	ement is Taking Place				Type of Facili	ty (4)	W							
The College of New Jers	ey				School (H	(-12)								
Street Address						ter 8 (Other th	70							
2000 Pennington Road								ildings, homes, etc.)						
				eliz e	Square Feet	# of Flo	oors Blo	Bldg. Age						
City (5)		County	Code (7)										
Ewing	Mercer					Prior if being of	demolished)							
			-		Manhole									
Name of Monitoring Firm Hire	ed by Building Owner ((8)	ASC	M No.			ctor (9)							
TTI Environmental Street Address					AbateTech, Street Addres									
1253 North Church Stree	t				30 Maple Av	0.00								
City, State & Zip Code					City, State & Zip Code									
Moorestown, NJ 08057					Lumberton, NJ 08048									
Project Manager for Monitorin		lephone		er	Telephone Number License Number									
Jim Guilardi		6-840-8			609-265-2107 00529									
Scheduled Start Date (10) 10/3/12	Scheduled Comple	etion Da)/5/12	te (11)		Name of OSH EMSL Analy									
Occupancy Status During Ab					Street Addres									
	ed During Entire Perio		atemer	nt	107 Haddon	Ave.								
	d Outside of Normal F	Hours			City, State & 2									
Describe:					Westmont,	NJ 08108								
Facility Occupied Dur														
Scope of Work (Check all that	t apply)					☐ Full Co	ntainment with Ne	native F	recci	ire				
≥3 sf or ≥3 lf	×	7 Rer	novatio	n		Mini-En		ganvoi	1000	110				
≥160 sf ≥260 lf	Ë	70	nolition				Bag Procedures							
	_	_					empted and Non-F	riable l	Proce	dure				
Location of		ls Locat	ion		Description		Amount	Abat	emen	t Type				
Asbestos-Conta	0	ormally !			Asbestos-Cont		(Specify		$\neg \top$					
Material (ACM TO BE ABATE		Solely I			Material (AC (i.e., thermal sy		SF or LF)	R P	71	S =				
in Facility		stodial		i	nsulation, surfac			Remova	Repair	Enclosure				
(13)		(12)			or other miscella			<u>×a</u>	¥-	Enclosure				
	Ye	s No	N/A							0				
Manhole #2					Pipe Insula		80 LF		414					
Manhole #2				Asbe	estos/soil debri	s (clean up)	100 Cubic Yds.			414				
		 -	님						믞늗	러블				
		++	HH			*****			╡┼	╣岩				
		-	H					片片	╡┼╞	411				
Name of Registered Waste H	auler L	<u> </u>	DEP W	Jaste	Cubic Yards	Name of Red	istered Landfill							
Traine of Registered Video	1976996	uler ID		of Waste	Traine or reg	lotorod Editaliii								
AbateTech, Inc.	1000	750		12	T.R.R.F. La	ndfill								
City, State Lumberton, NJ		Dis			Disposal Date City, State Tullytown, PA									
Completed By (Print or Type)		Title Signature					Date							
Gwen Trumbetti			ps. Co											



State of New Jersey 1208-4538 NOTIFICATION OF ASBESTOS ABATEMENT Check # (Pursuant to N.J.A.C. 8:60 and 12:120RECEIVED

Date of Notification	(1) 10/4/12		Name of Building Owner / Operator (2) 2012 OCT 11 AM 10: 22														
Agencies Notified	Type Notific	ation		Stree	et Add	ress				<u> </u>		-					
☐ EPA	_						d Ave.	ASBES	TOS CONTR	יחו							
☐ DEP ☐ DOL	│					& Zip		& L	ICENSING	Ø.							
☑ DOH		nded #1 rgency				wn, PA ontact	19046			Telephone N							
DCA		cellation			Bayl				Į,	i elebnone iv	ump	er					
											+						
A. C.E. 111 AA					CILIT	TY INF	ORMATION										
Name of Facility WI Verizon	nere Abatem	ent is Taking F	Place (3)			Type of Facil School (
Street Address								oter 8 (Other tha	ın K-12\								
80 Highway 46 E	ast							e. private & com	2008-0.8 2008 5	as homes e	tc.)						
ccg, .c _							Square Feet			Bldg. Age	,						
City (5)		County (6)	Co	ounty	Code	(7)	-			-33-							
Fairfield		Essex				. ,	Current Use	(Prior if being de	emolished)								
							Offices										
Name of Monitoring	Firm Hired I	y Building Ow	ner (8)	AS	CM No											
TTI Environment	al						AbateTech	, Inc.	100								
Street Address				3145000-011		300000000000000000000000000000000000000	Street Addres	ss									
1253 North Chur							PO Box 25										
City, State & Zip Co							City, State & Zip Code										
Moorestown, NJ Project Manager for		Firm	Tolo	thone	e Num	hor		Lumberton, NJ 08048 Telephone Number License Number									
Harold Baldwin	Worldoning i	"""		840-8)	Telephone Number License Number 609-265-2107 00529										
Scheduled Start Da	te (10)	Schedulee Co	1000000			/	Name of OSHA Monitor										
9/17/12	, , , , , , , , , , , , , , , , , , , ,			2/12		,	EMSL Anal										
Occupancy Status [During Abate	ment (Check o	only on	e)_/	/		Street Addres										
		During Entire I			ateme	ent	108 Haddor City, State &		- 200								
	Performed O	utside of Norm	nal Ho	urs													
Describe:		A					Westmont,	NJ 08108									
Scope of Work (Che					-125-25-15		2.3										
Scope of Work (Cite	eck all that a	ppiy)						☐ Full Con	tainment with N	enative Pres	SHIP						
	f		\boxtimes	Re	novati	on		Mini-End		ogalivo i roc	Suic						
≥160 sf ≥26	0 If		Ħ		molitic		Glove Bag Procedures										
			_						mpted and Non	-Friable Pro	cedu	re					
	cation of			Loca			Description	6000000	Amount	Abateme	ent T	уре					
	os-Containin	g			Used		Asbestos-Con Material (A		(Specify								
	erial (ACM) BE ABATED			olely	by nce or		(i.e., thermal s		SF or LF)	Repa	Enc	ᄪ					
	Facility				Staff?		insulation, surface	cing, VAT		Repair	aps	Enclosure					
	(13)			(12)			or other miscell	aneous)		- =	Encapsulate	ure					
			Yes	No	N/A		77)				Φ						
Main Roof			14	Ц	\boxtimes		Roof Flash		730 LF								
Main & Lower Ro	of			Щ	X	Asbe	stos Flashing R		72 LF		Ц						
Main Roof			Щ	Ц			Roof Dra	ins	5 total		닏	Ц					
	H	+1	-					님	님								
	H	님					니님님	님	H								
Name of Pegistered	NJDEP Waste Cubic Yards Name of Register					stored Landfill		Ш	ш								
Name of Registered Waste Hauler					auler II		of Waste	Name of Regis	stered Landilli								
AbateTech, Inc					187		8 TRRF Landfill										
City, State					The second secon				City, State								
Lumberton, NJ							10/12/12 Tullytown, PA										
Completed By (Print	Tit		W	Signature													
Gwen Trumbetti				O	ops. C	oord.	d. 10/4/12										

State of New Jersey 1210-4557 NOTIFICATION OF ASBESTOS ABATEMENT Check #4537 (Pursuant to N.J.A.C. 8:60 and 12:120)

						11	CUE	IV	<u> </u>								
Date of Notification								r / Operato	or (2)								
Agencies Notified	10/4/12 Type Notific	ation	_			dress).E.		2012 (OCT 11	AM	0. 6.					
⊠ EPA	Type Notific	alion	- 3			ldo Te	rrace			11	AN I	n: 51		20			
☐ DEP		ıl .				e & Zip		6	SHF	STOS	00			- 6		-	
⊠ DOL		nded #				Hill, NJ		4	æ	LICEN	CUN	TROL					
□ DOH	⊠ Eme	rgency				Contact				LIVER	SIN(3	Teleph	one	Vuml	ber	
☐ DCA	☐ Can	cellation		Bill 7	Γhοι	mpson										•	
				FΔ	CII	ITY INI	ORM	ATION									
Name of Facility W	here Abatem	ent is Taking F	Place (3)	.OIL		DWO TUTTOUT OF THE	pe of Facil	lity (4)								
Cherry Hill H.S. \							Í										
Street Address] Subchar	oter 8	Other that	an K-1	2)					
2101 Chapel Ave										ate & con	nmerc	ial buildin	gs, ho	nes,	etc.)		
21. 75							Sq	uare Feet		# of Flo	ors	E	Bldg. A	ge			
City (5)		County (6)	Co	unty	Code	e (7)											
Cherry Hill		Camden					Current Use (Prior if being demolished)										
		<u> </u>					school Name of Abatement Contractor (9)										
Name of Monitoring		by Building Ow	mer (8)		A	SCM No	200			it Contrac	ctor (9)					
Street Address	.aı						AbateTech, Inc.										
9 East Stow Rd.							Street Address PO Box 25										
City, State & Zip Co	de	******						City, State & Zip Code									
Marlton, NJ 0805								Lumberton, NJ 08048									
Project Manager for	Monitoring F	irm		hone				lephone Number License Number									
	m Guilardi 8							9-265-210					005	29			
Scheduled Start Da 10/5/12		Scheduled Co	mpletic 10/8		ite (1	1)		me of OSH									
Occupancy Status I		ment (Check o			-			ISL Anal	F								
		During Entire F			aten	nent	2000	8 Haddor		9							
Abatement	Performed O	utside of Norm	nal Ho	urs				y, State &									
Describe:	4:30 PM Sta	rt Fri, daytime S	Sat & S	unday	B/D	Monday	We	estmont,	NJ 18	3108							
	upied During									****							
Scope of Work (Che	eck all that ap	oply)							_	F 11.0				_			
	f			Don		tion			H			ent with N	egativ	e Pre	ssure	е	
≥160 sf ≥26			M		nova noliti			Mini-Enclosure Glove Bag Procedures									
□ = 100 31 ±20	0 11		Ш	Dei	HOIIL	ion			\forall			d and Nor	Eriah	o Dr	codi	uro	
Lo	cation of		Isl	Locat	ion			Description	Part of the last o	TTOTT EXC		Amount				Туре	
Asbest	os-Containin	g	Norn	nally l	Used	d l		estos-Con		,		Specify	1	T	T	7	
Mate	erial (ACM)			olely I				Naterial (A			S	F or LF)		J	E E	m	
	BE ABATED Facility		Main	tenan				thermal s					em	Repair	Cap	l d	
"	(13)		Cusic	(12)	Stan	ſ		ion, surfaction, surfaction					Remova) air	Encapsulate	Enclosure	
	(/		Yes	No	N/A	A	0. 0		anoou	,			-		te	0	
Wrestling Room			П		П			Floor til	e		6	40 SF		T	П	\Box	
Wrestling Room			I	Ø		i		Mastic				440 SF		情	Ħ	Ħ	
							1,110										
								(i)									
_																	
Name of Registered	Waste Haule	er				Waste	Charles and the con-		Name	e of Regis	stered	Landfill					
AbateTech, Inc.					750	ID No.	of Wa	12	TDD	F Landf	:11						
City, State					730		Dieno	sal Date		State	111						
Lumberton, NJ								0/8/12		otate /town, P	Α						
Completed By (Print	or Type)	-		Titl	e ·		Signa	Anne and a second	,	/	-		Date				
Gwen Trumbetti				Office				1	N				10/4				
		Co	ord		(MIL	JV.										

Date of Notification (1)					Name of Building Owner / Operator (2) OCT Princeton University Street Address Trustees of Princeton University E.A. MacMillan Bidg. City, State & Zip Code Princeton, NJ 08544 Name of Contact Robert Ortego, P.F.												
9/27/12 Agencies Notified Type Notification						Princeton University Street Address											
	EPA Type Notification							Trustees of Princeton University F/A) MacMilla Rida									
□ DEP	☐ Initial ☐						City. State & Zip Code										
□ DOL		nded #1		Pri	nc	eton.	NJ 0	8544	CASI	VIRA							
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	gency	3	Nar	ne	of Co	ntact	0011		G "U	elepho	ne N	lumb	er			
□ DOH □ DCA		ellation		Rol	bei	rt Orl	ego,	P.E.		Ca.				-			
Name of Facility \A/b	ana Abatama	nt in Taking Di	1000 (***************************************	AC	ILII	YINF	ORMATION Type of Facili	b. (4)								
Name of Facility With Princeton Univer				3)				School (
Street Address	sity – riies	tone Library	7757		- The				ter 8 (Other tha	an K-12\							
One Washington	Road									nmercial building	s hom	es e	etc.)				
One washington	rtouu							Square Feet	# of Flo		dg. Ag		,				
City (5)		County (6)	IC	ount	v C	ode (7)	- ,			-99						
Princeton		Mercer	1		, -	,	.,	Current Use (Prior if being d	emolished)							
Filliceton		Mercer						University L	. and the real comments of the second	cinolicineay							
Name of Monitoring	Firm Hired b	y Building Own	er (8)		IASC	M No.		tement Contrac	etor (9)		-					
ATC Associates,		y building Owi	101 (0	,		1100	IVI IVO.	AbateTech,), (o)							
Street Address		***************************************			-			Street Addres									
Bromley Corpora	ite Center 3	Terri Lane,	Suite	e 12	2			PO Box 25									
City, State & Zip Co								City, State & 2	Zip Code								
Burlington, NJ 08	8016							Lumberton,	NJ 08048								
Project Manager for Monitoring Firm Tele						March	er	Telephone Number License Number									
Mike Keehn	609		_			609-265-2107 00529											
Scheduled Start Date (10) Scheduled Co. 9/7/12 Occupancy Status During Abatement (Check)						e (11)	/	Name of OSH									
							_	EMSL Analy									
Occupancy Status During Abatement (Check only one Facility Closed/Vacated During Entire Period of					ha	#amai	at	Street Addres									
		utside of Norm															
Describe:	renonnea O	utside of North		uis													
	upied During	Abatement						Westmont,	142 00 100								
Scope of Work (Che				_		-											
Coope of Work (One	zok ali tilat ap	, Pi37							Full Cor	tainment with Ne	gative	Pres	sure	•			
≥3 sf or ≥3 l	f		\boxtimes	Renovation					Mini-End		•						
≥160 sf ≥26	O If		Ħ	Demolition					Glove B	ag Procedures							
			_						Non-Exe	empted and Non-	Friable	Pro	cedu	ıre			
Lo	ocation of		ls	s Location				Description	of	Amount	Abatement Type						
	os-Containin	g						Asbestos-Cont		(Specify				Γ			
	erial (ACM) BE ABATED			Solel		y ce or		Material (AC (i.e., thermal sy		SF or LF)	70	-71	Encapsula	m			
	r Facility					taff?			sulation, surfacing, VAT				aps	Enclosure			
	(13)			(12				or other miscella			Removal	Repair	ulat	sure			
			Yes	N	0	N/A							Ö				
Work Area #1- Lev	el 1			T] [\boxtimes	S	prayed on Fire	proofing	6,220 SF							
Work Area #1- Leve	/ork Area #1- Level 1					\boxtimes		VAT & Mas		4,000 SF							
Work Area #1- Leve	el 1					\boxtimes	F	Radiator Liner	Material	714 SF							
Work Area #1- Leve	el 1] [M	oisture Barrier	Material	714 SF							
		· · · · · · · · · · · · · · · · · · ·															
Name of Registered	Waste Haul	er					Vaste	Cubic Yards	Name of Regi	stered Landfill							
				1	Hau	uler ID		of Waste	TDDE								
AbateTech, Inc.						1875	U	40	TRRF Land	iiii							
City, State Lumberton, NJ								Disposal Date 10/31/12	City, State Tullytown, F	٥٨							
Completed By (Print	or Tune\	-		Title Si			-	Signature	r dilytown, r		Date	-					
Gwen Trumbetti	or rype)					e ps. Co	oord.	Oignature	D		9/27	112					
10					•			N N	11	Wi 3	0,21						

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

1209-4556 Check #4535

Date of Notification								Owner / Operato	r (2)	2012 00	711	AM 10: 1	,			-			
Agencies Notified	10/1/12 Type Notifica	ation				ddre		sing Authority		r	,,	AM 10: 1	_			-			
EPA	Type Notifica	ation	1				Stre	of		OBES	Ina .	.0. /	8			33			
☐ DEP						_	Zip C			& Li	Cr. C(Wro-							
DOL		nded#		Sec. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10			TO SHOW THE PARTY OF	08826		-71	CHSI	NO KOL							
	☐ Emer	gency				f Cor						I.	lepho	ne N	lumb	er			
☑ DCA								oson				i i	A						
				F.A	\CI	LITY	INF	ORMATION							-	KI 			
Name of Facility Wh	nere Abateme	ent is Taking P	lace (3					Type of Facili	ity (4)										
								School (I	K-12)										
Street Address								Subchap											
635 West Ave.										ate & cor	nmercia	l buildings			etc.)				
								Square Feet		# of Flo	ors	Blo	dg. Ag	е					
City (5)		County (6)	Co	unty	Co	de (7	7)												
Ocean City		Cape May						Current Use ((Prior	if being d	lemolish	ed)							
								Apartment	Build	ing			-10						
Name of Monitoring	Firm Hired b	y Building Owi	ner (8)			ASC	M No.	Name of Aba	temer	t Contra	ctor (9)								
Health & Safety S	Services	38 835						AbateTech,	Inc.										
Street Address								Street Addres	SS										
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								City, State &											
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li li			Cust	odiai (12		ап?		sulation, surfacing, VAT or other miscellaneous)				Removal	air	Encapsulate	Enclosure				
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Name of Registered	Waste Haul	er		IN	JD	EP V	Vaste	Cubic Yards	Nam	e of Reg	istered L	andfill							
Name of Registered Waste Hauler				Н		er ID		of Waste											
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								Disposal Date 10/5/12		State ytown,	PA								
graph and an increase of the control	or Type)			T	itle			Signature		,,			Date	_					
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				100	00				MU										

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. / BRANDENBURG INDUSTRIAL SERVICES CO. Date of Notification (1) Street Address /12 Agencies Notified Type Notification 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 / 2217 SPILLMAN DRIVE **EPA** Initial Notification City, State, Zip Code Amended Notification RAHWAY, NEW JERSEY 07065 / BETHLEHEM, PA 18015 DEP DOL Cancellation DOH On Hold Name of Contact Talanhana Nimber DCA **EMERGENCY NOTIFICATION** MARY BETH BAKER FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) MERCK SHARP & DOHME CORPORATION Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 126 EAST LINCOLN AVENUE - BUILDING 47 1,500 N/A City (5) County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) RAHWAY UNION VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 17 Street Address Street Address 655 WEST SHORE TRAIL 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SPARTA, NEW JERSEY 07871 SUFFERN, NEW YORK 10901 Telephone Number Project Manager for Monitoring Firm License Number Telephone Number WILLIAM S. KERBEL, CIH 973-729-5649 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 10 / /12 10 / 17 AMERISCI LABORATORIES INC #11480 /12 Month Day Year Month Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 117 EAST 30TH STREET Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 7AM-3:30 PM City, State, Zip Code NEW YORK, NEW YORK 10016 Full Containment with Negative Pressure Scope of Work (Check all that apply) Demolition Renovation Mini-Enclo >3SF OR LF Glovebag Procedure -160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos Abatement Type normally used Asbestos-containing Containing Material (ACM) Amount REPAIR ENCAPSU ENCLOSUR REMOVAL solely by Material (ACM) (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A Surface area of Roof-Square Feet 1,500 sf Roof -T100 Tank Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill

LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES

447 ALEXANDER DRIVE/ROUTE 15

MONTGOMERY, PA 17752

City, State

FREEHOLD CARTAGE, INC.

FREEHOLD, NEW JERSEY

Completed by (Print or Type)

BENJAMIN SANCHEZ

825 HIGHWAY 33

City, State

Hauler ID No.

Title

15939

DIRECTOR OF OPERATIONS

100

Signature

Disposal Date

10/10-10/17/12

CK 520372

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

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Date of Notification (1) 10/03/2012					Name of Build BASF Corpor			ME	$: C_{\mathcal{E}}$	EIVE	ED		
A		I M. CC. C	-		6			11200	-				
Agencies Notified		Notification	Type		Street Addres			als Of.		Asa .	200		
		1			Street Address 100 Campus Drive City, State, Zip Code Florham Park, NJ 07932 Name of Contact Frank Piechoeta						7:51		
(X)EPA		(X) Initial N			City, State, Z	p Code	Α	(~			10	1.000	
(X) DOL (X) Amended Notification				ation	30.000.000.000.000.000	4-10	342	ages.	ine !	0-			
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(/					Frank Piecho					11271	200		
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				FACILITY	NFORMATION						40	t:	
Name of Facility Where Ab	atement is	Taking Place	(3)		Type of Facili	ty (4)							
BASF - Outside / Concrete	Slabs				() School (K	-12)							
					() Subchapte	er 8 (other t	han K-12)						
Street Address							commercial blo	las hom	es etc				
<u>Otreet / Idaness</u>					(71) Other (1.0)	pilitato a c	orranorolar bio	igo., non	oo, oto	•			
1 James Street					Sa Foot 0	# .	of Floors 0						
1 James Street			1-2		Sq. Feet 0	#	UI F10015_U	-					
City (5)	County (6)			Code (7)		-2020							
Belvidere Warren			(State U	se Only)	Bldg. Age 0								
			- Marie Asset Asse		Current Use (prior if bein	g demolished)	vacar	it manu	ıfacturin	g		
Name of Monitoring Firm H	lired by Bldg	Owner (8)	ASCM N	lo.			Name of Co	ontractor	(9)				
			00104				NCM Demo			diation	IP		
			00104				I WOW Deline	muon and	i i (Cilic	diation,			
Environmental Health Inves	stigations, Ir	IC.											
Street Address					Street Addres	S							
					404 N. Berry								
655 West Shore Trail					404 IV. Delly	olicet							
City, State, Zip Code					City State, Zir								
					Brea, CA 928	321							
Sparta, NJ 07871													
Project Manager for Monito	oring Firm	Telephone	Number		Telephone Number License Number								
William S. Kerbel, CIH		973-79-564			484-480-8931			01066					
Trimani di Italiani, di I		0,0,000	Ü		101 100 0001			0.000					
Cabadalad Stad Data (40)		0.1.1.1.	0 11	D / (14)	1000			L					
Scheduled Start Date (10)		Scheduled		1 Date (11)	Name of OSHA Monitor								
10/08/2012		12/07/2012			Testor Tech								
		Long year or the transport			K								
Occupancy Status During A	Abatement (Check only on	ne)		Street Addres	s							
(X) Facility Closed/Vacated	d During Ent	ire Period of	Abatement		10 59 Jackson	Ave.							
() Abatement Performed					NAME OF TAXABLE PARTY.								
()		ominar i dominy	110010		City Ctoto 7	Cada	- 110 N	au Vanle	11101				
Describe Vacant Bldg. To E	2a Domalich	od			City, State, Zi	Code	L.I.C. N	ew York,	11101				
Describe vacant blug. To E	be Demonstr	eu											
0 5													
Other – Describe	and the second												
Source of Work (Check all	that apply)												
(X) Demolition () Renor	vation												
(X) Large Proj. (>160 SF or	>260 LF AC	CM) ()Small I	Proi (>25<	160 SF or >10	<260 F ACM)	() Minor	Proj. (<25 SF	or <10 I F	ACM)				
() Full Containment with N	Venative Pre	esure ()	Mini-Enclo	sure () GI	ovebag Procedu	e (X) Out	door Work	o 10 L.	,,				
Location of Asbestos-		ation Normally		Description of				IEV T	Abot-	mont T			
						Amount	(Specify SF or	LF)	Anate	ment Ty	pe		
Containing Material (ACM)		by Maint./Cus	stodiai		ms insulation,								
Facility (13)	Staff?			surfacing, VA	I, or other			-					
52 50 20 2012-0-1100	YES	NO	NA	miscell.)					Rem.	Rep.	Encap	Enclose	
Concrete Slabs at grade	X			Asphalt Tar	& Paper	5,400 sf			Х		I		
Exterior of Bldg. 4	X			Insulation in F		1600 sf			X	_	1	+	
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Exterior of Tin Bldg #5	Х			Exterior pipe i	IISUIATION	300 lf			X	-	-	-	
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					1277	<u> </u>						A transport	
Name of Reg. Waste Haule	<u>er</u>	NJDEP Was		ID#	Cubic Yards o	t Waste				Landfill			
Gary W. Gray GTrucking		NJ DEP #0	9369		250			IESI PA	Bethle	ehem La	ındfill		
City, State							Disp. Date			City, Sta			
							12/07/12			Bethlehe			
56 Route 46 Delaware, NJ	07833						1201112			Jennene	an, cA		
	BUILDAY OF THE STATE OF THE STA	T:41-			1.0:		1						
Completed by (Print or Type	<u>=)</u>	<u>Title</u>			Signature			Date					
Joseph K. White	4	Pi	roject Coor	dinator	1	"	10	10/09/2	012				
(表						Thomas 11 11 100							

RECEIVED

Notification of Demolition o	r Renovation(continu	ed)	2017	UCT II AMIO
X. Description of Planned Demoliti See attached Work Plans. Addition	on or Renovation Work and nally any areas where friable	d Methods to be e piping materia	Used: Is arelences &	intered will be regulated.
				and the
XI. Description of Engineering Con	trols and Work Practices to	be Used to Cor	ntrol Emmisi	ons of Asbestos at the
Demolition or Renovation Site:			1	
See attached Work Plans. Addition and cut.	ally, all friable piping will b	e removed using	g wet method	ds, glovebagging and or wrap
XII. Waste Transporter#1 Gary W.	Grav Trucking			
Address: 56 Route 46	oray readining			
City: Delaware	County: Warren		State: NJ	Zip: 07833
Contact: Jason R. Wilson			Telephone: 90	
Waste Transporter#2 N/A				
Address				
City	County		State	Zip
Contact			Telephone	
XIII. Waste Disposal Site IESI PA	Bethlehem Landfill Corp		EPA Certificat	ion Number: PADEP 100020
Address: 2335 Applebutter Road				
City: Bethlehem	County: Northampton		State: PA	Zip: 18015
Contact; Alan Schleyer			Telephone: 61	0-317-3200
XIV. If the Demolition was Ordered	by a Government Agency.	Please Identify t	-	
Name	u, u coronimont, igono,	Title	no rigency D	
Authority	1			
Date of Order (MM/DD/YY)		Date Ordered to	Begin (MM/DD/)	M)
XV. For Emergency Renovations:				
DATE and HOUR of Emergency: (MM/DD/YY) 9	-16-2012	(HH:MM) Prior t	o noon	
Description of SUDDEN, UNEXPECTED EVENT	: Please see attached BASF letter	dated 09/18/2012 .	7) THE RESERVE OF THE PERSON O	
				Δ.
Explanation of how the Event caused unsafe or on 9-24-12 NCM is unable to commence work of the BASF site. Proposed Work Plan for Debris	on 9-24-12 due to resources needed to	o respond to needs a	ssociated with th	ne demolition of the Powerhouse located on
XVI. Description of Procedures to E Friable Asbestos Material Becomes Restrict work area and regulate, we methods.	Crumbled, Pulverized or R	educed to Powe	ler	
XVII. I Certify that an Individual, Tra During the Demolition or Renovatio				
Person will be Available for Inspect	tion During Normal Busines	s Hours (Required	one (1) year after	
	(Signature of	of Owner/Operator)	V (Di	ate) 10/09/12
XVIII. I Certify that the Above Inform	Commence of the contract of th	, , , ,	,,,,,	
•	CONTROL SINGER AND ALCOHOLS	de U. Wh	P	
	(Signature o	of Owner/Operator)	(Da	ate) 10/09/12

State of New Jersey NT

State	of field delacy
NOTIFICATION OF	ASBESTOS ABATEME
(Pursuant to NJAC	8:60-7 and 12:-120-7)

				uilding Owner/ University	Operator		7E ()						
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			FACILII	TY INFORMA	HON								
		(3)				School (K1 x Subchapter 8	(Other t						
)					
		201		G TENNEN		Square Feet # of	Floors	Bldg. A	ge				
Cour	ity (6)		County Code	(7)	20000							
				(STATE USE ONLY	Y)		being dem	olished)				
							(0)						
Building (Owner	(8)		ASCM No.	F 100 C 200 H 100 C 200 C								
Street Address 515 Grove Street Suite 1B						Street Address 98 LaCrue Avenue							
City, State, Zip Code Haddon Heights NJ													
Project Manager of Monitoring Firm						hone Number		Licenc	e Numb	er			
Alan Lloyd													
Scheduled Start Date (10) Sched. Con 10/18/12 Sched. Con													
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				Disposal Dat	e	City, State							
				As needed		Morrisville PA			V				
	Initia Not Ame Not Canc Is Taking t -Room 10 Building 0 m nt (Check or ring Entire ide of Nor AM - 7:00 Cu Sta	County (6 Ruilding Owner County (6 Building Owner County (6 Building Owner County (6 Building Owner County (6 Building Owner Building Owner Sche Custodia Solely by Maintenance/ Custodia Staff (12 Yes No x	Initial Notification Amended Notification Cancellation is Taking Place (3) it -Room 107 County (6) Building Owner (8) The County (6) Sched. Conty one) In (Check only one) In (Check	Notification	Initial Notification Amended Notification Cancellation Cancellation Cancellation Cancellation Cancellation Robert Otego FACILITY INFORMA' STAKING Place (3) trace of County Code (STATE USE ONL) Coun	Notification	Princeton University	Princeton University Princeton University Princeton University Princeton University Princeton University Princeton University Princeton University Princeton University Princeton University Princeton University Princeton University Princeton University Princeton NJ 08543 Princeton University Pr	Notification	Notification Initial Notification Cancellation Cancellat			