NOTIFICATION OF ASBESTOS ABATEMENT

				(Pursuant	to NJAC 8	:60 and	5:16)	EK	EG	Ti=3	D b	-	
Date of Notification (1)	Taxon I			144			20		S C	E	11 W	/ F	TEST
	27 /	17	200	TRUS	f Building Owr TEES OF P	BINCEL	TOT (2)					I real	ना मा
Agencies Notified	Type Notific	ation		Street Ad		TUTOL	ON UNI	VERSIT	YSED	2 -			HHH
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⊠ DOLWD	Amended Amended				LM DRIVE							A STATE OF THE STA	beared
	Amendm	ent #1-	3/27/17		e, Zip Code			AS	BESTO:	SCON	VITOO		
(NJAC 5:23-8)	Ernergen justificatio	cy (incli	uding	Name of (ETON, NJO	8544	h	-	LICE	ENSIN	IG VI KO	L &	c-jezaji bil
] Cancellati	on			Contact RT ORTEGO					phone	where a comment	er	
										9-258			
Name of Facility Where Abat	ement is Ta	king Pl	200 (3)		TY INFORM	HOITA		47.					
PRINCETON UNIVERS	ITY - FIRE	STON	E 151	36536		L. States	Type	of Facility	(4)				
Street Address		0.010	LLIDI	CARY			☐ Sci	hool (K 4	21				
1 WASHINGTON ROAD							Sut	bchapter i	3 (Other	than K	(-12)		
City (5)								ner (i.e., p		d com	mercia	l build	ings,
PRINCETON, NJ							Square	Feet	# of F	loore	-	DIA	
County (6)							1,000	0,000	8	10015	1	Bldg.	Age
MERCER				County Coo	se (7)(STATE US	SE ONLY)	Current	Use (Pric	or if hein	dome	oliobad	70	
Name of Monitoring Firm Hired	by Building	Owner	(0)				O IVI V	EKSITY	LIBRA	D V	nisneo.)	
ATC GROUP SERVICES	LIC	Owner	(8)	ASCM No.	Name of	Abateme	nt Contra	ctor (9)		17.1			
Street Address				89000	BRIST	OL ENV	TRONM	ENTAL,	INC				
3 TERRI LANE					Street Ad	dress			mo.				
City, State, Zip Code					1123 B	EAVER	STREE	T					
BURLINGTON, NJ 08016					City, State	, Zip Cod	e						
Project Manager for Monitoring Fi	000				BRISTO	DL, PA 1	9007						
MICHAEL R. KEEHN	1111	8		none No.	Telephone	No.			License I				
Start Date (10)	16-1-		609.	-386-8800	215-788	-6040		1,	00509				
3 / 13 / 17	Schear	led Co	mpletion	n Date (11)	Name of OS	SHA Moni	itor		00508				
		_ ′ -	1	/ _17	BRISTO	LENVIR	ONMER	NTAL IN	0				
Occupancy Status During Abateme	nt (Check of	only on	e)		Street Addre	ess							
☐ Facility Closed/Vacated During I Abatement Performed Outside of Time of Abatement (**Outside of Time of Time of Abatement (**Outside of Time of Ti	Intire Perio	d of At	atemen	î	1123 BEA		REET						
Time of Abatement: 4:00AM-12	i Normai Fa :30PM/	BCILITY F	lours - [Describe	City, State, Z		the L						
				AIN	BRISTOL		107						
Scope of Work (Check all that apply)													
] ≥3 sf or ≥3 lf	×	Renov	ation		Ø Full (Containme	ent with N	Vegative F	Pressure				
≥160 sf or ≥260 ff		Demol	ition			Enclosure bag Proc		54.100	ressure				- 1
					☐ Non-E	Exempted	eoure (*) and i	Von-Friabl	_				- 1
Location of	1	Is Loc					() = 114	T TISDI	e Proced				
Asbestos-Containing Material (ACI	6) U	Norm sed So	ally lely by		Description	n of				A	Abatem	ent Ty	/pe
TO BE ABATED	N	ainten	ance/	Asbesto	s Containing f	Viaterial (A	ACM)	An	nount	Re	, B	m	m
IN Facility (13)	Cu		Staff?	(i.e., ii	nermal system surfacing, VA	is insulati	on,	(Sp	pecify	Removal	Repair	Car	Clo
(15)	Yes	(12) No	1	-	ther miscellan	neous)		SF	or LF)	<u>a</u>	-	Encapsulate	Enclosure
ASE 6 - LEVEL 1		INO	N/A					100			11	ate	
			\boxtimes	ACOUSTIC	AL CEILING	PLAST	TER	6075	eer	5.3	1=1	_	\dashv
ISE 6 - LEVEL 1			M	PIPE INSUL			+			Ø]
ISE 6 - LEVEL 1			X	SPLINE CEI	LING TILES		-	200		Ø]
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e of Registered Waste Hauler		NJ	DEP W	aste Cubi	c Yards of	161							7
RVICE TRANSPORT GROUP, I	NC.	Hai	uler ID I	Vo. Wast		reame (or Registe	red Landf	ill				1
itate		2	0990			-		ANDFILL					1
V CASTLE, DE				Dispo	sal Date	City, Sta							-
eted By (Bill	tle					WAY	NESBUR	RG, OH					
6E1 60 C PURE	iie Estimat	00		8	Signature	0	4	1.	Date,				Ř
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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	SEP 2 7 2017	

Data of Natification (4)	N_L								Hf	711	1			111 1
Date of Notification (1)	7 /	17	_		All comments	au		vner/Operator (PRINCETON	2) UNIVERSITY	SEP 2	7 :	2017		U
Agencies Notified Ty	ype Notific	ation			Stree	t Address				1			- 9	
10 mm - 10 mm	Initial				200	ELM DR	IVE		1	ASBESTOS	CON	TRO	1 0	
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⊠ DOH	Amendm	and the second second second	127.500.000	7		INCETON					Windship .	-	Salva de la compansión de	THE REAL PROPERTY.
] Emergen		iding							T				
(NJAC 5:23-8)	justificati Cancella					of Contact				Telephone Numi				
L] Cancella	tion			RO	BERT OR	RTE	GO	1	609-258-184	1			
					FA	CILITY IN	FOI	RMATION					302000	
Name of Facility Where Aba		-							Type of Facility	(4)				
PRINCETON UNIVERS	SITY - FIF	RESTO	NE LI	BR	ARY				School (K-12					
Street Address		-							Subchapter 8	Other than K-12)			
1 WASHINGTON ROA	D								homes, etc.)	rivate and commer	ciai bi	ıllalni	gs,	
City (5)									Square Feet	# of Floors	В	dg. A	ae	-
PRINCETON, NJ									1,000,000	8		70	3-	
County (6)					Cour	nty Code (7)	VSTA	ATE USE ONLY)		or if being demolis		-		
MERCER						, oodo (//	,,,,,,,,		UNIVERSITY		neu)			
Name of Monitoring Firm Hir	ed by Build	dina Ow	ner (8)	- 1	ASCM	No	Na	me of Abatama	ent Contractor (9)	LIDITATE				2000.773
ATC GROUP SERVICE		ung Ow	161 (0)							INO				
Street Address	13 LLC				000	098			VIRONMENTAI	L, INC.		04/17	-0-/11591	e alla e
							3500000	eet Address						
3 TERRI LANE							1	123 BEAVER	R STREET					
City, State, Zip Code				WHEEL			City	y, State, Zip Co	ode					
BURLINGTON, NJ 080	16						E	BRISTOL, PA	19007					
Project Manager for Monitori	ng Firm			Tele	phone	No.	Tel	ephone No.		License No.				
MICHAEL R. KEEHN				60	9-386	-8800	2	15-788-6040		00509				
Start Date (10)	- 1	Schedule	ed Con	nple	tion Da	te (11)	Nar	me of OSHA M	onitor			350 - THE		
3 / 13 /	Accessed to the second	01			06.0				VIRONMENTAL	INC				
Occupancy Status During Ab		Check o	nly on	2)				eet Address		-,				
☐ Facility Closed/Vacated D					mont				OTDEET					
Abatement Performed Out						cribe		123 BEAVR						
Time of Abatement: 4:00	AM- <u>12:30</u>	PM/	PN	1	AN	A		y, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that	at apply)							M Full Cont	ainment with Nam	other Deserve				-
☐ ≥3 sf or ≥3 lf		\boxtimes	Reno	vati	on			☐ Mini-Encl	ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			Dem			Ţ.			Procedure					
								☐ Non-Exer	mpted (*) and Nor	n-Friable Procedur	е			
			Is L								Ab	atem	ent T	ype
Location of			Used	rmal Sole				Description of		11 = 1010 to 11 100 to 11 100 to	Z	Z	m	ш
Asbestos-Containing Mat TO BE ABATEI		1)	Maint					Containing Matermal systems in		Amount (Specify	ema	Repair	าса	1Clc
IN Facility	2		Custo		Staff?	(1.6.		surfacing, VAT,		SF or LF)	Removal	=	psu	Enclosure
(13)				12) No	N1/0	-		her miscellaned		,	_		Encapsulate	e)
PHASE 5A - LEVELS C 8	ßВ		7 6	7	N/A	PIPE INS	SUL	ATION		1010 LF		П	П	
PHASE 5A - LEVELS C 8								E & MASTIC		43,057 SF			H	
PHASE 5A - LEVELS C 8			-+-					ngs on fiber	glass	285 EA				
PHASE 5A - LEVELS C 8	-+-	<u>-</u> 7				s on fibergla		40 EA						
	Name of Registered Waste Hauler							oic Yards of	Name of Regist					L_
SERVICE TRANSPORT		1250	JDEP V auler ID	O No.	Was		MINERVA L							
City, State	1_	20990		Dier	posal Date	City, State								
NEW CASTLE, DE							DIS	JUSAI DALE	WAYNESB	URG, OH				
Completed By (Print or Type)					Signature		/ Da	te						
BRIAN SCAFIRO		Title EST	IMAT	OR				B	- Scale	1 / 18 /	/22	1,	7	
								pres	- scafe	20/10/9	122	11	1	

ASB-41 JAN 13 BS17024

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Note of Ne	atification (4)				٠,٠				. 11	D) EC	S H) W	E	Ir
ate of No	otification (1)		17	7				g Owner/Operator OF PRINCETON		M SFP	n			
gencies I	Notified	Type Notifi	cation			Stree	et Address		- 14	LUI OEP	27	2017		H^{L}
☑ EPA	_					20	0 ELM DR	RIVE	1					1
☑ DOLWI ☑ DOH	D	Amenda Amenda	700775	5_9/2	0/17	City,	State, Zip 0	Code		ASBESTOS	CON	TRO	1 0	-
DCA		☐ Emerge				PR	RINCETON	l, NJ 08544	1	LICE	NSIN	G	r or	
	5:23-8)	justifica			9	Name	e of Contac	t		Telephone Num	ber			and the same
-		☐ Cancell	ation			RC	BERT OF	RTEGO		609-258-184	11			
						FA	CILITY IN	FORMATION						-
		e Abatement is							Type of Facility	(4)		Oct I III	-	-
		VERSITY - FI	REST	ONE	LIBR	RARY			School (K-12	2)				
treet Add	11: 3 5 5 6 11: 11: 15: 15: 15: 15: 15: 15: 15: 15:								Other (i.e. p	Other than K-12 rivate and comme	!)	ulding	25	
	HINGTON	ROAD							homes, etc.)		roidi bi	anamış	30,	
ity (5)									Square Feet	# of Floors	В	dg. A	ge	
	ETON, NJ								1,000,000	8		70		
ounty (6)						Cou	nty Code (7)(STATE USE ONLY)		or if being demoli	shed)			
MERCE									UNIVERSITY					
		m Hired by Bui	ilding (Owner	(8)	ASCM			ent Contractor (9)					
treet Add		VICES LLC				00	098		VIRONMENTA	L, INC.				
3 TERR	20 000000000000000000000000000000000000							Street Address	D 070557					
	, Zip Code							1123 BEAVE						
	NGTON, N.	1.08016						City, State, Zip C BRISTOL, PA						
		onitoring Firm			Tel	ephone	No	Telephone No.	19007	License No.				
	EL R. KEE				1	09-386		215-788-6040	1	00509				
art Date (Scheo	duled C			ate (11)	Name of OSHA N		00303				-
3	/ 13	e-0 0.00000e		N		106			VIRONMENTAL	INC				
ccupancy	Status Duri	ng Abatement						Street Address		-,				
		ated During Ent				ement		1123 BEAVR	STREET					
Abateme	ent Perform	ed Outside of N	Normal	Facilit	y Hou	rs - Des	scribe	City, State, Zip Co			1100000			STARR
Time of	Abatement:	4:00AM-12:3	0PM/		PM	A	M	BRISTOL, PA						
cope of W	Vork (Check	all that apply)												
≥3 sf or ≥160 sf	≥3 If or ≥260 If			⊠ Re	novat moliti			☐ Mini-End	tainment with Neg closure g Procedure mpted (*) and Nor		re			
				Is	Loca	tion	T				_	atem	ent T	vne
92002 20	Locatio				Norma			Description of						1
Asbesto	os-Containin TO BE AE	g Material (ACI	M)		inten	ely by ance/		stos Containing Ma , thermal systems		Amount	em	Repair	nca	nclo
	IN Fac			Cus		Staff?	(i.e.	surfacing, VAT		(Specify SF or LF)	Removal	₹	Encapsulate	Enclosure
	(13))		Voc	(12)	1	+	other miscellane	ous)				late	O.
HASE 6	- LEVEL 1			Yes	No.	N/A	ACOUS	TICAL CEILING	PLASTER	6075 SF		П		
HASE 6	- LEVEL 1	×						SULATION	- ZAOTEK	200 LF				
HASE 6	- LEVEL 1	790000000000000000000000000000000000000					SPLINE	CEILING TILES		4050 SF				
RUSTEE	S READIN	IG RM MEZZ				\boxtimes	ACOUS	TICAL PLASTE	RCEILING	450 SF				
	egistered Wa	aste Hauler PORT GROU	P INC		100	NJDEP N Hauler II		Cubic Yards of Waste	Name of Regist					
y, State			,,	-		20990	0	Disposal Date		- MADE ILL				10.50011
	ASTLE, DE							Dispusal Date	City, State	IRG OH				
			Title					Cianat	LINESDI		40		,	
	SCAFIRO	. 100/		: STIMA	ATOF	?		Prim	Scali.			2/	1,	7
mpleted I	By (Print or	Type)		STIMA			for asbesto	Signature Driven	Scafino de	/ Da	ate /2	0.4	2/	2//



Date of Notification (1)					LNI	. (5						E 119	W	15	F	16
2 /	27 /	17	,					wner/Operator								
					11	CUSTEES	OF	PRINCETON	UNIVERS	SITY					\mathbf{III}	
Agencies Notified	Type Notific	cation			Stree	et Address					SEP	27 2	2017	7	116	#
⊠ EPA ⊠ DOLWD	☐ Initial	J.			20	0 ELM DI	RIVE	≣							Penasi	
☑ DOLWD			5-9/2	2/17	City,	State, Zip	Code	е			AODEOTO				1	1
⊠ DCA	☐ Emerger				PF	RINCETO	N, N	J 08544	Part of the same o		ASBESTOS	S CON NSINO		DL &		
(NJAC 5:23-8)	justificat	ion)	ioidaiii	9	Nam	e of Contac	ct				Telephone N			-	(Newholes, up	
	☐ Cancella	ation			RC	BERT O	RTE	GO			609-258-					
					FΔ	CILITYIN	VFO	RMATION		-						-
Name of Facility Where A	batement is	Taking	Place	e (3)		OILIII II	*1 0	TON	Type of Fa	acility /	4)		-			-
PRINCETON UNIVE					RARY				☐ School		2.35.0					
Street Address											Other than k	<-12)				
1 WASHINGTON RO	AD								Other (i.e., pr	ivate and com		l bui	ilding	s,	
City (5)							-		homes Square Fe	The complete of the	14 -4 -1		DI	I - A		
PRINCETON, NJ											# of Floors			lg. Ag	ge	
County (6)		-			Cou	ntu Cada /	71/07	ATE LICE ONLY	1,000,0		8			0		
MERCER					Cou	nty Code (/	1)(31.	ATE USE ONLY)			or if being den	nolished	d)			
Name of Monitoring Firm I	Hirad by Buil	dina (Junos	/0\	LACCM	NI-	1.1				LIBRARY					
ATC GROUP SERVI		ung C	JWHEI	(0)	ASCM			ame of Abateme		302 (8)						
Street Address	OLO LLO				00	098	-	BRISTOL EN	VIRONME	NIAL	., INC.					
3 TERRI LANE							8.000	reet Address		_						
City, State, Zip Code							_	1123 BEAVE		7.0					211010000	
	2040						4	ty, State, Zip Co								
BURLINGTON, NJ 08							-	BRISTOL, PA	19007							
Project Manager for Monit					ephone		200	lephone No.			License No).				
MICHAEL R. KEEHN					09-386		1	215-788-6040			00509					
Start Date (10)					etion Da			me of OSHA N								
3 / 13 /			N		104	2	E	BRISTOL EN	VIRONME	NTAL	, INC					
Occupancy Status During							Str	eet Address								*****
☐ Facility Closed/Vacated	During Enti	re Per	riod of	Abate	ement		1	1123 BEAVR	STREET							
Abatement Performed of Time of Abatement: 4:0	Outside of No	ormal	Facilit	у Ног	ırs - Des	scribe	Cit	y, State, Zip Co	ode							
		THIVI'		PIVI	AI	VI	E	BRISTOL, PA	19007							
Scope of Work (Check all t	that apply)						-	V-14			-					
≥3 sf or ≥3 lf			⊠ Re	nova	tion					h Nega	ative Pressure	1				
≥160 sf or ≥260 lf			De					☐ IVIIII-Enc	osure Procedure							
			1000					☐ Non-Exe	mpted (*) ar	nd Non	-Friable Proce	edure				
				Loca									Aba	teme	nt Ty	/ре
Location o Asbestos-Containing M				Norm	ally lely by			Description o					70	R	ш	т
TO BE ABAT		"			ance/			Containing Ma			Amount (Specify		Removal	Repair	nca	nclo
IN Facility	,		Cus		Staff?	1		surfacing, VAT,			SF or LF)		Val	=	Encapsulate	Enclosure
(13)				(12		-	ot	her miscellane	ous)						late	O
			Yes	No												
TRUSTEES READING	RM MEZZ.					PIPE IN	SUL	_ATION			85 LF					
WALL OUTSIDE COTS	EN LIBRA	RY			\boxtimes	WATER	PRO	OOFING			250 SF	0	3			
PRESERVATION ROO		\boxtimes	WATER	PRO	OOFING			150 SF	0	3						
						1							7	П	П	П
Name of Registered Waste	Hauler				NJDEP I		Cut	bic Yards of	Name of I	Renistr	ered Landfill					
SERVICE TRANSPOR	RT GROUP	, INC		1	Hauler II	geranalistica.	Wa				ANDFILL					
City, State					20990)	Die	posal Date	City, State							
NEW CASTLE, DE							013	posai Dale			IRG, OH					
Completed By (Print or Typ	10)	Title						Cincot	WAIN	_000	nto, on					
BRIAN SCAFIRO	(-)	1,511,511,41		\TO				Signature	1	0-	1.	Date	/		1 -	2
STATE OF THE		_ ==	STIMA	AT OF	`			Dream	der	teri	1-1	7	12	21	11	

ASB-41 JAN 13

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Pg.#1

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

Data at Nation 13 (4)						IJAC 6:60 and 5		CR 7	4	30	2	41
Date of Notification (1)	27 /	17				ding Owner/Operate S OF PRINCETO	12 1	DEC.	E	IW	7 [6	7 7 7
⊠ EPA	Type Notifi ☑ Initial ☑ Amende				reet Addres	2020	Control of the Contro	SEP	2 7	2017		
⊠ DOH		ea nent # 3-7	/20/1	/	ty, State, Zi		1		4/	2017		11
	☐ Emerge	ncy (inclu				ON, NJ 08544		1	To the Park of the Control			PARTERIA
(NJAC 5:23-8)	justificat Cancella				me of Cont		- Company	Telephone N	umber	VTRC)L &	
	Cancella	ation			ROBERT			609-258-1	841	G		Michigan
N (5 W)					FACILITY	INFORMATION						
Name of Facility Where Abo					-		Type of Facil	70.34.5				
PRINCETON UNIVER	311 4 - 111	RESION	IE LIE	RARY			School (K	-12)	40)			
Street Address							Other (i.e.	er 8 (Other than K- , private and comn	12) nercial	build	inos	
1 WASHINGTON ROA	źυ	Constitution of the Consti			-		homes, et	c.)	101010	Duna	95	•
City (5)							Square Feet	# of Floors		Bldg.	Age	
PRINCETON, NJ							1,000,000			70		
County (6) MERCER				Co	ounty Code	(7)(STATE USE ONLY)		Prior if being demo	olished	1)		
Name of Monitoring Firm His	rod by Buile	dina O	(0)	1000				TY LIBRARY				
ATC GROUP SERVICE		aing Own	er (8)	1	M No.	Name of Abaten		5 1 1 E			302-5-	
Street Address	LO LLO				0098		VVIRONMENT	AL, INC.				
3 TERRI LANE						Street Address						
City, State, Zip Code						1123 BEAVE			-			
BURLINGTON, NJ 080	16					City, State, Zip C						
Project Manager for Monitori			TTO	lephon	o No	BRISTOL, PA	A 19007					
MICHAEL R. KEEHN	ng i iiii			1941 (18-5); -0.00	6-8800	Telephone No.		License No.				
Start Date (10)	S	cheduled				215-788-6040		00509				
3 /13 _ / _ 1	van ter				17	Name of OSHA N		1 1110				
Occupancy Status During Ab							VIRONMENTA	AL, INC				
☐ Facility Closed/Vacated D				ement		Street Address	070557					
Abatement Performed Out ■ Abatement Performed Out	tside of Nor	rmal Facil	itv Ho	ırs - De	scribe	1123 BEAVR)					
Time of Abatement: 4:00	AM- <u>12:30</u> F	PM/	PM	A	M	City, State, Zip Co						
Scope of Work (Check all that	f apply)					BRISTOL, PA	19007					
≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf			enova emolit				Procedure	gative Pressure on-Friable Procedu				
		1	s Loca	tion		_		in i habie i rocedu		atom	ont -	Tune
Location of	-i-1 / A C : *!		Norma ed Sol			Description of			-	patem	_	Ť
Asbestos-Containing Mater TO BE ABATED		Ma	aintena	nce/	Asbes	stos Containing Mat ., thermal systems i	erial (ACM)	Amount	Removal	Repair	Encapsulate	Eliciosure
IN Facility		Cus	todial (12)	Staff?	(surfacing, VAT,	or	(Specify SF or LF)	oval	=	nsd	l su
(13)		Yes	No	N/A	1	other miscellaned	ous)	00.45 Northwest 180			late	α
HASE 5A - LEVELS C &	В	Tes		N/A	PIPE INS	SULATION		1010 LF				-
HASE 5A - LEVELS C &	В					TILE & MASTIC		43,057 SF				1
HASE 5A - LEVELS C & I	В					fittings on fiberg	lass	285 EA				-
HASE 5A - LEVELS C & I	В					pads on fibergla		40 EA				
ame of Registered Waste Hau	uler		N	JDEP V		Cubic Yards of	Name of Regist				Ш	
SERVICE TRANSPORT	GROUP, I	NC.	H	auler ID 20990	No.	Waste	MINERVA L					
ty, State						Disposal Date	City, State					S 12
NEW CASTLE, DE							WAYNESBU	JRG, OH				
mpleted By (Print or Type)	4 88	itle	W-0-			Signature	Lad 1	Date	/20	1		
BRIAN SCAFIRO	1	ESTIMA	TOR			Kee J	Scales 1	1 7	120	110	7	

* Do not use this form for ashestos licensure exempted activities

ASB-41

JAN 13

B517024

Pg.#2

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

Date of Notification (1)			1.00				3 E	(1)	- 7	+	3
2 / 27 /	17		N		ding Owner/Operato						
						N UNIVERSIT	Yn E G	E	П	1/7	-
Agencies Notified Type Noti	fication		1	treet Addres			111111111111111111111111111111111111111		11	W	1
⊠ EPA ⊠ Initial ⊠ Amend	ded			200 ELM I	DRIVE						
	ment #3-7	7/20/1	7 Ci	ity, State, Zi	p Code		III III SEF	2	7 2	017	_
☑ DCA ☐ Emerg	ency (inclu		-	PRINCETO	ON, NJ 08544		144 125	~	1 6	017	
(NJAC 5:23-8) justification	ation)		Na	ame of Cont	act		Telephone N	umbe	r		=
☐ Cancel	llation			ROBERT	ORTEGO	9	609-2581	0820	ONT	BOI	-
			-	FACILITY	INFORMATION			CENS	HNG		* 1
Name of Facility Where Abatement is						Type of Facili	tv (4)			-	_
PRINCETON UNIVERSITY - F	RESTOR	IE LIE	RARY	1		School (K-					
Street Address						── Subchapte	er 8 (Other than K-	-12)			
1 WASHINGTON ROAD						homes, etc	private and comr	nercia	l buile	dings	
City (5)						Square Feet	# of Floors		Dida	۸۰۰	_
PRINCETON, NJ						1,000,000	# 01 F1001S		Bldg		44
County (6)	NO CONTRACTOR		Co	ounty Code	(7)(STATE USE ONLY)		Prior if being demo	alie k	70		
MERCER					= 552 51121)	The state of the s	TY LIBRARY	JIISNEC	١)		
Name of Monitoring Firm Hired by Bui	lding Own	er (8)	ASC	M No.	Name of Abatem						_
ATC GROUP SERVICES LLC	100 A	1.0		0098		VIRONMENT					
Street Address					Street Address	() Mainierovii e	AL, INC.				_
3 TERRI LANE					1123 BEAVE	DOTRECT					
City, State, Zip Code			-1100-11								
BURLINGTON, NJ 08016					City, State, Zip C					-01.1	
Project Manager for Monitoring Firm		To	lephon	o No	BRISTOL, PA	19007					
MICHAEL R. KEEHN				e No. 16-8800	Telephone No.		License No.				
	Scheduled	1			215-788-6040		00509				
3 / _13_ / 17				ate (11) 17	Name of OSHA N						
						VIRONMENTA	L, INC				
Occupancy Status During Abatement (Street Address						
☐ Facility Closed/Vacated During Entil Abatement Performed Outside of No.	rmal Facil	T Abate	ement	a a sila s	1123 BEAVR						
Time of Abatement: 4:00AM-12:30	PM/	PM-	iis - De	Scribe M	City, State, Zip Co						-
		-		11.0	BRISTOL, PA	19007					
cope of Work (Check all that apply)					Mr. "0	***************************************					-
≥3 sf or ≥3 lf		enovat				sinment with Neg	gative Pressure				
1≥160 sf or ≥260 lf		emoliti	on			Procedure	1065				
					☐ Non-Exen	npted (*) and Nor	n-Friable Procedu	re			
Location of	T .	s Loca Norma	18,		<u>u</u>			At	batem	ent	r
Asbestos-Containing Material (ACM)	Us	ed Sole	ely by	Ashes	Description of tos Containing Mate		A	R	R	m	1
TO BE ABATED	Ma	aintena		(i.e.,	thermal systems in	isulation.	Amount (Specify	Removal	Repair	nca	
IN Facility (13)	Cus	todial (12)	Statt?		surfacing, VAT, o	or	SF or LF)	val	=	Encapsulate	
(10)	Yes	No	N/A	1	other miscellaneo	us)				ate	
IASE 6 - LEVEL 1				ACCUS.	TOAL OF UNICE			-			1
IASE 6 - LEVEL 1					TICAL CEILING P	LASTER	6075 SF				1
				PIPE INS	ULATION		200 LF	\boxtimes			1
ASE 6 - LEVEL 1			\boxtimes	SPLINE (CEILING TILES		4050 SF	\boxtimes			
USTEES READING RM MEZZ.			\boxtimes		ICAL PLASTER	CEILING	450 SF				
me of Registered Waste Hauler		1,000,000	JDEP V	100	Cubic Yards of	Name of Registe	ered Landfill	1			-
ERVICE TRANSPORT GROUP,	INC.	0.5000	uler ID 20990	전화 가급하면 변화	Vaste	MINERVA LA	ANDFILL				
, State					Disposal Date	City, State					-
EW CASTLE, DE					•	WAYNESBU	RG OH				
npleted By (Print or Type)	itle				Signatura						
RIAN SCAFIRO	ESTIMA	TOP			Signature	(n. 1	Date		/	-	-
1	LOTINIA	ION			Brian.	Deolers /	10 7	/20	1/	/	

* Do not use this form for schools licensum exempted addition

JAN 13 Deins all

Pg #3

Date of Notification (1)	27 / _	17	_			ding Owner/Operate S OF PRINCETO		MDE	CE	7	W
Agencies Notified ☑ EPA ☑ DOLWD	Type Notifica			1	treet Addres				*******	Parker of the second	(.)
⊠ DOH	Amended Amendme		7/20/4	, C	ity, State, Zi	p Code			EP 2	1	2017
☑ DCA	☐ Emergend	y (inclu		-	PRINCETO	ON, NJ 08544		all the same			
(NJAC 5:23-8)	justificatio			Na	ame of Cont	act		Telephone	Númbé	PON	TRO
	☐ Cancellati	on			ROBERT (ORTEGO		609-258	1841	SING	1
Manager of Frankling and					FACILITY	INFORMATION					
Name of Facility Where At	batement is Ta	aking P	lace (3)				Type of Facil				
PRINCETON UNIVER	KSIIY - FIRE	SIO	VE LIB	RARY	Y		School (K	-12)			
1 WASHINGTON RO	IAD						Other (i.e.	er 8 (Other than I , private and con	(-12) Imercia	al buil	dinas
City (5)							homes, et	c.)		., 55,	umga
PRINCETON, NJ							Square Feet	# of Floors		Bldg	. Ag
County (6)				10	ountu Cada	(7)/07475 1105 011111	1,000,000			70)
MERCER				1.00	ounty Code ((7)(STATE USE ONLY)		Prior if being den	nolishe	d)	
Name of Monitoring Firm H ATC GROUP SERVIC		ig Own	er (8)	1	M No.	Name of Abatem					
Street Address	ES LLC			0	8200		VIRONMENT.	AL, INC.			
3 TERRI LANE						Street Address					
City, State, Zip Code						1123 BEAVE					
BURLINGTON, NJ 080	016					City, State, Zip C					
Project Manager for Monitor			17			BRISTOL, PA	19007				
MICHAEL R. KEEHN	ing riini		1	ephon	e No. 86-8800	Telephone No.		License No.			
Start Date (10)	Sch	eduled	760		ate (11)	215-788-6040		00509			
3/13/	17				17	Name of OSHA M			ALC: N	4:1	
Occupancy Status During Ab						BRISTOL EN	VIRONWENTA	L, INC			
75 01	5 ·	or only	one)			Street Address					
J Facility Closed/Vacated D	Juring Entire P	eriod o	f Abate	ment		1122 DEAVE	CTCCCT				
☐ Facility Closed/Vacated D ☐ Abatement Performed Ou	utside of Norma	al Facil	ity Hou	s - De	scribe	1123 BEAVR					
Abatement Performed Ou Time of Abatement: 4:00	utside of Norma	al Facil	ity Hou	s - De	scribe M	City, State, Zip Co	de				
Abatement Performed Ou	utside of Norma JAM- <u>12:30</u> PM	al Facil	ity Hou	s - De	scribe M		de				
Abatement Performed Ou Time of Abatement: 4:00 cope of Work (Check all that 3 sf or >3 If	utside of Norma JAM- <u>12:30</u> PM	al Facil	ity Hou	rs - De A	scribe M	City, State, Zip Co BRISTOL, PA Full Conta	de 19007 sinment with Negsure Procedure		ure		
Abatement Performed Ou Time of Abatement: 4:00. Cope of Work (Check all that 23 sf or 23 lf 2160 sf or 2260 lf	utside of Norma JAM- <u>12:30</u> PM	al Facil	enovati	on on	scribe M	City, State, Zip Co BRISTOL, PA Full Conta	de 19007 sinment with Negsure Procedure	gative Pressure n-Friable Proced	1	Datem	nent T
Abatement Performed Ou Time of Abatement: 4:00. Cope of Work (Check all that ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of	utside of Norm. JAM- <u>12:30</u> PM at apply)	al Facil	enovati emolitics S Locat Normal	on on ly ly by	м	City, State, Zip Co BRISTOL, PA Secondary Full Conta Mini-Enclo Glovebag Non-Exem Description of	de 19007 sinment with Negosure Procedure apted (*) and No	n-Friable Proced	Al	patem	T -
Abatement Performed Ou Time of Abatement: 4:00 Cope of Work (Check all that ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Mate TO BE ABATED	utside of Norm. JAM-12:30 PM at apply)	al Facil	enovati emolitic s Locat Normal ed Sole	on on ly ly by nce/	Asbest	City, State, Zip Co BRISTOL, PA Secondary Full Conta Secondary Mini-Enclor Secondary Non-Exem Description of tos Containing Mate	de 19007 sinment with Negosure Procedure upted (*) and No	n-Friable Proced Amount	Al	_	T -
Abatement Performed Ou Time of Abatement: 4:00 Cope of Work (Check all that ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Mate TO BE ABATED IN Facility	utside of Norm. JAM-12:30 PM at apply)	al Facil	enovati Enovati Enovati Enovati S Locat Normal Ed Sole intenar todial S	on on ly ly by nce/	Asbest	City, State, Zip Co BRISTOL, PA Selection of Full Conta Selection of Glovebag Non-Exem Description of tos Containing Mate thermal systems in surfacing, VAT, co	de 19007 Inment with Negoure Procedure Inted (*) and No Intel (ACM) Intel (ACM) Intel (Intel (Inte	n-Friable Proced	Al	patem	T -
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Abatement Performed Ou Time of Abatement: 4:00 Cope of Work (Check all that ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Mate TO BE ABATED IN Facility	utside of Norm. JAM-12:30 PM at apply) erial (ACM)	al Facil	enovati emolitic s Locati Normal ed Sole intenar todial S (12)	on on ly ly by ice/	Asbest (i.e.,	City, State, Zip Co BRISTOL, PA Selection of Full Conta Selection of Glovebag Non-Exem Description of tos Containing Mate thermal systems in surfacing, VAT, co	de 19007 Inment with Negoure Procedure Inted (*) and No Intel (ACM) Intel (ACM) Intel (Intel (Inte	n-Friable Proced Amount (Specify	Removal	_	T -
Abatement Performed Out Time of Abatement: 4:00. Cope of Work (Check all that it is a series of the cope of Work) Location of Asbestos-Containing Mate TO BE ABATED IN Facility (13) CUSTEES READING RM ALL OUTSIDE COTSEN	utside of Norm. AM-12:30 PM at apply) erial (ACM)	Al Facility R R D Use Ma Cus Yes	enovati emolitic s Locat Normal ed Sole intenar todial S (12)	on on ly by by lice/	Asbest (i.e.,	City, State, Zip Co BRISTOL, PA Full Conta Mini-Enclo Glovebag Non-Exem Description of tos Containing Mate thermal systems in surfacing, VAT, co other miscellaneous	de 19007 Inment with Negoure Procedure Inted (*) and No Intel (ACM) Intel (ACM) Intel (Intel (Inte	Amount (Specify SF or LF)	Al	_	T -
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Abatement Performed Out Time of Abatement: 4:00. Cope of Work (Check all that it is a series of the cope of Work) Location of Asbestos-Containing Mate TO BE ABATED IN Facility (13) CUSTEES READING RM ALL OUTSIDE COTSEN	utside of Norm. PAM-12:30 PM at apply) erial (ACM) MEZZ. LIBRARY	al Facility R D Use Ma Cus Yes	enovati emolitic s Locati Normal ed Sole intenar todial S (12) No	on on ly by boce/ ttaff?	Asbest (i.e.,	City, State, Zip Co BRISTOL, PA Self-Brill Conta Self-Br	de 19007 Inment with Negoure Procedure Inted (*) and No Intel (ACM) Intel (ACM) Intel (Intel (Inte	Amount (Specify SF or LF) 85 LF 250 SF	Removal	_	T -
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Abatement Performed Out Time of Abatement: 4:00. Cope of Work (Check all that it is a series of the cope of Work) Location of Asbestos-Containing Mate TO BE ABATED IN Facility (13) RUSTEES READING RM ALL OUTSIDE COTSEN ESERVATION ROOF The of Registered Waste Hat ERVICE TRANSPORT (1) State EW CASTLE, DE	utside of Norm. AM-12:30 PM at apply) erial (ACM) I MEZZ. I LIBRARY	Is Use Ma Cus	enovati emolitic s Locati Normal ed Sole intenai todial S (12) No	on on ly by by loce/ ttaff? N/A	Asbest (i.e., PIPE INS WATERP WATERP	City, State, Zip Co BRISTOL, PA Full Conta Mini-Enclo Glovebag Non-Exem Description of tos Containing Mate thermal systems in surfacing, VAT, co other miscellaneous ULATION ROOFING Cubic Yards of Vaste	de 19007 sinment with Negosure Procedure Inted (*) and No crial (ACM) sulation, or Is) Name of Registe	Amount (Specify SF or LF) 85 LF 250 SF 150 SF	Removal	_	T -
Abatement Performed Ou Time of Abatement: 4:00. Cope of Work (Check all that >3 sf or >3 lf	utside of Norm. PAM-12:30 PM at apply) Perial (ACM) I MEZZ. I LIBRARY Uler GROUP, INC	Is Use Ma Cus	enovati emolitic s Locati Normal ed Sole intenar todial S (12) No No No No No NJ Ha 2	on on ly by by loce/ ttaff? N/A	Asbest (i.e., PIPE INS WATERP WATERP	City, State, Zip Co BRISTOL, PA Full Conta Mini-Enclo Glovebag Non-Exem Description of tos Containing Mate thermal systems in surfacing, VAT, co other miscellaneous ULATION ROOFING Cubic Yards of Vaste	de 19007 sinment with Negoure Procedure Inpted (*) and No surial (ACM) sullation, or INS) Name of Registe MINERVA L. City, State	Amount (Specify SF or LF) 85 LF 250 SF 150 SF	Removal 🛛 🖺	_	T -

* Do not use this form for asbestos licensure exempted activities

JAN 13

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

E	C	E		\mathbb{V}	E	M
4	SEP	19	7 ;	2017	The state of the s	

Date of Notification (1)					Name	e of Buildin	g Owner/Operator ((2)		-		-	HHI
	/	17	_		1000000		OF PRINCETON	111	SEP 2	7 2	2017	A COLUMN TO A COLU	L
⊠ EPA ⊠ DOLWD ⊠	pe Notific Initial Amended Amendm	d	5-9/22	/17	200	t Address D ELM DF State, Zip			ASBESTOS LICEN	CON	TRO	L &	
	Emergen				PR	INCETO	N, NJ 08544						
(NJAC 5:23-8)	justificati		oluuli	,	Name	e of Contac	ot .		Telephone Numb	per			
	Cancella	tion			RO	BERT O	RTEGO		609-258-184	1			
					FA	CILITY IN	FORMATION			1,100			Maria de la companya della companya
Name of Facility Where Abate	ement is 1	Taking	Place	(3)				Type of Facility	(4)				T. III.
PRINCETON UNIVERS	ITY - FIF	REST	ONE	LIBF	RARY			School (K-12	2)				
Street Address	-								8 (Other than K-12)		حالمان.		
1 WASHINGTON ROAD)							homes, etc.)	rivate and commer	Ciai Di	nioin	ys,	
City (5)				- "				Square Feet	# of Floors	В	dg. A	ge	
PRINCETON, NJ								1,000,000	8		70		
County (6)					Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)		- 201	
MERCER								UNIVERSIT	Y LIBRARY				
Name of Monitoring Firm Hire		ding O	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)			-	-	-
ATC GROUP SERVICES	S LLC				00	098	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Street Address						B.C. marrier
3 TERRI LANE							1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode		7-7			
BURLINGTON, NJ 0801	6						BRISTOL, PA	19007					
Project Manager for Monitorin	g Firm			Tel	ephone	No.	Telephone No.		License No.				
MICHAEL R. KEEHN					09-386		215-788-6040		00509				
Start Date (10)	50.00				etion Da		Name of OSHA M	lonitor					
3 / 13 / 1	7	0	10	H	06.6	· 	BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During Aba							Street Address						
☐ Facility Closed/Vacated Di							1123 BEAVR	STREET					
							City, State, Zip Co	ode					
Scope of Work (Check all that		ZF 1V1/_	'	101		vi	BRISTOL, PA	19007					
	арріу)							ainment with Neg	gative Pressure				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			⊠ Re □ De			¥	☐ Mini-Enc ☑ Glovebag ☐ Non-Exe	Procedure	n-Friable Procedur	e			
				Loca						Ab	atem	ent T	уре
Location of Asbestos-Containing Mate TO BE ABATED IN Facility (13)		1)	Use Ma	nten	ely by ance/ Staff?		Description o stos Containing Ma ., thermal systems i surfacing, VAT, other miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(10)			Yes	No	N/A		other miscellane	ous)				te	
PHASE 5A - LEVELS C &	В				\boxtimes	PIPE IN	SULATION		1010 LF				
PHASE 5A - LEVELS C &	В				\boxtimes	FLOOR	TILE & MASTIC		43,057 SF	\boxtimes			
PHASE 5A - LEVELS C &	В				\boxtimes	Packed	fittings on fiber	glass	285 EA	\boxtimes			
PHASE 5A - LEVELS C &					\boxtimes	Hanger	pads on fibergla	ass	40 EA				
Name of Registered Waste Ha	auler			1.5%	NJDEP !		Cubic Yards of	Name of Regis	tered Landfill	1	1		
SERVICE TRANSPORT	GROUP	, INC			lauler II 20990		Waste	MINERVA	LANDFILL				
City, State				-			Disposal Date	City, State					
NEW CASTLE, DE								WAYNESB	URG, OH				
Completed By (Print or Type)		Title		COLLEGE COLLEGE			Signature		Dat	te .	1		
BRIAN SCAFIRO		ES	STIMA	TOF	3		1 -	- Scale	2 / 18 G	/12	//	7	
ASB 41		1					1	- Looke	100/100	100	11	3	

ASB-41 JAN 13 BS17024

Date of Notification (1)

Agencies Notified

(NJAC 5:23-8)

⊠ EPA

⊠ DOH

⊠ DCA

□ DOLWD

Street Address

City (5)

County (6)

MERCER

Street Address

Start Date (10)

3 TERRI LANE

City, State, Zip Code

1 WASHINGTON ROAD

ATC GROUP SERVICES LLC

BURLINGTON, NJ 08016

MICHAEL R. KEEHN

Project Manager for Monitoring Firm

__3__ / __13__ / __17

PRINCETON, NJ

2

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 27 / 17 TRUSTEES OF PRINCETON UNIVERSITY SEP Type Notification Street Address 200 ELM DRIVE STOS CONTROL & City, State, Zip Code Amendment #4-8/30/17 LICENSING PRINCETON, NJ 08544 ☐ Emergency (including Name of Contact justification) Telephone Number Cancellation ROBERT ORTEGO 609-258-1841 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PRINCETON UNIVERSITY - FIRESTONE LIBRARY School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age 1,000,000 8 70 County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) UNIVERSITY LIBRARY Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. 00098 BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. Telephone No. License No. 609-386-8800 215-788-6040 00509 Scheduled Completion Date (11) Name of OSHA Monitor 9 / 29 / 17 BRISTOL ENVIRONMENTAL, INC Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatem

Z 41					1123 BEAVE	SIKEEI					
Abatement Performed Outside of Norm Time of Abatement: 4:00AM-12:30PM	al Facili	ty Hou PM			City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that apply) 3 sf or >3 lf	⊠ Re	enova	tion		⊠ Full Cont	ainment with Ne	gative Pressure				
≥160 sf or ≥260 lf		emolit				Procedure	on-Friable Procedur	е			
l and in the	200	Norm						Ab	atem	ent T	уре
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use Ma	ed So ainten	lely by ance/ Staff?	Asb (i.	Description o estos Containing Mar e., thermal systems i surfacing, VAT, other miscellane	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
1982 18	Yes	No	N/A							6	
PHASE 6 - LEVEL 1			\boxtimes	ACOU	STICAL CEILING	PLASTER	6075 SF	\boxtimes			
PHASE 6 - LEVEL 1			\boxtimes	PIPE II	NSULATION		200 LF	×			
PHASE 6 - LEVEL 1		\boxtimes	SPLIN	E CEILING TILES		4050 SF					
TRUSTEES READING RM MEZZ.			\boxtimes	ACOU	STICAL PLASTER	CEILING	450 SF				
Name of Registered Waste Hauler		1	NJDEP V	0.000	Cubic Yards of	Name of Regis	stered Landfill	1			
SERVICE TRANSPORT GROUP, IN	C.	1	Hauler ID		Waste	MINERVA	LANDFILL				

ASB-41 **JAN 13** B517024

Completed By (Print or Type)

NEW CASTLE, DE

BRIAN SCAFIRO

City, State

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

Disposal Date

Signature

City, State

WAYNESBURG, OH

20990

Title

ESTIMATOR

E E

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

| Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)								wner/Operator		3					1	Ħ
	27 /	1	7		T	RUSTEES	OF	PRINCETON	UNIVERSIT	Y	SEP	27	วก	17	and right	U
Agencies Notified	Type Notifi	cation			Stre	et Address			1 04	i in	J VLI	<u></u>	20	11	-	
⊠ EPA					20	0 ELM DI	RIV	E			Andrews Andrews				1	
⊠ DOLWD	⊠ Amende		4 0/0	047	City,	State, Zip	Cod	le	4		ASBESTO	S CO	VII	ROL	å	20-310-31
☑ DOH ☑ DCA	Amendr Emerge				PF	RINCETO	N, N	J 08544	L		LIC	ENSIN	1G	week copies	WELL THE SEC	mripdi-s
(NJAC 5:23-8)	justifica		iciuali	ig		e of Contac					Telephone N	lumber				
	☐ Cancell				R	DBERT O	RTE	EGO			609-258-					
		Alle 10		- 0.00	F/	CILITY	VEC	RMATION	20112				_			- 77
Name of Facility Where A	batement is	Takin	g Plac	e (3)		CILITI	41 0	MINITION	Type of Facil	tv. //	()					
PRINCETON UNIVE					ARY				School (K							
Street Address					- IVI				Subchapte Subchapte	er 8	(Other than K	(-12)				
1 WASHINGTON RO	DAD								Other (i.e.	, pri	vate and com	mercia	l bu	uilding	gs,	
City (5)									homes, et	.C.)	# -5 =1		Di	1 0		
PRINCETON, NJ									1,000,000		# of Floors			dg. A	ge	
County (6)					Cou	nty Code /	7\/07	ATE USE ONLY)				11. 1		70		
MERCER					000	inty Code (/	1/(31	ATE USE UNLT)	Current Use (LIBRARY	nolisne	a)			
Name of Monitoring Firm I	Hired by Rui	Idina (Jwner	(8)	ASCM	I No.	NI	ama of Abatana	1,111		LIBRARY		_			
ATC GROUP SERVI		iding (JWHEI	(0)		098		ame of Abateme			INIO					
Street Address	OLO LLO			Y-750-	00	036	-	BRISTOL EN	VIRONWENI	AL	, INC.					
3 TERRI LANE							1 52	reet Address	OTDEET							
City, State, Zip Code			-					1123 BEAVE								
	RLINGTON, NJ 08016							ty, State, Zip Co								
								BRISTOL, PA	19007							
MICHAEL R. KEEHN					ephone			lephone No.			License No.					
Start Date (10)		Cabad	ld .C			3-8800		215-788-6040			00509					
3 /13 /						ate (11)	1	me of OSHA M								
						17	t	BRISTOL EN	VIRONMENT	AL,	INC					
Occupancy Status During							Str	reet Address								
☐ Facility Closed/Vacated							1	1123 BEAVR	STREET							
Abatement Performed (Time of Abatement: 4:0	00AM-12:30	OPM/	racilit	y Hou PM-	s - Des	scribe		y, State, Zip Co								
							E	BRISTOL, PA	19007							
Scope of Work (Check all t	that apply)							EX Full Cont	-1		•					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re	novati	on			☐ Mini-Encl	ainment with N osure	egai	ive Pressure					
≥ 160 sf or ≥260 lf			☐ De						Procedure							
								☐ Non-Exer	npted (*) and N	lon-	Friable Proce	dure				
Location o	£			Locat Norma						1		L	Aba	teme	ent T	уре
Asbestos-Containing M		1)		d Sole		Ashes	stos	Description of Containing Mat			Amount	1 2	D D	Re	En	E
TO BE ABAT	ED `			intena				ermal systems in			(Specify		Removal	Repair	cap	clos
IN Facility (13)			Cusi	todial (12)	olan?			surfacing, VAT,			SF or LF)	1	1		Encapsulate	Enclosure
(13)			Yes	No	N/A	1	Ot	her miscellaneo	ous)						ate	
TRUSTEES READING	DM MEZZ	-				DIDE IN	~	171011		-		-	_			_
						PIPE IN	SUL	AHON			85 LF				Ш	
WALL OUTSIDE COTS	EN LIBRA	RY				WATER	PRO	OOFING			250 SF	D				
PRESERVATION ROOF			WATER	PRO	OOFING			150 SF	D	3	П	П	П			
	П	П					-	<i></i>	1	7						
Name of Registered Waste		JDEP V	Maste	Cut	oic Yards of	Name of Reg	ictor	od Londfill				Ш	Ц			
SERVICE TRANSPOR		. INC	ž	11.56(3)	auler ID		Was		MINERVA							
City, State	20990		D!-	I D. (-		LA	MULILL									
NEW CASTLE, DE							DIS	posal Date	City, State	-	20.00					
		-							WAYNES	BUE						
Completed By (Print or Type	e)	Title						Signature	1 15	1	, ,	Date	1	1	1160	
BRIAN SCAFIRO		ES	TIMA	IOR				Drean)	Scolero	/	pl	0/3	30	//	7	

ASB-41 JAN 13 B 517024

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

			(Pursu	ant to NJ	IAC	8:60 and 5:1	16)				Pa	1		
Date of Notification (1)				Nar	ne of Buildi	ina (Owner/Operator	(2)	TE	C F	1	W		F	1
2 /27	/	17					F PRINCETON		Y	6 6	Ш	U.	15		Andreas Control
Agencies Notified Type	Votification	n			et Address				-						1
⊠ EPA ⊠ Init				-000000	00 ELM D		/E	1		SEP 2	7	2017		L	4
	ended	#A Q12	0/47	City	, State, Zip	Cod	de	401 00	1				-		1
	endment ergency			P	RINCETO	N, I	NJ 08544		L	BESTOS	CON	ITRO)L &	3	-
(NJAC 5:23-8) jus	tification)		19	Nan	ne of Conta	ct				Telephone		-	ALC: NO CONT		- C
☐ Ca	ncellation			R	OBERT O	RT	EGO			609-258	3-184	1			
				F	ACILITY I	NF	ORMATION				-				
Name of Facility Where Abateme								Type of Facil	- 50 SON)					
PRINCETON UNIVERSITY Street Address	- FIRES	TONE	LIB	RARY				School (K	-12)	04646	1/ /0	v:			
1 WASHINGTON ROAD								Subchapte Other (i.e.	er o (, priv	ate and co	K-12 mmer) cial t	uildir	ias.	
City (5)	ii 							homes, et	tc.)					3-1	
PRINCETON, NJ								Square Feet	- 1	# of Floor:	S	Е	Bldg. A	Age	
County (6)				I Cou	inty Code (71/0	TATE USE ONLY)	1,000,000	- 1	8			70		
MERCER				000	inty Code (1)(3	TATE USE ONLY)	Current Use (hed)			
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASCN	1 No	N	lame of Abateme	UNIVERS		LIBRARY					
ATC GROUP SERVICES L	170	NE 1160EM	(-)		0098	1"	BRISTOL EN			INC					
Street Address						S	treet Address	THOMBEN	Λ∟,	IIVO.					
3 TERRI LANE							1123 BEAVER	R STREET							
City, State, Zip Code						C	ity, State, Zip Co				-				
BURLINGTON, NJ 08016							BRISTOL, PA	19007							
Project Manager for Monitoring Fi	m		-	ephone		Te	elephone No.			License N	0.				-
MICHAEL R. KEEHN					6-8800		215-788-6040			00509					
Start Date (10)	Sche				ate (11)	1	ame of OSHA M							7 0 483	
3 / 13 / 17				9 /	17		BRISTOL EN	/IRONMENT	AL,	INC					
Occupancy Status During Abatem							reet Address	22-							
☐ Facility Closed/Vacated During ☐ Abatement Performed Outside	of Norma	Facility	Abate	ment	acriba		1123 BEAVR :								
Time of Abatement: 4:00AM-1	2:30PM/		PM	IS - De:	VI		ty, State, Zip Co								0.544.500
Scope of Work (Check all that app		46.					BRISTOL, PA	19007							
	3)	(1 <u>0.00</u>						ainment with N	egati	ve Pressur	e				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ Re	novat moliti					osure	-3						
			inonti	311			⊠ Glovebag □ Non-Exen □	Procedure npted (*) and N	lon-F	riable Proc	edure				
10 10 10 10 10 10 10 10 10 10 10 10 10 1			Loca						T				atem	ent T	vpe
Location of Asbestos-Containing Material (0.000		lorma d Sol	ily ely by			Description of								
TO BE ABATED	(Civi)	Mai	intena	nce/	(i.e.	the	Containing Mate ermal systems in	erial (ACM) isulation		Amount (Specify		Removal	Repair	nca	nclo
IN Facility (13)		Cust	(12)	Staff?			surfacing, VAT,	or		SF or LF)		val	1 5	Encapsulate	Enclosure
(10)		Yes	No	N/A		O	ther miscellaneo	us)						ate	· CU
PHASE 5A - LEVELS C & B					PIPE INS	SUL	ATION			1010 LF	_	\boxtimes			
PHASE 5A - LEVELS C & B							E & MASTIC			43,057 SI					
PHASE 5A - LEVELS C & B							ings on fiberg	lass		285 EA					
PHASE 5A - LEVELS C & B							ds on fiberglas	-	-	40 EA	-				
Name of Registered Waste Hauler			IN	JDEP V		3	oic Yards of	Name of Regi	stere						Ч
SERVICE TRANSPORT GRO	UP, INC) .	Н	auler ID 20990		Wa	ste	MINERVA							
City, State						Disp	posal Date	City, State	-					-	
NEW CASTLE, DE								WAYNESE	BUR	G, OH					
Completed By (Print or Type)	Title						Signature	0 -	-	1	Date	,	,		
BRIAN SCAFIRO	E	STIMA	TOR				Diesn,	Scalin	1	P			1,7		

ASB-41

JAN 13 B317024

of grand

State of New Jersey

J.		NO.				SBESTOS ABA AC 8:60 and 5:1		EGE	PI	[2]	- [-
Date of Notification (1)				Nam	e of Ruildin	ng Owner/Operator	(2)		10 91	T-	-11	
	27 /	17		Towns Control		OF PRINCETON	11111	SEP 2	7 201	7	A STATE OF STREET, TO	
Agencies Notified	Type Notificatio	n		Stree	et Address		food had		/ ///		I beauty	4
⊠ EPA				20	00 ELM DE	RIVE	Stewart Street				D'Réto	Patrongo
☑ DOH	Amended Amendment	#1_8/3	1/17	City,	State, Zip	Code		ASBESTOS C	ONIR	OL &	-3	- California
⊠ DCA	☐ Emergency			PF	RINCETO	N, NJ 08544	-	LICENS	HNG	The part of the last of the la	-	
(NJAC 5:23-8)	justification)		3	Nam	e of Contac	ot		Telephone Nu	mber			
	Cancellation			RO	DBERT O	RTEGO		609-258-1	B41			
				FA	CILITY IN	NFORMATION						
Name of Facility Where							Type of Facility					
PRINCETON UNIVE	RSITY - FIRES	TONE	LIBR	ARY			School (K-12)				
Street Address							Subchapter 8	other than K-	12) nercial b	uildin	ıas	
1 WASHINGTON RO	DAD						homes, etc.)			2755 1075 118B	3~,	
City (5)							Square Feet	# of Floors	E	Bldg. A	\ge	aparent a
PRINCETON, NJ County (6)				10			1,000,000	8		70		200-00-00-00-00-00-00-00-00-00-00-00-00-
MERCER				Cou	nty Code (7	(STATE USE ONLY)	Current Use (Pri		lished)			
Name of Monitoring Firm	Hirad by Building	Owner	(0)	ASCM	L NI -		UNIVERSITY	LIBRARY				
ATC GROUP SERV		Owner	(0)		098	Name of Abateme		INIO				
Street Address	OLO LLO			00	030	Street Address	VIRONMENTAL	., INC.				
3 TERRI LANE						1123 BEAVER	CTPEET					
City, State, Zip Code						City, State, Zip Co						_
BURLINGTON, NJ 0	8016					BRISTOL, PA						
Project Manager for Moni	toring Firm		Tele	phone	No.	Telephone No.		License No.				
MICHAEL R. KEEH	1		6	09-386	6-8800	215-788-6040		00509				
Start Date (10)		duled C	omple	tion Da	ate (11)	Name of OSHA M	onitor					
3 / 13 /		9 /	_ 29	_ /	17	BRISTOL ENV	/IRONMENTAL	, INC				
Occupancy Status During	Abatement (Chec	ck only o	ne)			Street Address						
☐ Facility Closed/Vacate	d During Entire Pe	eriod of	Abate	ment		1123 BEAVR	STREET					
Abatement Performed Time of Abatement: 4:	Outside of Norma	I Facility	Hou	s - Des	scribe	City, State, Zip Co	de					
			-IVI	A	VI	BRISTOL, PA	19007					
Scope of Work (Check all	that apply)					57.5	. 7 2000					
≥3 sf or ≥3 lf		⊠ Re	novati	on			ainment with Nega	tive Pressure				
≥160 sf or ≥260 lf		☐ De	molitic	n			Procedure					
		1 10	Locat	ion	1	∐ Non-Exen	npted (*) and Non	-Friable Proced				
Location of	of	10000	lorma			Description of				atem	ent T	ype
Asbestos-Containing N			d Sole			stos Containing Mate	erial (ACM)	Amount	Removal	Repair	Enc	Enclosure
TO BE ABAT		COLUMN TO SERVICE	odial S		(i.e.	 thermal systems in surfacing, VAT, 		(Specify SF or LF)	Nova	air	aps	lost
(13)			(12)			other miscellaneo		SI GILI)	=		Encapsulate	Гe
		Yes	No	N/A							(D	
PHASE 6 - LEVEL 1					ACOUS	TICAL CEILING F	PLASTER	6075 SF	\boxtimes			
PHASE 6 - LEVEL 1					PIPE INS	SULATION		200 LF	\boxtimes			
PHASE 6 - LEVEL 1					SPLINE	CEILING TILES		4050 SF				
TRUSTEES READING				\boxtimes		TICAL PLASTER		450 SF	\boxtimes			
Name of Registered Waste		_		JDEP V auler ID		Cubic Yards of Waste	Name of Registe					
SERVICE TRANSPO	CT GROUP, IN	J.		20990	200000000000000000000000000000000000000		MINERVA L	ANDFILL				
City, State NEW CASTLE, DE						Disposal Date	City, State					
							WAYNESBU	RG, OH				
Completed By (Print or Typ BRIAN SCAFIRO	enetal Committee		TOD			Signature	0 0.		ate /	. /	1	
ASB-41	E	STIMA	IUK		\$2.525 To 100	Drean &	scofers /	pl	8/3	0/	17	
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Date of Notification (1)											Ш	1	= Y	95	<u> </u>	A)		
	27 /	_ 1	7					wner/Opera		(2) I UNIVERS	ITY		eco	2	7 0	0477	Although policy de	
Agencies Notified	Type Notif	ication	1		Stre	et Address					(pag	-	SEP		1 4	11/	- 11	La)
⊠ EPA					20	0 ELM D	RIVI	E				Total State of the last					or the contract of the contrac	
⊠ DOLWD				0112	City,	State, Zip	Cod	le				A	SBEST	US C	ON	ROL	. &t	
☑ DOH ☑ DCA	Amend		_		In the state of	RINCETO				1	~~~	-	L	CEN	SING	3		NWIPSON SCIENCE
(NJAC 5:23-8)	☐ Emerge justifica		nciuair	ig		e of Conta		20,500,510,510,510,510,510,510,510,510,51				Te	ephone	Num	her			
	Cancell	500			RO	DBERT O	RTE	EGO				100000	09-25					
					FA	CILITY II	NFC	RMATION	1									
Name of Facility Where A										Type of Fa	cility	(4)	-					
PRINCETON UNIVE	RSITY - FI	RES	TONE	LIBE	RARY					☐ School	(K-12	2)						
Street Address										Subchar Other (i.	oter i	B (Oth	ner than	K-12)	mildir	ac	
1 WASHINGTON RO	AD									homes,	etc.)	IIValc	and co	ATTITIO:	iciai L	unun	ys,	
City (5)										Square Fee	et	#	of Floor	'S	E	ldg. A	Age	
PRINCETON, NJ										1,000,00	00		8			70		
County (6)					Cou	nty Code (7)(ST	ATE USE ON	LY)	Current Use	e (Pr	ior if t	peing de	emolis	shed)			
MERCER										UNIVER	SIT	Y LIE	BRARY	,				
Name of Monitoring Firm F		ilding	Owner	(8)	ASCM	No.	Na	ame of Abat	eme	ent Contracto	r (9)							
ATC GROUP SERVIO	CES LLC				00	098	1 0	BRISTOL	EN	VIRONMEN	ATA	L, IN	C.					
Street Address							St	reet Address	s									
3 TERRI LANE							1 2	1123 BEA	VEF	RSTREET								
City, State, Zip Code						201111	Cit	ty, State, Zip	о Со	de								-
BURLINGTON, NJ 08							1	BRISTOL,	PA	19007								
Project Manager for Monito	oring Firm			Tel	ephone	No.	Te	lephone No	, o			Lie	cense N	lo.				
MICHAEL R. KEEHN				6	09-386	-8800	1	215-788-60	040				00509					
Start Date (10)	Commission of the Commission o					ate (11)	Na	me of OSH	A M	onitor								
3/13/	17	-	9_ /	_2	9_/	17	E	BRISTOL	EΝ\	/IRONMEN	TAL	., IN	С					
Occupancy Status During A							Str	reet Address	3						7-2-			
☐ Facility Closed/Vacated	During Ent	ire Pe	riod of	Abate	ment		1	1123 BEAN	/R	STREET								
Abatement Performed C	Dutside of N	lormal	Facilit	y Hou			Cit	y, State, Zip	Co	de								
Time of Abatement: 4:0		UPIVI/		PIM	A	Л	E	BRISTOL,	PA	19007								
Scope of Work (Check all t	hat apply)						- Total											
≥3 sf or ≥3 If			⊠ Re	novat	ion			□ Full C □ Mini-E	onta	ainment with	Neg	ative	Pressu	re				
≥160 sf or ≥260 lf			☐ De							Procedure								
								☐ Non-E	xen	npted (*) and	Nor	-Fria	ble Pro	cedur	е			
			- 63	Loca Norma											Ab	atem	ent T	уре
Location of Asbestos-Containing Ma		4)		d Sol		Aches	etne	Descriptio Containing					A 4		Re	Re	m	щ
TO BE ABATI		.,	0.000	intena			, the	ermal systen	ns in	sulation,			Amount Specify		Removal	Repair	ıcap	nclos
IN Facility (13)			Cusi	(12)	Staff?			surfacing, V			-		F or LF		val]	Encapsulate	Enclosure
(13)			Yes	No	N/A	1	Oti	her miscella	neo	us)							ate	
TRUSTEES READING F	RM MEZZ.		П			PIPE IN	SUL	ATION			+		85 LF					
WALL OUTSIDE COTSI	EN LIBRA	RY				WATER					+		250 SF					
PRESERVATION ROOF						WATER	PRO	OOFING			+		50 SF					
			П	П			1150				+	-			-			
Name of Registered Waste	Hauler				JDEP V	Vaste	Cub	oic Yards of		Name of Re	agiet	arod l	andfill			ш	ш	Ш
SERVICE TRANSPOR		, INC	: .	555	auler IC 20990	No.	Was			MINERV								
City, State							Disp	posal Date		City, State								
NEW CASTLE, DE										WAYNE	SBL	JRG.	ОН					
Completed By (Print or Type	=)	Title	1					Signature		540				Date	e /		,	_
BRIAN SCAFIRO	300	ES	STIMA	TOR				Brian		Scoler	/	11	l	2	1/3	0//	7	
0.0								/	/	4000	/	A	W. S	1	1	11	/	

ASB-41 JAN 13 B 517024

Pg.#1

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

Date of Notification (1)			I NI	ome of Build	dina OuraniOnanti	- (0)	- CE	~		_	
	/17	_	1			50000 B	DEG	E	V	7 [
 ☑ EPA ☑ DOLWD ☑ DOH ☑ DCA ☑ NJAC 5:23-8) ☑ Initia ☑ Ame Ame initia ☑ Ame Ame justia 	al ended endment # <u>3-</u> ergency (incl ification)		7 Cit	200 ELM E ty, State, Zip PRINCETO time of Conta	DRIVE D Code DN, NJ 08544	to beautiful and the state of t	SEP Telephone N	lumbèn	2017		The second secon
Can	cellation					Free	609-258-	841	G	Transcription and the second	-
				ACILITY	INFORMATION						
				,		School (K-	-12)				
1 WASHINGTON ROAD				19		Other (i.e.	private and comr	-12) nercial	build	ings,	
City (5) PRINCETON, NJ						Square Feet	# of Floors		Bldg.	452.11	
County (6)			Co	ounty Code ((7)(STATE USE ONLY)		1	olichad			
MERCER								Justieu	1.		
Name of Monitoring Firm Hired by I	Building Owr	ner (8)	ASC	M No.	Name of Abatem	A COLUMN TO A COLUMN TO THE PARTY OF THE PAR	20.00				
ATC GROUP SERVICES LLC	С		0	0098			3/37 ⁴ /3/1				
Street Address					Street Address						
3 TERRI LANE					1123 BEAVE	R STREET					
	Type Notification Initial				City, State, Zip Ci	ode					
					BRISTOL, PA	19007					
[1	Te	lephon	e No.	Telephone No.		License No.				
					215-788-6040		00509				
								0.0000000000000000000000000000000000000			
	1		31 /		BRISTOL EN	VIRONMENTA	L, INC				
					Street Address						
☐ Facility Closed/Vacated During E	intire Period	of Abat	ement		1123 BEAVR	STREET					
Agencies Notified											
Scope of Work (Check all that apply)										_	
2		ıre									
								1	patem	ent T	vne
Asbestos-Containing Material (AC TO BE ABATED IN Facility	Cu	sed Sol laintena stodial (12)	ely by ance/ Staff?	Asbes (i.e.,	tos Containing Mate thermal systems in surfacing, VAT, o	erial (ACM) sulation, or	(Specify	Removal	Repair	Encapsulate	Enclosure
HASE 5A - LEVELS C & D		-	-	DIDE INC							
		+									
HASE 5A - LEVELS C & B		-				200					
				2.0							
	P, INC.	Н	JDEP V auler ID	Vaste (Cubic Yards of	Name of Regist	ered Landfill		Ш		Ц
NEW CASTLE, DE			20330		Disposal Date	City, State					
	100000000000000000000000000000000000000	ATOR			1 /2	0 0 1	Dat	e/20	110	7	
-41						1 0 /		1	1'	X.,	

* Do not use this form for ashestos licensure exempted activities

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JAN 13

Date of Notification (1)				1	Name of Buil	Iding Owner/Operato	r (2)		1.0		X	7	٠-	50
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County (6)				C	ounty Code	(7)(STATE USE ONLY)				emolie	hed	87/6/87/0		
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Name of Monitoring Firm Hired	d by Buildin	ng Own	er (8)	ASO	CM No.	Name of Abatem			LIDIONIC	2	_			_
ATC GROUP SERVICES			56 7 00		00098	BRISTOL EN		0.00	INC					
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3 TERRI LANE						1123 BEAVE	STREET							
City, State, Zip Code		100				City, State, Zip Co								
BURLINGTON, NJ 08016	ŝ													
Project Manager for Monitoring			T	elepho	ne No	BRISTOL, PA	19007							
MICHAEL R. KEEHN					86-8800	Telephone No. 215-788-6040			License N	10.				
tart Date (10)	Sch	eduler			Date (11)				00509					
3/13/17					/ 17	Name of OSHA M BRISTOL ENV		A	NC					
occupancy Status During Abate							OreiviEN [7	~i_, I	I4C					
Facility Closed/Vacated Duri				ement		Street Address								
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Time of Abatement: 4:00 AM	1-12:30PN	1/	_PM-	/	AM	City, State, Zip Coo								
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A PARTICIPANT	☐ Cancellati			-				Teleph	one Nun	iber	ON7	RO	i
		1011				ORTEGO		609-	258-18	11	SING		, Sec.,
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Street Address	ES LLC			(82000	BRISTOL EN	VIRONMENT	AL, INC.					
						Street Address							-
3 TERRI LANE						1123 BEAVE	R STREET						
City, State, Zip Code						City, State, Zip Co	ode			-			-
BURLINGTON, NJ 080						BRISTOL, PA	19007						
Project Manager for Monitorii	ng Firm		Te	elephor	ne No.	Telephone No.		License	No.				_
MICHAEL R. KEEHN				609-35	36-8800	245 300 0040							
			1			215-788-6040		0050	9				
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NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)				(1		NJAC 8:60 and	,			15	1	. W
Date of Notification (1)	27				Name of Bu	uilding Owner/Oper	ator (2)		10.000 CHIOXI			
	27 /	-	7		TRUSTE	ES OF PRINCE	TON UNIVERSIT	TY	SFI	2	7 :	2017
Agencies Notified EPA	Type Noti	fication	า		Street Addre	ess			47 Eq.		1	_U1
Ø DOLWD		اما			200 ELM	DRIVE						
Ø DOH	Amend		£2-6/1	6/17	City, State, 2	Zip Code		AS	SBES			
⊠ DCA	☐ Emerge	ency (i	ncludir	10	PRINCET	TON, NJ 08544			L	ICEN	ISIN	d
(NJAC 5:23-8)	justifica	ation)		3	Name of Cor	ntact		Telephor	n= 61			
	☐ Cancell	ation			ROBERT	ORTEGO		609-2				
					FACILITY	INFORMATION		003-2	20-16	47		
Name of Facility Where Ab	atement is	Takin	g Place	(3)			Type of Facilit	h. (4)				
PRINCETON UNIVER	SITY - FI	REST	ONE	LIBRA	RY		School (K-					
Street Address							── Subchapte	r 8 (Other the	n K-12)		
1 WASHINGTON ROA	D						Other (i.e., homes, etc	private and c	omme	cial b	uildin	ıgs,
City (5)							Square Feet	··)				
PRINCETON, NJ							1,000,000	# of Floo	rs	1	ldg. A	ge
County (6)					County Code	(7)(STATE USE ONLY		_			70	
MERCER				1			bearing and a second	Y LIBRARY	emolis ,	hed)		
Name of Monitoring Firm Hire	ed by Build	ling O	vner (8) A	SCM No.	Name of Abater	nent Contractor (9	LIBRARY				
ATC GROUP SERVICE	SLLC				00098		VVIRONMENTA					
Street Address						Street Address	THEOREMEN I A	L, INC.				
3 TERRI LANE						1123 BEAVE	ROTPEET					100,000
City, State, Zip Code						City, State, Zip C					2000	
BURLINGTON, NJ 0801						BRISTOL, PA						
Project Manager for Monitoring	g Firm		1	Teleph	one No.	Telephone No.	13007	1				
MICHAEL R. KEEHN					386-8800	215-788-6040		License No	0.			
Start Date (10)	Sc	hedule	d Com	pletion	Date (11)	Name of OSHA N		00509				
3 / 13 / 17					/_17	1	VIRONMENTAL	1110				
Occupancy Status During Abat						Street Address	PROMIENTAL	, INC				
☐ Facility Closed/Vacated Dur	ing Entire I	Period	of Aba	temen	t I		~~~					
Abatement Performed Outside Abatement Performed O	de of Norm	nal Fac	ility He	nure - F	Describe	1123 BEAVR						
Time of Abatement: 4:00 AM	1-12:30Ph	//	PM-		AM	City, State, Zip Co						
cope of Work (Check all that a	(ylgo					BRISTOL, PA	19007					
	,	70000				⊠ Full Conta	inment with Negat					
] ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			Renova Demoli			LI WILLI-FUCIO	sure	ive Pressure				
			Jemon	uon		☑ Glovebag	Procedure	zakanenan en				
		T	Is Loca	ation	1	LI NON-Exem	pted (*) and Non-F	riable Proced	lure			
Location of		1	Norm	ally	1	Description of			A	bater	nent '	Гуре
Asbestos-Containing Material TO BE ABATED	(ACM)	I Us	ed So	lely by	Asbesto	s Containing Mate	rial (ACM)	Amount	R	R	m	To
IN Facility		Cu	stodial	Staff?		hermal systems ins	ulation.	(Specify	Removal	Repair	Cap	ciiciosure
(13)			(12)		1 ,	surfacing, VAT, of other miscellaneou	5)	SF or LF)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	-	Encapsulate	Sure
		Yes	No	N/A			,		1		ate	1 "
ASE 5A - LEVELS C & B				×	PIPE INSU	LATION		454545	+=	-		
ASE 5A - LEVELS C & B					1			1010 LF				
					FLOOR III	LE & MASTIC		3,057 SF				
ASE 5A - LEVELS C & B				\boxtimes	Packed fitt	ings on fibergla	ss	285 EA	Ø			
ASE 5A - LEVELS C & B				\boxtimes	Hanger pag	ds on fiberglass			-			
e of Registered Waste Hauler			N.	IDEP V				40 EA	\boxtimes	Ц		
RVICE TRANSPORT GRO	UP, INC		Ha	uler ID	No. Wa	cto	ame of Registered					
State				20990			MINERVA LAND	JHILL				
W CASTLE, DE					Dis		ty, State					
pleted By (Print or Type)	T:01-						WAYNESBURG	, OH				
IAN SCAFIRO	Title					Signature	1	Date	,			_
INTO GUALINO	ES	TIMA	OR			Brian So	white 1.	1 6	/11.	/10	7	
REIDAGLI						7	11-17	/	10/			

Date of Notification (1)				Nome of	D. italia G								J	
	/	17		TRUS	Building Owner/Opera TEES OF PRINCET	tor (2)	Tr	anney.	P	<u></u>	IP.	П	1/7	7 1
	Notificatio					UN UNIVERS	YTI			C	E		\mathbb{W}	
⊠ EPA ⊠ Init				Street Ad	dress .M DRIVE			3	7					
	ended								-	SEP	2	7	201	77
☑ DOH Am	endment	#2-6/1	6/17	100	ETON N. 1005		- Landerson	IL	To the same	ULI		1	201	1
(NJAC 5:23-8) just	ergency (ification)	ncludi	ng	Name of C	ETON, NJ 08544									
	cellation				RT ORTEGO		rance	Tel	epho	nedlu	nbe	CON	ITR	OL
				1			area.	6	09-2	58418	41	SiN	g_	Manual
Name of Facility Where Abatemer	nt is Takin	o Plac	e (3)	FACILI	TY INFORMATION						=			
PRINCETON UNIVERSITY	FIREST	ONE	I IRR	6DV		Type of Faci								
Street Address		OILE	LIDIO	31(1		School (K	-12)	101h			20			
1 WASHINGTON ROAD						Subchapte Other (i.e.	Dri	vate	er tha	n K-1	2) rcia	l bui	din	25
City (5)		-				Homes, et	.C.)				1016	DUI	Onig	10,
PRINCETON, NJ						Square Feet		# 0	f Floo	ors		Bld	2. A	ge
County (6)				County Co	1 /7 /07 / 77	1,000,000		8				7)	
MERCER				County Co.	de (7)(STATE USE ONLY)	l v	Prio	if be	eing d	emolis	hec	1)		
Name of Monitoring Firm Hired by E	Building O	wner/	8) 14	CC64 LI	1	UNIVERSI	TY	LIBE	RARY	1				
ATC GROUP SERVICES LLC		wilei (0)	SCM No.	Name of Abatem									_
Street Address				00098		VIRONMENT	AL,	INC	•					
3 TERRI LANE					Street Address									
City, State, Zip Code					1123 BEAVE									
BURLINGTON, NJ 08016					City, State, Zip Co						-			
Project Manager for Monitoring Firm					BRISTOL, PA	19007								
MICHAEL R. KEEHN				one No.	Telephone No.			Licer	nse N	0.				
Start Date (10)	Cabadul			386-8800	215-788-6040			00	509					
3 / 13 / 17				n Date (11)	Name of OSHA Mi							-	-	
				/ _17_	BRISTOL ENV	TRONMENTAL	L, It	VC						
Occupancy Status During Abatement	(Check o	nly one	e)		Street Address							-		-
☐ Facility Closed/Vacated During En	ire Period	of Ab	atemer	nt -	1123 BEAVR S	TREET								
Time of Abatement: 4:00AM-12:3	OPM/	CIIITY H	lours -	Describe	City, State, Zip Coo	le		-						_
		. 101		_AIVI	BRISTOL, PA	9007								
Scope of Work (Check all that apply)								0.70						
≥3 sf or ≥3 lf	\boxtimes	Renov	ation			nment with Nega	tive	Pres	ssure					
☑ ≥160 sf or ≥260 lf		Demo	lition		☐ Mini-Enclos									
					☐ Non-Exemp	oted (*) and Non-	Fria	ble F	Proced	dure				
Location of		Is Loc									Aha	teme	nt 7	-
Asbestos-Containing Material (ACM	U	sed So	olely by	Acha	Description of					_	_	7		-
TO BE ABATED	, h	hainter	nance/	/i.e	stos Containing Mater , thermal systems ins	al (ACM)		Amoi		á		Repair	nc	
IN Facility (13)	1 0	istodia (12	I Staff?	,	surfacing, VAT, or			Spec F or		Nernoval		air	aps	o da d
()	Yes				other miscellaneous)			,	=			Encapsulate	0
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			Ø	ACOUS	TICAL CEILING PL	ASTER	60	75	SF		I	7 1	7	F
HASE 6 - LEVEL 1				PIPE INS	SULATION		2	00 L	F	Ø	-	7/1	7	$\overline{\Gamma}$
ASE 6 - LEVEL 1			\boxtimes	SPLINE	CEILING TILES		40	5 0 S	SF.			7/5	7	
USTREES READING RM MEZZ.			\boxtimes	ACOUST	ICAL PLASTER CE	ILING		0 S			-	7 [7	
me of Registered Waste Hauler			JDEP		Cubic Yards of Na	ame of Registere					_	7	1	
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EW CASTLE, DE					120 1 1 100	VAYNESBURG	2 0	14						
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	ESTIMA	TOR				n: 1.	1	,	Dat			/	_	3
1					Brian Sc.	Low / y	K		1 4	/16	/	17	/	

Date of Notification (1)				Name of E	Building Owne	er/Operet	2- (2)						1
2 / 27	_ / _	17		TRUST	EES OF PR	HINCETA	OF (2)						
Agencies Notified Type	Notifica	tion	_	Character of the		MUEIC	אואט אכ	ERSIT	E G		11	WI	
⊠ EPA ⊠ Init		11011		Street Ago	ress			UJI		10	IJ	17 E	7.1
Ø DOLWD ⊠ Am	ended			-	W DRIVE		1						11
Ø DOH Am		nt #1-	3/27/17	City, State,					SFF	2 2	7 31	177	-11
☑ DCA □ Em	ergenc	y (inclu	ding	PRINCE	TON, NJ 08	544	100	had had	0.21		41	/1/	11
	ification			Name of Co	ontact		-		7= :				
L Can	cellatio	n		ROBERT	ORTEGO		1	A	SBES 605	OS C	Sumt	er Hol	3
					YINFORMA	TIOU			605	258	1861	ſ	(40)
Name of Facility Where Abatemen	t is Tal	king PI	ace (3)		THEFORMA	HON	1=-						
PRINCETON UNIVERSITY -	FIRE	STON	ELIBE	24BY			Type of	Facility	(4)				
Street Address							Scho	001 (K-12)				
1 WASHINGTON ROAD							Subc	r lie n	Other	than K	-12)		
City (5)							Othe home	es, etc.)	ivate and	o com	nerci	al build	dings
PRINCETON, NJ							Square F	eet	# of F	loore		TOIL	
County (6)						1	1,000,		8	0015		Blog	
				County Code	(7)(STATE USE	EONLY						70	
MERCER						,	Current U	BOITH	r if being LIBRAI	oemo	ilishei	d)	
Name of Monitoring Firm Hired by Bu	uilding	Owner	(8)	ASCM No.	Name of A	Shalemer	of Contra-	100117	LIBRAI	KY.			
ATC GROUP SERVICES LLC				00098	RRIGHT	OF EFINA	" COULLSC	101 (9)		4000			
Street Address					Steer 6	JL ERV	IRONME	NTAL,	INC.				
3 TERRI LANE					Street Add			157-00-					
City, State, Zip Code							STREET	•					
BURLINGTON, NJ 08016					City, State,	Zip Code	е						
Project Manager for Monitoring Firm					BRISTO	L, PA 1	9007						
			M	one No.	Telephone I	No.		- 11	icense f				
MICHAEL R. KEEHN				386-8800	215-788-	6040	74	1.					
Start Date (10)	chedu	ed Co	mpletion	Date (11)	Name of OS		for		00509				
3 / 13 / 17	8	_ / .	1	/ 17	BRISTOL			F41					
Occupancy Status During Abatement (C	heck o	nly on	0)				OR WENT	IRL, IN	С				
Facility Closed/Vacated During Entire	Perin	d of At	stemon	. 1	Street Addre								
Abatement Performed Outside of Nor	mal Fa	cility H	loure t)0000ih-	1123 BEA		REET						
Time of Abatement: 4:00AM-12:30F	M/	PM	- 10012 - E	AM	City, State, Zi	p Code							
				73.00	BRISTOL,	PA 190	07						
cope of Work (Check all that apply)													
≥3 sf or ≥3 ff	N	Renov	otion			ontainme	ent with Ne	egative F	Pressure	8			
≥160 sf or ≥260 ff		Demol	ition		10111111-6	-110105016		5-4.701	1033016	8			
	1075				Ø Glove	pag Proc	edure	2					
		Is Loc	ation	T		.xempleo	(*) and No	on-Friab	e Proce	dure			
Location of		Nom	ally		Doggaintin					1	Abate	ment '	Type
Asbestos-Containing Material (ACM)	Us	ed So	lely by	Asbestos	Description Containing &	1 Oî Katorial //	60661					-	-
TO BE ABATED IN Facility	Cu	ainten	ance/ Staff?	(i.e., the	ermal system	s insulation	on		nount	Kemoval	Kepair	Encapsulate	Enclosure
(13)	00.	(12)			surfacing, VA	T, or		SF.	oecify or LF)	OV	1 =	sde	los
- U	Yes	No	N/A	ot	her miscellan	eous)	1		J. L.)	=	1	ula	re
SE 5A - LEVELS C & B			N/A	DIDE WALL	4 97/611							le le	
SE 5A - LEVELS C & B				PIPE INSUL				101	0 LF	Ø			
SE 5A - LEVELS C & B		7	-	FLOOR TILE				43,05	7 SF	Ø			
SE 5A - LEVELS C & B				Packed fittin				285	EA	Ø			\neg
of Registered Waste Hauler				Kanger pads	on fibergla	255		40 E	A	Ø		nt.	\exists
			DEP W		Yards of	Name	of Register				ш		
VICE TRANSPORT GROUP, INC.	į		uler ID I	Vo. Waste		MINE	ERVA LA	OU LANG	1111				1
ate		2	0990	Dia	and Day		and the second second	NUFIL	-				1
CASTLE, DE				Dispo	sal Date	City, Sta		3-150					-
4-15 (D:)					1	WAY	KESBUR	G, OH					
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Cleck	16927

Date of Notification (1) 9/22/17			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	me of Buildin		/Operator	(2)			2 4			
	T. N. CO.			oodul Diak	ite								
Agencies Notified	Type Notification	1	Str	eet Address			1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	0	BIN	E	77		
EPA DEB	× Initial		City	Ctota 7in (Cada		111114	U/F	La U U	129			
DEP X DOL	Amended Amendmer	nt#		y, State, Zip or ersey City,				REP	2 7 201	7	A CHARLES		
_	Emergency	(including		me of Contac				-		1	111		
DOH DCA	justification Cancellatio		100000000000000000000000000000000000000	narlotte Dia			1203	16	elephone N	umber			
	L Gariotilatio			FACILITY IN	6-03/7-60-3	TION	S company	1.00 TO 10.00	DESCRIPTION OF THE PROPERTY OF		- 1		
Name of Facility Where	Abatement is Taki	ng Place (3)		/\OILITTIN	ORMA	11011	Type of Facility	(4)					
House							School (K-1	12)					
Street Address							Subchapter Other (i.e., p	8 (Ot			ildings	s, hon	nes,
City (5)							etc.) Square Feet	# (of Floors		Bldg.	Age	
Jersey City							2000	2		91.3	73	.5	
County (6)				inty Code (7)			Current Use (Pri	or if be	eing demoli	shed)			
Hudson			(ST)	ATE USE ONL	Y)								
Name of Monitoring Firm	n Hired by Building	Owner (8)	A	SCM No.		Name	of Abatement Cor	ntracto	r (9)				
						ABS	Environmenta	al Ser	vices, LL	.C			
Street Address							Address				Wite-tule-		
							30x 483, 4 E G	Sate D	Drive				
City, State, Zip Code						0.000	tate, Zip Code	140					
Project Manager for Mor	aitoring Firm		Tale	mbana Na			wood, NJ 074	118	T.::			<u> </u>	
Toject Manager for Mor	illoring Firm		1 616	ephone No.			none No. 764-2276		License 703	No.			
Start Date (10)		Scheduled	Comple	tion Date (11)	Name	of OSHA Monitor		L				
10/02/17		10/30/17				0-0000 0000000							
Occupancy Status Durin	g Abatement (Che	ck Only One)				Street	Address						
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Nor	Period of Abamal Facility Ho	atement ours		-	City, S	tate, Zip Code						
Scope of Work (Check A	II That Apply)					1.7				-			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			ovation nolition			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				re	
		Islo	cation									emer	nt
Location	n of	Norr	mally		De	escription	of				Т	ype	
Asbestos-Containing TO BE AB In Facil (13)	ATED	Mainte Custodi	Solely by enance/ al Staff (2)	Asbe (i.e	stos Con therma surfa	taining M	laterial (ACM) s insulation, T, or	(Amount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes N	10 N	I/A						=		ite	9
Basem	ent			x	Pipe	Insula	tion	(90 LF	×			
Name of David													
Name of Registered Was	sie nauler			P Waste r ID No.	Cubic of Wa	Yards	1000000	- 2	ered Landfi				
Freehold Cartage			1593		TBD		Wester	n Ber	ks Landf	ill			
City, State Freehold, NJ					Dispo	sal Date	City, State Birdsbo		Α			-	
Completed by		Title				Signature		-, ,		ate			
A. Scott Higgins		Preside	nt				len	_		9/22/1	7		

D. L. Chi. Co. J. Chi.								UN	10	10	N	1
Date of Notification (1) 9/22/17				of Buildin		/Operator	(2)	100 100 100	103 77 73:	y Pali		7
Agencies Notified Type Notification	on		-	at Turgu	THOV		1		E II W	E	Con-	
X EPA X Initial			Ollock	71441033				(C.D	2 7 201	g-or-	Total Care	and the same of th
DEP Amended			City, S	State, Zip (Code				0 1 601	-	11	ļ
X DOL Amendme	ent # cy (includin		Sado	dle Broo	k, J 07	663		Dy		1	and.	
DOH justificatio	n)	y	1	of Contac					one Numb	er	Sections	1
DCA Cancellati	on		1000000	at Tugur								
Name of Facility Where Abatement is Tal	king Place	(3)	FAC	CILITY IN	ORMAT	ION	Type of Facili	h. (4)				
Housse		1-7					Towns 1	5 105				
Street Address							School (K-12) Iter 8 (Other th	an K-12)			
							X Other (i.e.	e. private & co	mmercial I	ouildin	gs,	hom
City (5)							etc.) Square Feet	# of Flo	ors	Bldg	1. At	ae
Saddle Brook							2100	2		69		, -
County (6) Bergen			County	Code (7)	V1		Current Use (Prior if being d	emolished	1)		
Name of Monitoring Firm Hired by Building	a O	,,			"							
Traine of Monitoring Firm Three by Building	g Owner (8	5)	ASC	M No.			of Abatement (-11000
Street Address		20 111111					Environmer Address	ital Services	s, LLC			
							Rox 483, 4 E	Gate Drive				
City, State, Zip Code						-	tate, Zip Code	Oate Drive	ě		-	
							wood, NJ 0	7418				
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one No.		ense No.	-		
Start Date (10)						973-7	764-2276	70	3			
9/30/17	10/30		mpletion	Date (11)		Name o	of OSHA Monito	or				22020
Occupancy Status During Abatement (Che	1											
Facility Closed/Vacated During Entire						Street A	Address					
Abatement Performed Outside of Nor	mal Facilit	Abater y Hour	nent s			City St	ate, Zip Code					
X Other - Describe: exterior						Only, On	ate, zip code					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf		Renova	ation				Full Contain	ment with Neg	ative Pres	curo		
× ≥160 sf or ≥260 lf		Demoli	tion			H	Mini-Enclosu	ire	auve 1 165	sure		
	-			Y		×	Glovebag Pr Non-Exempt	ocedure ed (*) and Nor	n-Friable F	roced	ure	
	1.0	Locat										nent
Location of		Normal ed Sole			Des	scription o	of				Гурс	2
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/	Asbes	tos Conta	aining Ma	aterial (ACM) insulation,	Amoun				tii
In Facility (13)	Cus	todial S (12)	Staff?	(surfac	ing, VAT	, or	(Specif SF or Li		Repair		cap
(10)			1		other m	iscellane	ous)		Ova	ar		Encapsulate
	Yes	No	N/A									œ
exterior			X		exter	ior sidir	ng	1000 S	F x			
										-	1	
										-		
											+	-
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Y	/ards	Name or	Registered La	andfill			
reehold Cartage		1753505	auler ID	No.	of Wast		li s	VS/FAIRLES		DEII		
City, State		1:	5939		TBD	al Data			JO LAIN		L.	
reehold, NJ					Disposa TBD	ai Date	City, Sta	^{te} ville, PA				
Completed by	Title					gnature	NOTIS	ville, FA	Doto			
A. Scott Higgins	Presi	dent			Jig	J. 101010	M		Date 9/22/	17		

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MU# 242	1441608		ursuant	t to NJAC	8:60 an	id 12:12	0)	ı	- American	كا قال	T.	- Conservation	W	149	Contraction of the Contraction o	
Date of Notification (1)					of Building			(2)			SEF	21	7 21	Service Commends	TO STATE OF THE PARTY OF THE PA	
09/20/17	1				ier Deve	elopers	3			/			9 101	0.1251	100	Separate Sep
Agencies Notified	Type Notification	1		Street A						Ly	-	and the same				Cline acts
▼ EPA	☐ Initial				Sylvan A		, Suite	300		-14-180	Personal security distriction.		to ten il mi		OF BUILDING	!
DEP DOL	Amended				ate, Zip C											
DOL	Amendmen Emergency				ewood C		J 0763	2		<u> </u>						
DOH	justification)	•		of Contact						lephone N					
☐ DCA	Cancellation	n			Stankov					97	73-390-	7113	V.			
Name of Facility Where	Abatament is Takir	a Place	/2)	FAC	ILITY INF	ORMAT	ION	T	a of Easility	(4)						
Residence	Abatement is Takii	ig Flace	(3)					Тур	e of Facility	(4)						
Street Address								H	School (K- Subchapte			40)				
Olicet Address								岗	Other (i.e.	private	& comme	rcial b	uildi	inas.	home	es.
City (E)									etc.)					- X		**
City (5) Fort Lee									are Feet	# 0	f Floors			dg. A	ge	
								1,7			2		1 52)+-		
County (6)					Code (7) USE ONLY	2		2007-0	rent Use (Pr	rior if bei	ing demo	lished))			
Bergen	11: 1/ 5 11:	<u> </u>				/			sidence							
Name of Monitoring Firm N/A	n Hirea by Building	Owner (8	3)	ASC	И No.		1		atement Co							
Street Address								0.000	k Solutior	ns, LLC	<i>.</i>					
Street Address							Street	and house of	7.7.7							
City Chata 71- O. I									l Drive							
City, State, Zip Code									Zip Code							
Desired Manager Co. M.							111111111111111111111111111111111111111		NJ 07461							
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Teleph				License					
Start Date (10)		Colord	11-0	1 - 1	D . (44)			0.00	1650		01309	,				
09/21/16		9/25/		npietion	Date (11)		A MARTINES		HA Monitor	r						
Occupancy Status Durin	a Abatamant (Cha	100000000000000000000000000000000000000					Ame									
							Street			aat						
X Facility Closed/Vac	cated During Entire ned Outside of Norr	Period of	Abaten	nent					30th Stre	et						
Other – Describe:	ly Hours	•					Zip Code	24.0								
Scope of Work (Check A	All That Apply)						New	YOI	k, NY 100	110						
	чи тпас Арріу)						_	1								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demolit	100000000000000000000000000000000000000			F		ıll Containm ini-Enclosur		Negative	e Pres	sure	9		
[A] = 100 (101 = 100 II			Domone	1011				GI	ovebag Pro	cedure						
							X	No	on-Exempte	ed (*) and	d Non-Fri	able P	roce	edure	9	
Is Location													Α		ment	
	Location of Normally Used Solely by						scription					-	T	Ту	pe	
Asbestos-Containing TO BE AB		Ma	aintenar	nce/		tos Cont thermal			al (ACM)	200	mount Specify	١,	,		Ē	Ш
In Faci		Cus	stodial S (12)	Staff?	(1.0.		cing, VA		auon,		or LF)	Kelliova		Repair	Encapsulate	Enclosure
(13)			(12)			other n	niscellan	eous)			**	OVA		air	sula	Sur
			No	N/A								-			te	Ф
Exter	ior		x			trans	site sid	ina		2.00	00 S.F.	x	1			
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		-											_			
Name of Registered Wa	ste Hauler		N	JDEP W	aste	Cubic	Yards		Name of	Registe	red Land	fill				
Atlantic Carting			100000	auler ID	No.	of Was			G.R.O	WS						
City, State			13	90713		Disco	10									
Wayne, NJ						0.0000000000000000000000000000000000000	al Date	nn.	City, Stat		٨					
Completed by		Title					mpletio		Morris	ville, P.		2-4:				
Bilyana Stankovic		17/10/20/20	sident			0	ignature		Stan	· ha	. 1	Date 09/20	7/4	7		
,		1 100	Judin			0	uya	nue	Juin	HOU	w	05/20	111	1		

Print Form

PAID

CIC# 1415			CATIO	State of No N OF ASI It to NJAC	BESTOS	ABATE		45. A. M.		E G		W		Control of the last of the las
Date of Notification (1) 09/20/2017			Name o	of Building Jence	Owner/	Operato	r (2)		A The processors of the state o	SEP	2 7	2017		THE PERSON NAMED IN
Agencies Notified Type Notification			Street /	Address					1111				1	71
X EPA X Initial									By		Particular and the	-		- 1
▼ DEP		Ī		tate, Zip C						20.00				
X DOL Amendment Emergency (_	Westf	field, N.	J. 0709	0								
DOH justification)	ricidani	9		of Contact					Tel	ephone N	lumber			
DCA Cancellation			TO PROPERTY	eth Bat	400000000000000000000000000000000000000									
Name of Facility Where Abatement is Taking	Place	(3)	FAC	ILITY INF	ORMAT	ION	Time	- f F 10t - / 41				one U.S.		
Residence	, , , , , , ,	,					_	of Facility (4)						
Street Address							S	chool (K-12 subchapter 8	(Oth	orthan V	12)			
							X C	other (i.e. pri	vate 8	& comme	rcial bu	ildings	, hom	es,
City (5)							_ е	tc.)						especial control
Westfield							1,892		2	f Floors	- 1	Bldg 71	Age	
County (6)			County	Code (7)		_		t Use (Prior	No.	na demol	1	r 1		
Union			(STATE	USE ONLY)		Carron	1011 1) 000 11	II DCI	ng demoi	isi icu)			
Name of Monitoring Firm Hired by Building C	wner (8)	ASCI	M No.		Name	of Abate	ement Contr	actor	(9)				
A. Seine Lighthouse Solutions								k Services		1 -7				
Street Address						Street	Address	3						
PO Box 354						1256	Libert	y Avenue						
City, State, Zip Code South Orange, NJ 07079							state, Zip	Code 07205						
Project Manager for Monitoring Firm			Telepho	ne No			none No.							
Sarah Calandra				49-2666			1612-74			License 01316	No.			
Start Date (10)	Schedu			Date (11)		, a = 2, c + 3 e c = 0		A Monitor		01010				
	10/19/			,		100000000000000000000000000000000000000		ghthouse	Solu	tions				
Occupancy Status During Abatement (Check	Only O	ne)					Address	Fall Carrier Control						
Facility Closed/Vacated During Entire Po	eriod of	Abaten	nent			PO B	ox 354	1						
Abatement Performed Outside of Norma Other – Describe:	al Facilit	y Hours	3			City, S	tate, Zip	Code						
					-	Sout	h Oran	ge, NJ 07	079					
Scope of Work (Check All That Apply)							5400							
≥3 sf or ≥3 lf	HERMANNIA.	Renova					Full	Containmen	with	Negative	Pressi	ıre		
≥160 sf or ≥260 lf		Demolit	ion			×	Mini-	Enclosure ebag Proced						
					2		Non-	Exempted (anc	Non-Fria	able Pro	cedu	е	
	Is	Locati	on						di ma				ement	8
Location of		Normali ed Sole				scription						Ty	/pe	
Asbestos-Containing Material (ACM) TO BE ABATED		intenar			tos Cont					nount			ш	m
In Facility	Cus	todial S	Staff?	(1.6.	thermal surfac	systems cing, VA		on,		pecify or LF)	Ren	Re	ncap	ncl
(13)		(12)			other n	niscellan	eous)		0.	0, 2,	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								<u> =</u>		ate	гe
Basement		Х			pip	oe wrap	0		8	BLF	X			
											-	-		
Name of Registered Waste Hauler		1 40	IDECT	la atr	0.1.									
			JDEP W auler ID		Cubic of Was		- 1	Name of Re						
Newark Carting			509	50.58738 ¹		17.T.O		Waste Ma	nag	ement l	_andf	11		
City, State					Dispos	al Date		City, State						
East Orange, NJ						Λ .		Penn Arg	yle, l	PA				
Completed by Alison Lamers	Title				Si	gnature	AAI I	111			ate	1/		
CHOOLI CALLETS	Office	e Man	ager		1	NIA	MIN	(N)		0	9/20/	2017		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

NI MX		NOTI	FICATION Pursuar	ON OF AS	BESTOS 2 8:60 a	S ABATE nd 12:12	MENT 0)			arra arr					
Date of Notification (1)				of Building					T	CHECK	-		/ 	177 T	Total
09-20-17				Jersey 1				ny	inchesia jaron	1)15	W	G	The state of	y L	5
Agencies Notified Type Notification EPA Initial	n		100000000000000000000000000000000000000	Address Wyckof	f Road				Charter of carriers in an	Lancacione de la constante de	SEP	2	7 21	17	A CONTRACTOR
DEP Amended Amendme	nt#			State, Zip C					1	15 ·					
X DOH Emergence		g		of Contact				_	To	loobon	- NI		APPENDING TO SERVICE	*****	
DCA Cancellation			1	Merenda						lephon 32-919					
Name of Facility Where Abatement is Tak	ing Place	(2)	FAC	CILITY INF	ORMAT	TION									
New Jersey Natural Gas Compar	1y	(3)						of Facility	983						
Street Address 581 Highland Parkway								School (K- Subchapte Other (i.e.	r 8 (Oth	ner than & com	n K-12 merci	2) al bui	ldings	s, hon	nes,
City (5) Toms River, NJ 08753								tc.) e Feet	# 0 N/	f Floor:	s		Bldg.	Age	
County (6) Ocean			County (STATE	Code (7)	()		Currer	nt Use (Pri	or if be		nolish	- 18	1//		
Name of Monitoring Firm Hired by Building	Owner (8	3)	1100	M No.	· —		of Abat	Distribut	ntractor						
Arcturus Environmental Services, Street Address	LLC.					Pinna Street		nvironm	ental	Corp.		Name and			
9 Prince William Road								Street							
City, State, Zip Code Morganville, NJ 07751						City, St Carls		Code NJ 0707	2						
Project Manager for Monitoring Firm Frank Tamargo			Telepho	one No. 617-927	'a	Telepho 201-9	one No			Licen) .			
Start Date (10) 09-22-17			2.50	Date (11)		Name o	of OSH	A Monitor		0075	00				
Table Street Control of the Control	-22-17 10-31-17 upancy Status During Abatement (Check Only One)							C.							
Facility Closed/Vacated During Entire	J-00010-10010 - 14001		nant			Street A 10-59		son Ave	nue						
Abatement Performed Outside of Nor Other – Describe:	mal Facilit	y Hours	S			City, Sta	ate, Zip	Code							
Scope of Work (Check All That Apply)						Long	isiand	City, N	Y 111	01					
≥3 sf or ≥3 if × ≥160 sf or ≥260 if		Renova Demolit				×	Mini- Glov	Containme Enclosure ebag Proc Exempted	edure					e	
	17.00	Locati											Abate	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Normal ed Sole sintenar todial S (12)	ly by nce/	Asbest (i.e.	tos Cont thermal surfac	scription of aining Ma systems i cing, VAT niscellane	aterial (/ insulation, or	ACM) on,	(S	mount pecify or LF)		Remova	Repair	e Encapsulate	Enclosure	
V ₂₀ <27	Yes	No	N/A		outer it	nscenarie	ous)					val	air	ulate	sure
Exterior - rubble pile			х		Trans	ite Pipir	ng /								
				Co	oncrete	Encas	emen		20	0SF		х			
Exterior - pipe located in trench			х		Transi	te Pipe	and								
Name of Degistered Wests Haute						rapped (•		OLF		x			
Name of Registered Waste Hauler Freehold Cartage		H	JDEP W auler ID J-113		of Was		100	Name of R							
City, State Freehold, NJ 07728		1.40			Disposi	al Date	(City, State							
Completed by	Title				2000	gnature		Morrisvil	ie, PA	1906	-				
Richard Doran	100000000000000000000000000000000000000	ct Ma	nager				(d	1)	-		Date		7		

NOCK		NOTI	FICATIO	ON OF ASBE	ESTOS 8:60 an	ABATE! d 12:120	MEN)	IT		CHECK	# 5	97() /	2458	38
Date of Notification (1) 09-20-17				of Building (Edison	Owner/C	Operator	(2)		and the same of	part you	TF	- T	116	TE	
Agencies Notified Type Notification			Street	Address					Total Control)E C	i li	1 1	l W	I Long	And the second s
EPA Initial Amended				ng Place tate, Zip Coo	de				Salar) SE	P 2	1	20	1	
X DOL Amendmen	(including		New	York, NY						L.					المستا
DOH justification Cancellation				of Contact Fullum						lephone 46-306-			-	maryers after a con-	
Name of Facility Where Abatement is Takir	ng Place ((3)	FAC	ILITY INFO	RMATI	ON	Tues	a of E 1114							
Pole #61020/35894	g , 1200 (,					тур	e of Facility School (K	2000						
Street Address 52 Briarwood Avenue							×	Subchapt Other (i.e. etc.)	er 8 (Oth	ner than I & comm	K-12) ercial	bui	lding	s, hon	nes,
City (5) Norwood, NJ							Squ	are Feet	# 0	of Floors			3ldg.	Age	
County (6) Bergen			County (STATE	Code (7) USE ONLY)			Curr	rent Use (P ity Pole	rior if be	ing demo	olishe	:d)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCI	M No.		Name o	f Ab	atement Co	ontractor	(9)					
Street Address						Street A	ddre	ess	Terital	Corp.		_			
City, State, Zip Code								d Street							
								Zip Code NJ 0707	72						
Project Manager for Monitoring Firm			Telepho	ne No.		Telepho 201-93				License					
Start Date (10) 09-21-17(1)09-22-17			npletion	Date (11)		Name of	OS	HA Monitor		00730	,	-			
Occupancy Status During Abatement (Chec	10-31- k Only Or					EMSL Street A		alytical, I	nc.						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of A	Abaten	nent			307 W	est	38th Stre	eet						
Other – Describe:					-			, NY 100	18						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Pemolit				X	Fu Mir Glo	tact Remo Il Containm ni-Enclosur ovebag Pro n-Exempte	ent with e cedure					e	
Location of	120000	Locati Iormal	(T) (S)		552.0									ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intenar odial S (12)	ly by nce/		Contai ermal sy surfacir	ription of ning Mat ystems ir ng, VAT, scellaned	erial Isula or		(S	mount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
Exterior: Dala #64000/05004	Yes	No	N/A											te	œ
Exterior: Pole #61020/35894			X		Tra	insite			2	0LF	- 2	K			
Name of Registered Waste Hauler		N.	JDEP Wa	aste C	Cubic Ya	ırds		Name of I	Register	ed Landf	fill				
ATC, Inc. / JBT (50071)			auler ID 1 310	1000	f Waste BD			Minerva			***				
City, State Shirley, NY / Bronx, NY				11000	isposal BD	Date		City, State		OH 446	886		- T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
Completed by Kevin Moriarty	Title Projec	t Mai	nager		Sigr	áture		184	<u>t</u>		Date 09-20)-1	7		

State of New Jersey - Notification of Asbestos Abatement PAID

C	#30	16 (Pu	rsuant to N.J.A.	<u>.C</u> . 8:60-7 and 12:120-7)		5 5	IVE		
Date of Notification (1) September 21, 2017				Name of Building Owner Butler Board of E			7 2017	A Company of the Comp	
Agencies Notified X EPA x DCA x DOL X DEP		ification Type Initial Not Inended Ce Emergency justification	rtification (including	Street Address 38 Bartholdi Aveni City. State. Zip Code Butler, NJ, 07405 Name of Contact		AND THE PROPERTY OF THE PROPER	and the Park Mark Construction of the 17		
x DOH		Cancelled		Barbara Murphy		973.49	e <u>Number</u> 2.2025		
Name of Facility Where Abatemen Butler High School	nt is Taking Pla	ace (3)	FACILITY II	NFORMATION Type of Facility (4) School (K-12)					
Street Address 38 Bartholdi Avenue	West of the second			Other (i.e. private & co	mmercial bui	ldings, homes	, etc.)		
Butler	unty (6) orris	(Stat	nty Code (7) e Use Only)	Sq. Feet: Unknown Current Use (prior if being			<u>Age:</u> 80 y	ears/	
Name of Monitoring Firm Hired by EnviroVision Consults	Bldg. Owner ((8) ASCI	M No. 079	Name of Contractor (9) GREENWOOD ABAT	TEMENT C	ONSIII TA	NTC INC		
Street Address 20-21 Wagaraw Road, B	ldg # 35 E			Street Address 511 MAIN STREET	LINEINIC	ONSOLIA	NN 13, INC.		
City, State, Zip Code Fairlawn, NJ 07410				City State, ZipCode Butler, NJ 07405					
Project Manager for Monitoring Fir Fred Larson		hone Number 3-636-9145		Telephone Number		License Nu	mber		
Scheduled Start Date (10) October 9, 2017		duled Complet ober 10, 20		973-492-0477 Name of OSHA Monitor		00840			
Occupancy Status During Abate	ment (Check	only one)		EMSL inc. Street Address					
Facility Closed/Vacated Do Abatement Performed Out Describe	uring Entire P side of Norma	Period of Abate al Facility Hou	ement irs -	1056 Stelton Road					
Other – Describe: Vacar	ıt			City, State, Zip Code Piscataway, NJ 088	354				
Source of Work (Check all that app	ly)								
≥ 3 sf or ≥ 3 lf □≥ 160 sf or ≥ 260			Renovation Demolition		Full Contai Mini-Enclo Glovebag F xNon-Exer	sure Procedure	legative Pres I Non-Friable		odura
Location of Asbestos-Containing Material (ACM) in Facility (13)	Solely by Ma Staff? (12)	Normally Used aint./Custodial	Description of As (ACM) (i.e. therm VAT, or other mis	bestos Containing Material nal systems insulation, surfacin ccell.)	Amour	t Abat	ement Type ove Repair En		
Auditorium		X	VAT & Masti	С	9 sf	X			
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	NJDEF See B	P Waste Haule Below	r ID#	Cubic Yards of Waste:			gistered Landf	ill l	-
Hauler #1) Greenwood Al NJ DEP # 1250 Hauler #2) Newark Carting	61				Disposal Da October		City, State Route 2, Bo Bridgeport, 1 304-842-278	MVA	
Completed by (Print or Type) Marin Graure	SENIO MANA	R PROJEC GER	т	Signature Maria Graure		Date Septemb	er 21, 201	7	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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-		Jà.	110

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Date of Notification (1)	201		1		f Building		NACCE OF STREET STREET					E	Cul	Control of	
09/20/2017					Erwin		ē .				10)	SEP	2 *	7 20	17
Agencies Notified T	Type Notification			Street A	ddress						The state of the s	of the !	ray		9
X EPA	× Initial										134				
DEP	Amended	501	Ī		ate, Zip Co						Ornale or an an	manus and a	tani (18 mile nitri)		474.04
X DOL	Amendment # Emergency (in		_ [dale, NJ	07401				and the second			167/0 Septe		
□ DOH	justification)	loluding			f Contact					Tele	phone Nur	nber			
☐ DCA L	Cancellation			and the second second	Erwin										
Name of Facility Where Ab	atement is Taking	Place (3)	FACI	ILITY INFO	DRMAT	ION	Type of	Facility (4	1)					
Frank Erwin	atement is raking	riace ())					_		0 5 00					
Street Address									nool (K-12		er than K-12	2)			
								x Oth	er (i.e. pr		commercia		dings,	home	es,
City (5)								Square I		1 # 05	Floors		Ida A	~~	
Allendale, NJ 07401								Square	-eet	# 01	Floors		lldg. A	ge	
County (6)				County	Code (7)			Current	Isa (Prio	r if hair	ng demolish	od)		_	
Bergen County, NJ					USE ONLY)			Ourient	036 (1110	i ii beli	ig demonsi	ieu)			
Name of Monitoring Firm H	ired by Building O	wner (8)		ASCN	/ No		Name	of Abaten	nent Cont	tractor	(9)				
NJ Abatement Service				1	,, ,,,,,			bateme			*				
Street Address								Address	0011	1000					
41 Wyckoff Avenue								Vyckoff /	Ave						
City, State, Zip Code			1-20 1.0					tate, Zip (in the second						-
Wyckoff New Jersey	07481						1 20 22 3	koff Nev		v 074	81				
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(Pursuant to NJAC 8:60 and 12:120) Date of Notification Name of Building Owner/Operator (2) 9-19-2017 Dixon Projects Agencies Notified Type Notification Street Address 140 Broadway, 28th Floor **EPA** Initial DEP City, State, Zip Code Amended × DOL Amendment # New York, NY 10005 Emergency (including × Name of Contact DOH justification) Telephone Number DCA Noah Howard Cancellation 1212-217-4250 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residential School (K-12) Street Address Subchapter 8 (Other than K-12) × Other (i.e. private & commercial buildings, homes. etc.) City (5) Square Feet # of Floors Bldg. Age Jersey City, NJ 07307 1773 2 117+ County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Hudson Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Green Environmental Services, LLC Street Address Street Address 235 Virginia Avenue City, State, Zip Code City, State, Zip Code Jersey City, NJ 07304 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201-333-8855 01174 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 9-20-2017 9-20-2017 Same as above Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure × ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Remova Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Foyer X Floor tile 100 SF x Basement Pipe insulation X 60 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Green Environmental Services, LLC G.R.O.W.S North Landfill 0034889 2 City, State Disposal Date City, State Jersey City, NJ 9-20-2017 Morrisville, PA Completed by Title Signature Date

Office manager

Liliana Serrano

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9-19-2017

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Date of Notification (1)	1	Name of Building Owner/Operator (2)																
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Bree McGuire

State of New Jersey

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Date of Notification (1)	1	Name of Building Owner/Operator (2) SEP 2 7 2017.														
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Street Address	and the same of th		3.000					Subchapt Other (i.e.	er 8 (Oth	ner than K- & commen	12) cial buil	dings	, hom	es,		
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County (6)		***************************************		County	Code (7)	n		Current Use (Prior if being demolished)								
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City, State, Zip Code				enervisias virtuaturis.	Name of the last o		1 3	tate, Zip Code Meck, New	lersev							
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10 8 1 7	a Obstance (O)	101	411	Street Address												
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Secretary Treasurer

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		(Pt	ırsua	ant to	NJAC	8:50-	, a	nu 12:12	Check	#: 7031							
Date of Notificatio	Name of Building Owner/Operator (2) New Jersey Institute of Technology PAID C E W E																
Agencies Notified		Street Address SEP 2 7 2017											and community of				
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⋉]DCA	[]Cancel	Tation	Ar	nit Des	sai				732-507-3895								
			ш_			INFOR	RMAT	ION									
Name of Facility W	Place	(3)			- 11	Type of Facili	lity (4)										
New Jersey Institute	all					X School (K-12) [Subchapter 8 (Other than K-12) [Other (i.e., private & commercial buildings, homes, etc.)											
17 Summit Pl.									Square Feet	# of Floors	Bro	dg. F	ige				
City (5)		County	(6)				ATE USE ONLY) Current Use			(Prior if being demol				1)			
Newark, NJ 07102		Essex			1						•						
Name of Monitoring Owner (8)	Firm Hired	by Build	ing	ASCM	No.	Nan	me o	of Abatem	ment Contractor	(9)							
Omega Environment	00120)			Strong Bu	ilders, Inc.					_						
280 Huyler Street						18	0 S	argeant A	venue								
City. State. Zip C		City. State. Zip Code															
South Hackensack, Project Manager to	phone N	lumber	Cli	iftor Lep	n, NJ 070 hone Numb	NJ 07013-1935 Die Number License Number											
Farjado Geiser Scheduled Start Da	00 te (1		73-614-0377 00807														
0 9 / 2 5 / Month / Day / Occupancy Status D	Year	1 2 / 2	Day	only or	1 7 Four Strong Builders, Inc.												
[]Facility Clos of Abatement []Abatement Per Hours - Descr	ed/Vacated formed Outs	Ouring En	ntire	e Perio	bo			Sargeant A	t Avenue								
X]Other - Descr	ibe: Partially O	ccupied			Clifton, NJ 07013												
Scope of Work (Che	ck all that	apply)						[X]Full	Containment w	ith Negativ	e Pre	essur	e				
[]Demolit []>3 sf o ∑150 sf			IX.] Renov	ation			[]Mini []Glov	Mini-Enclosure Glovebag Procedure Non-Friable Procedure								
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Locat Asbestos- Materis TO BE in Fac	No.	rmally Used olely Main- nance/ stodia aff(12	1	(i.e	Mat Mat		aining CM)	Amount (Specify SF or LF)	R E M O V A L	REPAHR	NUAPSUL .	N C I O S D R E					
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Basement Boiler Ro			X		Во	iler Ins	sula	ition		600 SF	X						
Basement Boiler Ro			X		Ro	pe, ga	aske	et, door in	sulation	235 SF	X						
Basement Boiler Ro			X	+	_	ulking	_			36 LF	X						
Name of Registered		er		JDEP W	aste	TCub	Dic	Yards	Name of Regis	tered Landf	ill						
Newark Carting, Co		509	ID NO		Was	al Date	Sanitary Lar	ary Landfill									
Nowark NI 07105	50							,	Pen Argyl, PA	18Ø72							
Newark, NJ 07105 Completed By (Prin	nt or Type)	Title					T	Signature		1	D	ate	_				
Bilyana Kulakovska		Office A	dmir	nistrato	r			10	en /	/	a	/21/1	17				
ASB-41 JUN 95	•	0.11007												567			

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

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Date of Notification	on (I)		Nam	e of Bu	ilding	g Owne	r/Operato	or (2)	\rightarrow	SEF	27	701	7	A CONTRACTOR OF THE PERSON NAMED IN COLUMN TO PERSON NAMED IN COLUMN T
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Agencies Notified				eet Add		tute of	Technolo	<i>y</i> gy		15 ² American and	and the second of	~~~		_
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Name of Facility W	here Abatem	ent is Ta	king	Place (3)			Type of Fa	cilit	ty (4)				
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Name of Monitoring	Firm Hired			ASCM No	5.	Name	of Abate	ment Contra	ctor	(9)				
Owner (8)	tal Canciana	Ino		00120	-	Four	Strong B	uilders, Inc.						
Omega Environmen	lai Sei vices,	IIIC.		00120			et Addres							
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South Hackensack,	NJ 07606	a Fina In	100	Nur	-	Clifto	on, NJ 070	13-1935		Ilic	ense t	lumpe	T	
Project Manager To	r woulcoits	1			- 1	i i i i i i i i i i i i i i i i i i i		IOCL				· dillo	_	
Farjado Geiser Scheduled Start Da	te (10) S	ched.Com		39-8700 on Date		1	614-0377 of OSHA	Monitor		008	07			
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Hours - Descr		ccupied			_	Clifto	on, NJ 070	013						
Scope of Work (Che	ck all that	apply)	Sec. 100			17		Containmen	e mi	th Negati	ve Dr	95511		•
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[]>3 sf c [X]∑160 sf	or >3 1f or >260 1f							-Friable Pro		re				
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Basement Boiler Ro			X		Boiler	r Insul	ation			600 SF	X			
Basement Boiler Ro			X		Rope	, gask	et, door in	sulation		235 SF	TX			
Basement Boiler Ro	oom		X		Caulk	king				36 LF	X			
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ASB-41 JUN 95									1					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

D	A	T	CH	ECK	#	5972	2 /	24565
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Date of Notification (1) 09-21-17				of Building Jersey T						In			N I	W TE
	otification		Street /	Address npike Pl	aza								7 201	》 <u>店</u> 17
▼ DOL	nended nendment #_1 nergency (including			tate, Zip C Ibridge,		95				2	a tradition of the state of the	e i - 2 - i i septembro	-	Vites
DOH jus	stification) ancellation		Contract Con	of Contact oh Johns						lephone N 32) 750-				Side of the latest to
Name of Facility Where Abatemen	nt is Taking Place (3)	FAC	ILITY INF	ORMAT	ION	Туре	of Facility (4)					
Street Address Garden State Parkway Exi	t 125 Improvem	ents					×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth	er than K- & commer	12) cial bu	ilding	s, hon	nes,
City (5) Sayreville, NJ							Squa	re Feet	# 0	f Floors		Bldg. 40 y	- 110-710-00	
County (6) Middlesex				Code (7) USE ONLY)			ent Use (Prio nmercial	or if be	ing demoli	shed)			
Name of Monitoring Firm Hired by Hillman Consulting, LLC.	Building Owner (8)		ASC	M No.				tement Con Environme						
Street Address 1600 Route 22 East							t Addres	ss Street						
City, State, Zip Code Union, NJ 07083		City, State, Zip Code Carlstadt, NJ 07072												
Project Manager for Monitoring Fir Thomas Rubino	m		Telepho 908-68	ne No. 88-7800			hone No -939-6			License 00756	No.			
Start Date (10) 09-25-17(1)09-27-17	Schedule 10-31-		mpletion	Date (11)				HA Monitor	C.					
Occupancy Status During Abatema **Facility Closed/Vacated During**			mont			Street	t Addres							
Abatement Performed Outsid Other – Describe:	e of Normal Facility	Hour	S				State, Zi	p Code NY 1001	8					
Scope of Work (Check All That Ap							7							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoli				5	Min Glo	Containme i-Enclosure vebag Proce n-Exempted	edure				re	
		Locat							() () ()	2110111110		Abat	emen ype	t
Location of Asbestos-Containing Material (TO BE ABATED In Facility (13)	ACM) Use Mai Cust	d Sole ntena odial ((12)	ely by nce/ Staff?	Asbesi (i.e.	tos Conta	system cing, VA	Material s insula T, or	(ACM)	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler		1 84	UDED V		0.1.	, .	,							
Newark Carting, Inc.		Н	JDEP W lauler ID 4509		of Was			Name of R Grand C				ndfill		
City, State Newark, NJ 07105				11	Dispos TBD	al Date		City, State Pen Argy	/I, PA	18072				
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OC#	1460	9	NOTI	FICATIO	State of New Jer ON OF ASBESTO nt to NJAC 8:60	SABATI	EMEN 20)	r PA	NT OWNER AND		0 12	E E	V	
Date of Notification (1) SEPTEMBER 22, 2017	,			Name MIC	of Building Owne HAEL BRODE	r/Operato	r (2)	Myssassian en	Alleran A	JU SEI	2	76	117	Section of the section of
Agencies Notified Typ	e Notification			Street	Address				- 5	- 7				10
EPA DEP	Initial Amended			City S	tate, Zip Code					The same same	terminal ber-	Andrew Common	and the second of	Constitution of the Assessment
DOL	Amendment a Emergency (i			OLD	BRIDGE, NJ	08857								
DOH DCA	justification) Cancellation	noidani	j	Name MAT	of Contact T ABRAHAMS	ON			Te	elephone Nu	ımbei			
Name of Facility Where Abate	ment is Taking	Place (3)	FAC	CILITY INFORMA	TION	I =	, e						
MICHAEL BRODERICK	PROPER	ry (3)				Тур	of Facility						
Street Address							×	School (K. Subchapte Other (i.e. etc.)	er 8 (Oth	ner than K-1 & commerc	2) ial bu	ildings	s, hom	nes,
City (5) OLD BRIDGE								are Feet 3 SF	2	of Floors		Bldg. 1958		
County (6) MIDDLESEX					Code (7) USE ONLY)		Curr	ent Use (Pi SIDENC	rior if be	ing demolis	hed)			
Name of Monitoring Firm Hired N/A	by Building O	wner (8))	ASC	M No.	Name Finis	of Aba	tement Co Touch A	ontractor sbesto	(9) s Abaten	nent	Corp	., Inc).
Street Address						Street 17 T		ss oson Stre	eet					
City, State, Zip Code						City, S Wes	tate, z t Lon	ip Code g Branch	n, NJ 0	7764				
Project Manager for Monitoring N/A				Telepho		Teleph 732.	one N 222.8			License N 00040	lo.			
Start Date (10) OCT. 5, 2017		OCT. 6	5, 20	npletion 17	Date (11)	Name N/A	of OS	HA Monitor						
Occupancy Status During Abate Facility Closed/Vacated During						Street	Addre	SS						
Abatement Performed Out Other – Describe:	side of Norma	I Facility	Hours	nent S		City, S	tate, Z	ip Code						
Scope of Work (Check All That	Apply)					1		-						
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Department of the last of the	lenova lemolit			×	Mir Glo	ni-Enclosur vebag Pro	e cedure	Negative P				
		ls	Locati	on			I NO.	n-Exempte	d (*) and	d Non-Friab	le Pro		e ement	
Location of Asbestos-Containing Materia	ol (ACM)		iormal d Sole		De	scription	of	A100470003540000			_	Ту	ре	
TO BE ABATED In Facility (13)	ai (AGIVI)	Mai	ntenar odial S (12)	nce/		taining M I systems cing, VAT niscelland	insula 「, or	(ACM)	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
Storage & Laundry R	2000	Yes	No	N/A							_		ate	е
Olorage & Lauriury A	OOMS			X		VAT			3	00sf	х			
					- Lawrence						_			
			-								-	-		
Name of Registered Waste Haul				JDEP W		Yards		Name of	Register	red Landfill				-
Finishing Touch Asbestos City, State	Abatement	Corp.,	1 12	auler ID 2058	5 cy					ANDFILL				
WEST LONG BRANCH, N	J 07764				10/7/	al Date		City, State		E, PA				
Completed by JOSEPH P. MILLER		Title PRES	SIDEI	NT	S	ignature //	y!	1/1/	~	Dat 9/2	e 25/1	7		
						- 46		17						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 9/25/17 State of New Jersey Agencies Notified Type Notification Street Address **EPA** 33 W. State Street, 9th Floor SEP 2 7 DEP Initial City, State & Zip Code \boxtimes DOL Amended Trenton, NJ 08625 DOH Emergency Name of Contact ASBEST (Delember Sympher LI) 609 833-2127 DCA Cancellation Georgette Bunch FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)

School (K-12) NJ Dept. of Health Building Street Address Subchapter 8 (Other than K-12) 369 South Warren Street Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7)

- '.'	Sounty (6)		ourney	7 000	ie (7)		!						
Trenton	Mercer					Current Use	e (Prior if	being demo	lished)				
Name of Monitoring Firm Hired	by Building Ow	mer (3)	ΙΔ	SCM N	lo Nome of Ah		011	(0)				
Environmental Connection	Inc	,,,,,,	-)		OCIVI IV	Bristol En	vironm	Contractor ((9)				
Street Address						Street Addr		ental, inc.					
120 North Warren						1123 Beav		\ 4					
City, State & Zip Code	-					City, State 8							
Trenton, NJ 08608						Bristol, PA		ie					
Project Manager for Monitoring I	Firm	Tele	phon	e Nu	mber	Telephone I			11:	NI I			
Rollie Jones			-392			(215)788-6			License 00509	Number			
Scheduled Start Date (10)	Scheduled Co				771	Name of OS		4	00509				
10/9/17			9/17	aic (11)	Bristol En							
Occupancy Status During Abate	ment (Check o	nly or	20/11					ental inc.					
Facility Closed/Vacated	During Entire	Period	l of At	naten	ant	Street Addre							
Abatement Performed O	utside of Norm		OI AL	700	4- 2	1123 Beav							
Describe:	atside of North	iai ni	Juis –	- /aii	to spri			е					
Facility Occupied During	Abotomont					Bristol, PA	19007						
Scope of Work (Check all that ar	Abatement	_											
coope of work (check all that ap	оріу)						_	-1.00					
≥3 sf or ≥3 lf			Do					ull Containn		Vegative	Pre	ssur	е
≥160 sf ≥260 lf		\boxtimes		nova				/lini-Enclosu					
			De	moliti	ion		\boxtimes G	Blove Bag Pr	rocedures				
1 1								Ion-Exempte	ed and No	n-Friable	e Pro	ced	ure
Location of	_		Loca			Description	n of		Amount		atem		
Asbestos-Containin	g		mally		1	Asbestos-Cor	ntaining		(Specify				7
Material (ACM) TO BE ABATED			olely			Material (A	(CM)		SF or LF)	_		_	
in Facility			tenar			(i.e., thermal s	systems			l der	R	Se	inc
(13)		Cusi	odial (12)	Starr		insulation, surfa	cing, VA7	Г		Remova	Repair	Clean Up	Enclsoure
()		Yes	No	N/A	\exists	or other miscel	ianeous)			<u>a</u>	=	무	ure
Basement		T	1	14//	1								
<u> </u>		+		+	-	Pipe Insul	ation		9 LF				
		⊢	닏	14									
			Щ							ПП	П		T
										一百	n	F	IT
											Ħ	Ħ	T
										一片	H	H	Ħ
Name of Registered Waste Haule	er		NJ	DEP	Waste	Cubic Yards	Name o	of Registered	d Landfill				
0			Ha	uler I	ID No.	of Waste			a Lunaiiii				
Service Transport Inc.			20	990		1 Cu Yd	Fairles	s Landfill					
City, State						Disposal Date	City, Sta	Manager and American State of the State of t	-		-		
New Castle, DE						10/9/17		ville, PA					
Completed By (Print or Type)			Titl	le		Signature				D-4-			
Gino Pizzigoni				oject	t			I		Date			
5						1) Ima Lu	maran	Ai /M	_	9/25	117		
Gino Pizzigoni Project Simo Pizzigoni 9/2! GI 17208													
JI 1/400													

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

						Che	ck # 859	7			
Date of Notification (1)	Na	me of Building C)wner/Operator ((2)		111 6 (, F 1	W	E	7	7
10 19 1/12 15 1/11 17		Angelica Sant		\- <i>/</i>	***************************************	KI			<u>E</u>	-11	111
Agencies Notified Type Noti	fication	eet Address				HH QE	n 4 .			Щ	Ш.
DEP X Init						III SE	P 27	2017		IL	川
X DOL Am		y, State, Zip Cod				ACDEO					+
▼ DOH		Haledon, NJ (07508			- ASDESI	OS CON CENSING	TRO	L&		
	cellation	ne of Contact				Teleph	one Number	T		-	1
		Angelica San	tomauro								
New CC W			ACILITY INFORM	MATION	ı						12.00
Name of facility where abateme Angelica Santomauro	ent is taking place	9 (3)				Type of Facilit	y (4) ool (K - 12)				
							chapter 8 (0		than	V 11	2)
Street Address				(3.70		X Othe	r (Private/C	omn			2)
City (5)	10-1	(0)				Square Feet	s./Homes, e		1	3ldg.	Age
	County	(6)			nty Code (7) e use only)			300	_		
Haledon, NJ 07508	Passa			(State	e use only)	Current Use (residential	Prior if bein	g de	molisi	hed)	
Name of Monitoring Firm Hired I	by Bldg. Owner (3)	ASCM No.		Name of Abatement C	ontractor (9)					
Street Address			n/a		B & G Restoration	n, Inc.					
					Street Address 105 Ryerson Ro	ad					
City, State, Zip Code				- 6	City, State, Zip Code	au					
					Lincoln Park, N.	J 07035					
Project Manager for Monitoring Fi	rm	Phone Num	ber	_T	elephone Number		License	Num	ber		
Scheduled Start Date (10)				_ -	(973)696-6869		00	378			
10/05/2017		mpletion Date (1	1)		Name of OSHA Monitor B & G Restoration						
T-	10/06/2			s	treet Address	11, 1110.				_	
Occupancy Status During Abatem Facility closed/vacated during	ent (Check only o	one)			105 Ryerson Roa	ıd					
Abatement performed outsic	le of normal facili	ty hours-		C	ity, State, Zip Code						
Describe: Other-Describe:				-	Lincoln Park, NJ	07035					
Scope of Work (check all that app	oly)					07000		_			11.1
☐ Demolition 🗶	Renovation			□ Full	Containment w/negati	ve proceure I			200000000000000000000000000000000000000		
	≥160 sf or ≥260	If		-	i-enclosure	ve pressure [Gloveba				
Location of	Is location nor	mally used solely	/				Non-fria	R	R		
asbestos-containing material to be	by maintenand staff(12)	e/custodial	Description	of asbe	estos-containing	Amount		e	e	E	E
abated in facility (13)	Yes	No N/A	material (A	CM)	3	(Specify S LF)	For	m o	p a	С	C
basement								v e	i	р	L
Dadement		X	pipe insulat	ion		15 If		X			
]				
								4	긔		
								4	4		牌
egistered Waste Hauler 3 & G Restoration, Inc.	NJDEP Ha 1956		bic Yards of Wa	ste Na	ame of Registered Lan	dfill		ال		Ц.	
ity, State		Disposal Da			Tullytown Res	source & Red	covery Co	ente	er		
Lincoln Park, NJ			6/2017	_ "	Tullytown, PA						
ompleted by (Print or Type) Gordana Luna	Title Secretary/Tro	2001100	Signature	0	1 00		Date	-		- 1	
	Secretary/Tre	asurer		yo	rdana Luna		09/25/2	017	,		



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

1.55c.771 - Vest 19-105-00-01.055-00547								H	110			, ,	41	
Date of Notification (1)	Name of Building Owner/Operator (2)										7 2	017		9
09-19-2017				sider	nce	<u> </u>								
Agencies Notified Type Notification EPA Initial Amended			freet Ad	e. Zio Coli	e		. =	-			CONT	ROL	&	
DOL Amendment #_ Emergency (inc	kulina	-	Ha	ddor	ifie	eld.	NJC	380	33	ò).7		-
DOH justification)	KNIBIG		lame of	Contact					Tele	phone No	mber			
DCA Cancellation		11	<u>ralor</u>	ert G	ZVro	unich	1							
Name of Facility Where Abatement is Taking P	iare (3)		FACIL	ITY INFO	RMATE		Type of Fa	eralitas //	<u> </u>				-	\dashv
Residential Dwelli				. 9		- Land	_		200					
Street Address	74							ol (K-1) hander		rthan K-	12)			
		8		•			Othe etc.)	r(i.e. p	rivate 8	commen	cial build	270.0		5,
Haddonfield							Square Fe			Floors	- 1	dg. A	AL5 Je	
County (6)			County C				Current U						-	\neg
Lamden		6	STATEU	SE ONLY)			Re	910	len	ce				out-make to
Name of Monitoring Firm Hired by Building Ow	ner (8)		ASCM				of Abateme	ent Con	tractor	(9)				
Quality Environmental Concepts			None		4 23		ty Enviro	nmen	ital Co	ncepis				
Street Address 1053 North Tuckahoe Road		•					Address North Tu	ıckah	oe Ro	ad				
City, State, Zip Code							late, Zip Co			· · · · ·				\neg
Williamstown, New Jersey 08094							mstown,	New	Jerse					
Project Manager for Monitoring Firm Edward Knorr	*	1		9-1166	-2		one No. 529-1166	•		License 01086	No.			
Start Date (10) S				Date (11)			of OSHA N	T. C.	ital Co	ncepts				
Occupancy Status During Abatement (Check	Only On	e)		0.7		Street	Address							\neg
Facility Closed/Vacated During Entire Pe	riod of A	Vbatem	ent			1053	North Ti	uckah	oe Ro	ad				-
Abatement Performed Outside of Normal Other - Describe: Room Seale	Facility	Hours FFC	mre	st of t	10MC		tate, Zip Ca mstown		lomo	nenn.	4			
Scope of Work (Check All That Apply)						AAMIC	TITISEDANII	1.40.5A	36136	y 0003	+			-
□ ≥3 sfor≥3 lf	m :						1		. ~.		-			
2160 sf or ≥260 lf	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM	tenovat Temoliti		-	.02		Mini-Er			Negative	Pressu	æ		- 1
						F	Glöveh			d Non Eri	inhla Dw		_	1
		1 5					1 1001-12	CHIPIE	1 / 011	d Non-Fri	- I		ement	
Location of		Location	2					1					pe	
Asbestos-Containing Material (ACM)		d Solel		Asbest		escription daining N	i vi Naterial (AC	M)	A	mount		de	m	
TO BE ABATED In Facility	2//2	intenar Iodial S		(i.e.	therma	i system:	s insulation	Ļ .		Specify	Re	Z.	nca	Enc
(13)		(12)			other	acing, VA miscellar	neous)		- Oi	or LF)	Remova	Repair	bsul	Enclosure
	Yes	No	N/A				:4				1=		Encapsulate	Ġ.
Kitchen Area only		-	X	man	hes	Varm.	iculit	_			. 🗸	1		
ceiling)		etweer		25	bags		1		
(renovation of Kitchen)				Jois			19.							
C. CHOVERON OF MICHEN)				2018	15		itchen	C120	(13)	resen	4	\vdash		
Name of Registered Waste Hauler	لبسا	IN	JDEP W	faste	Copie	c Yards	I ar	ama al	Rome	ered Lanc	HEEF			
Quality Environmental Concepts		ļн	auler ID 9710	3,000	of Wa	aste	15	ale	mo	Count	ty La	rug	Fill	1
City, State		113	77 10			7 C.Y	1	ily, Sta	(sur 61	CX			
Williamstown, New Jersey					-	181) /	7 1 10	usac	, Ne	w J	275	ey ·	
Completed by	Tille					Signatur	2		1 ×		Date			70 VXVIII
Edward Knorr	Vice	Presi	dent			68	dia		K	an	09-	19	-ZC	17

Print Form

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

Name of Building Owner/Operator (2)

The state of the s				Name of Building Ow	ner/Operator (2)	FOF TECHNO	LONGY	n n		prog.
Date of Notification (1)				THE TRUSTEES OF S	STEVENS INSTITU			H A		In
9 / 19 /17				Street Address CASTLE POINT ON H	UDSON	181				711 11
Agencies Notified Type Notification				Building and the second	000011	SEF	7 4 7	201	7	11111
Initial Notification				City, State, Zip Code HOBOKEN, NEW JEF	RSEY 07030	u u u		201	1	
DEP x Amended Notifica	tion	#5		HOBOKEN, NEW VE	1		Printed Property Control	Plante drawn and		-
X DOL Cancellation On Hold				Name of Contact	Te	lephona Sprbe 1-216-8705 L	OS CO	ONTR	OL &	
X DOH ON HOID DCA EMERGENCY NO	OTIFIC	ATION		DAVID FERNANDEZ	20	1-210-0703	ICENS	IIVG	- Commissioner	-
		A	CILI	TY INFORMATION	Type of Facility (4	1	1000000			7
Name of Facility Where Abatement is Taking PI	ace (3)				School (K-12)				
					Subchanter 8	(Other than K-1	12)		oto \	
STEVENS INSTITUTE OF TECHNOLOGY - LIEB	BUILL	JINO				wate & commcl. # of Floors	blags., I	ldg. A	ae	-
Street Address					Square Feet 11,249	3	U	100	3 = 9	
531 HUDSON STREET				Codo (7)	Current Use (Prior	if being demolis	hed) P	harm.	Lab.	
City (5) County (6)				County Code (7) (STATE USE ONLY)	COLLEGE/UNIVE	RSITY				4
HUDSON	mer (8	1	_	ASCM No.	Name of Abatem	ent Contractor	(9)	1		
Name of Monitoring Firm Hired by Building Ov LANGAN ENGINEERING	1,101 (0	,		99	PAR ENVIRONM	ENTAL CORPO	KATION			-
Street Address					Street Address 313 SPOOK ROC	K ROAD				
300 KIMBALL DRIVE					City, State, Zip Co	ode				
City State Zin Code	IEDSE	V 0705	14		SUFFERN, NEW	YORK 10901				\dashv
PARSIPPANY, NEW	Te	lephon	e Nu	umber	Telephone Numb	er Lice	nse Nur	nbei		
Project Manager for Monitoring Firm	20	1-398-	4544	4	845-369-7500 Name of OSHA		1			\dashv
VIJAY PATEL Expected State Date (10)	ched.		letic	on Date (11)	QUALITY ENVIR	ONMENTL				
8 / 22 17	Month	9 /		19 /17 Day Year	QOALIT FERTIN					
Month Day Year Occupancy Status During Abatement (Check on					Street Address					
- " Ol-red \\ \/ \cottod \\ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	PEHOL	I UI AD	atem	nent	1376 ROUTE 9					
Abatement Performed Outside of Nor	таі ға	ICHILLY LI	ours	- Describe.	City, State, Zip C	Code		0500		
X Other - Describe: MONDAY -FRI SATURDAY 7/	DAY	AIVI-D.J	UPIV	n.	WAP	PINGERS FALL	S, NY 1	2590		
Scope of Work (Check all that apply)	0.0				tainment with Nega	Wra	ap and	Cut		
Demolition X	Renova	ation		Mini-End X Gloveba	cio , ag Procedure					
>3SF OR LF				X Non-Fri	able Procedure		1		- A T.	20
x >160 SF OR 260 LF	Isla	ocation	T	Description of	Asbestos-	Amount	_	ateme	ent Ty	
Location of Asbestos-containing		ally use		Containing Mate (ie. Thermal	erial (ACM)	(Specify	REM	REP/	NC/	SC
Material (ACM)		ely by	1:-1	insulation, surfa	acing, VAT,	SF or LF)	MOVAL	PAIR	PS	.os
TO BE ABATED		Custoo aff (12)		or other misce	ellaneous)		15		ENCAPSULE	ENCLOSURE
in Facility (13)	Yes 1					15.15	×	1		
1ST FLOOR ROOM 120 & 122 HALL		×		PIPE INSULATION		45 LF	×			
1ST FLOOR ROOM 123 to 122 132		×		PIPE FITTINGS		50 LF	×	-		
1 ST FL ACTIVE SENSING LAB & HALL		×		VAT		730 SF	_	+		
		×		MIRROR GLUE		20 SF	X	+	-	\Box
1ST FLOOR BATHROOMS		>		CHALK BOARD GLUE		60 SF	X	+	1	+
1ST FLOOR ROOM 122)	(PIPE INSULATION/ FI	TTINGS	550 LF	X	+-	+	+
1ST FLOOR THROUGHOUT CONCEALED		,		PIPE INSULATION/ FI		550 LF	X	+	+	+-
2ND FLOOR THROUGHOUT CONCEALED	1		<u>`</u> ×	MIRROR GLUE		20 SF	X	+	+	+
2ND FLOOR BATHROOMS		-	X	VAT		4,800 SF	X	+	+	+-
3RD FLOOR THROUGHOUT	+		X	PIPE INSULATION/ F	ITTINGS	250 LF	X	-	+-	+
3RD FLOOR THROUGHOUT CONCEALED	+	1	<u>^</u>	MIRROR GLUE		20 LF	X	+	+	+-
3RD FLOOR BATHROOMS	-	-	^_ X	WINDOW CAULK		50 SF	X	+	+	+-
EXTERIOR - 1ST FLOOR	+-	1		WINDOW CAULK		57 SF	X	-	-	-
EXTERIOR - 2ND FLOOR	+-	-	×	WINDOW CAULK		57 SF	X			
EXTERIOR -3RD FLOOR			X	WINDOW CACER						

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

Name of Building Owner/Operator (2)

Date of Notification (1)				THE	TRUSTEES OF	STEV	ENS INSTI	TUTERA	E HW	DLO	F [W	F
S / 21 /17					t Address								=
Agencies Notified Type Notification				CAST	TLE POINT ON	HUDS	SON						Service States
EPA Initial Notification DEP X Amended Notification Cancellation		n #	2	100000000000000000000000000000000000000	State, Zip Code OKEN, NEW JE		07030		SI	P 2	7	2017	The street state of the state o
X DOH On Hold					e of Contact	,		Telephone A		TOS	CON	VTRC	12.8
DCA EMERGENCY	NOTI	FICAT			D FERNANDEZ	-		2011-210-07	U3	LICL.	MOIN	u	-
Name of Facility Where Abatement is Taking	Diaco	(3)	FAC	ILITY INF	ORMATION	Type	of Facility	(4)					\dashv
Name of Facility where Abatement is Taking	riace	(3)				1.750	School (K-						
STEVENS INSTITUTE OF TECHNOLOGY - LIE	B BU	ILDIN	G			X	-	r 8 (Other th orivate & cor			, hom	es, et	ic.)
Street Address						4	uare Feet	# of Floo	ors		Bldg.		
531 HUDSON STREET							11,249	or if being d	am alia	had)	10		$\overline{}$
City (5) County (6) HOBOKEN HUDSON					ty Code (7) USE ONLY)		LEGE/UNI\		emons	neu)	riiaii	II. Lat	
HOBOKEN HUDSON Name of Monitoring Firm Hired by Building C	wner	(8)		(0.77.12	ASCM No.	Nam	e of Abate	ment Contr	actor (9)			
LANGAN ENGINEERING					99	1/2/2009		MENTAL CO	ORPOF	RATIC	N		
Street Address							et Address SPOOK RC	CK BOAD					
300 KIMBALL DRIVE City, State, Zip Code	-					100	State, Zip (-				-
PARSIPPANY, NEW	JERS	SEY 0	7054					V YORK 109	901				
Project Manager for Monitoring Firm	- 1	Telepl	none	Number		Tele	phone Num	ber		se Nu	mber		
VIJAY PATEL		201-3	AND COMPA			-	369-7500		1101				-
	Sche	d. Cor	3	tion Date		100000000000000000000000000000000000000	e of OSHA	Monitor RONMENTL					
8 / 22 17 Month Day Year	Mor			Day	Year	0.0							
Occupancy Status During Abatement (Check or Facility Closed/Vacated During Entire Abatement Performed Outside of No.	e Peri	od of			ibe:	1001000	et Address 6 ROUTE 9						
Other - Describe: MONDAY-FRI					N. S. C.	City	, State, Zip WAP	Code PINGERS F	ALLS	NY 1	2590		
Scope of Work (Check all that apply)	ř.				The second secon		nt with Neg	ative Pressu		and (~+		
Demolition X >3SF OR LF	Reno	vation			Mini-Encl		edure		Jvvrap	anu	Jul		
x >160 SF OR 260 LF					X Non-Friat	331							
Location of	10.77	_ocati	2000 0		Description of A			Amou	nt	_		ent Ty	
Asbestos-containing Material (ACM)		nally u olely b		C	ontaining Mater (ie. Thermal sy			(Speci	9315V	REM	REP.	NC.	ENC
TO BE ABATED	100 M	t/Cust	102 104		nsulation, surfac	ing, V	AT,	SF or L	- 20	MOVAL	PAIR	APS	SO
in Facility (13)	_	aff (1:	_		or other miscella	aneou	is)			ŕ		ENCAPSULE	LOSURE
	Yes		N/A	PIPE INS	LILATION			45 LF	-	X		1	111
1ST FLOOR ROOM 120 & 122 HALL			X	PIPE INS	2000000000	-		50 LF		X			
1ST FLOOR ROOM 103, 122, 120			X		TINGS			730 SF		X			
1 ST FL ACTIVE SENSING LAB & HALL			X	VAT	CLUE			20 SF		X			
1ST FLOOR BATHROOMS	-		X	MIRROR		1		60 SF		X			
1ST FLOOR ROOM 122	-		X		OARD GLUE	INICC		550 LF		X			
1ST FLOOR THROUGHOUT CCC	-		X		ULATION/ FITT					X	_	1	\vdash
2ND FLOOR THROUGHOUT CONCEALED	-		X		ULATION/ FITT	INGS		550 LF		×			\vdash
2ND FLOOR BATHROOMS	-		X	MIRROR	GLUE			20 SF	-				\vdash
3RD FLOOR THROUGHOUT	-		X	VAT	ATION!	10100		4,800 SF	-	X			+
3RD FLOOR THROUGHOUT CONCEALED			X		SULATION/ FITT	INGS		250 LF		1			\vdash
3RD FLOOR BATHROOMS			X	MIRROR	Description of the second			20 LF	-	X		1	
EXTERIOR - 1ST FLOOR	-		X	WINDOW		_		50 SF	53555	X	-	-	
EXTERIOR - 2ND FLOOR	-		X		V CAULK		2000	57 SF		X	-	-	+
EXTERIOR -3RD FLOOR			X	WINDOV	V CAULK			57 SF		X	1	1	

	NO		CATIC	State of New Jersey NN OF ASBESTOS ABATE		P-10-00-00-00-00-00-00-00-00-00-00-00-00-	ENNIE	CENÈ	NT.					
		(Pur	suant	to NJAC 8:60-7 and 12:120		OF 8	ATMO			BSY				
Date of Notification (1)				Name of Building O			HNOLO	GY	And Production					
9 / 8 /17	USSE W. T. S. Section			Street Address			501	5 /	SEP	-				
Agencies Notified Type Notification	in			CASTLE POINT ON	HUDSON	Antonios de la composito della				whosana				
EPA Initial Not	fication			City, State, Zip Code			5 5			ئے				
DEP x Amended		on	#4	HOBOKEN, NEW JE	RSEY 07030	E U	\mathbb{N} \mathbb{I}	3	2					
X DOL Cancellat X DOH On Hold	OH			Name of Contact		Telephone Nun	nber	Charles Control						
DCA EMERGE	NCY NOT	IFICA	ATION	DAVID FERNANDEZ	7	201-216-8705								
			FA	CILITY INFORMATION										
Name of Facility Where Abatement is Ta	king Plac	e (3)			Type of Facility									
STEVENS INSTITUTE OF TECHNOLOGY	LIERRI	III DII	NG		School (K-	er 8 (Other than	K-12)							
STEVENS INSTITUTE OF TECHNOLOGY	- LILD D	الالالالالا	140			private & commo		s., hor	mes, e	etc.)				
Street Address			See Juli		Square Feet	# of Floors		- 27	. Age					
531 HUDSON STREET					11,249	3	11-11		00	, la				
City (5) County (1) HOBOKEN HUDSON	***			County Code (7) (STATE USE ONLY)	College/UNI	ior if being demo	JIISHED	, rnai	III. LE	ıυ.				
Name of Monitoring Firm Hired by Build		r (8)		ASCM No.		ment Contracto	or (9)							
LANGAN ENGINEERING				99		MENTAL CORP	ORATI	ON						
Street Address					Street Address 313 SPOOK RO	OCK BOAD								
300 KIMBALL DRIVE City, State, Zip Code					City, State, Zip Code									
PARSIPPANY,	NEW JER	SEY	07054		3 1972	NEW YORK 10901								
Project Manager for Monitoring Firm		Telep	phone	Number	Telephone Num	CONTRACTOR								
VIJAY PATEL	To 1		398-4		845-369-7500	11	01			-				
Expected State Date (10) 8 / 22 17	Sche		omple /	tion Date (11) 15 /18	Name of OSHA QUALITY ENVI									
Month Day Year		nth	E.	Day Year	G0712111 21111									
Occupancy Status During Abatement (Che	ck only or	ne)			Street Address									
Facility Closed/Vacated During Abatement Performed Outside					1376 ROUTE 9									
X Other - Describe: MONDAY					City, State, Zip					***				
	AY 7AM-3	:30 P	M	V 15 11 0	1	PINGERS FALL	_S, NY	12590)					
Scope of Work (Check all that apply) Demolition X	Ren	ovatio	n	X Full Conta	ainment with Neg		rap and	Cut						
>3SF OR LF	1.10111	3 1 0 11 0		The state of the s	Procedure									
x >160 SF OR 260 LF				X Non-Friat	ole Procedure									
Location of Asbestos-containing	11 11 11 11 11	Locat		Description of As Containing Mater		Amount	-	baten		-				
Material (ACM)		olely		(ie. Thermal sy	(6) (7)	(Specify	REMOVAL	REPAIR	NC/	NCI				
TO BE ABATED			todial			SF or LF)	18	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	APS	SO				
in Facility (13)	Yes	taff (1	12) N/A	or other miscella	aneous)		1		ENCAPSULE	ENCLOSURE				
1ST FLOOR ROOM 120 & 122 HALL	1103	110	X	PIPE INSULATION		45 LF	×	\top		1				
1ST FLOOR ROOM 103, 122, 120		1	X	PIPE FITTINGS		50 LF	×							
1 ST FL ACTIVE SENSING LAB & HALL			X	VAT		730 SF	×							
1ST FLOOR BATHROOMS			X	MIRROR GLUE		20 SF	×							
		1	X	CHALK BOARD GLUE		60 SF	X	T	1					
1ST FLOOR ROOM 122			×	PIPE INSULATION/ FITT	INGS	550 LF	X	1	1					
1ST FLOOR THROUGHOUT CONCEALS	:D		X	PIPE INSULATION/ FITT		550 LF	X		-					
2ND FLOOR PATUROOMS	U L	+	X		11100	20 SF	X	1	-					
2ND FLOOR BATHROOMS		-		MIRROR GLUE		4,800 SF	×		1	1				
3RD FLOOR THROUGHOUT	-	-	X	VAT	INCS		X	+		+				
3RD FLOOR THROUGHOUT CONCEALE	U I	-	X	PIPE INSULATION/ FITT	INUS	250 LF		+	+	+				
3RD FLOOR BATHROOMS							-							
EXTERIOR - 1ST FLOOR		WINDOW CAULK		50 SF	X	+	+	-						
EXTERIOR - 2ND FLOOR			X	WINDOW CAULK		57 SF	X	+	+	+-				
EXTERIOR -3RD FLOOR			X	WINDOW CAULK	2-1-1-12-1-1-12-1	57 SF	X							

my.

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

Date of Notification (1)	THE TRUSTEES OF STEVENS INSTITUTE OF TECHNOLOGY												
8 / 21 /17		t Address					(0) 1		1:1	-10			
Agencies Notified Type Notification	CAS	CASTLE POINT ON HUDSON											
EPA Initial Notification DEP X Amended Notification	City, State, Zip Code HOBOKEN, NEW JERSEY 07030 Name of Contact Telephone ASDE TOS CONTROL												
X DOH On Hold DCA EMERGENCY	NOTI	FICAT	ION		e of Contact D FERNANDEZ			Telephone 201-216-8		OTO:	NSIN	VTRC IG)L&
			FAC	CILITY INF	ORMATION				300				
Name of Facility Where Abatement is Taking	Place	(3)				Туре	of Facility	U 100 - 000					
			_			-	School (K- Subchapte	100	than K	12\			
STEVENS INSTITUTE OF TECHNOLOGY - LIE	B BU	ILDIN	G			X	Other (ie. p				., horr	ies, e	tc.)
Street Address						Sq	uare Feet	# of Flo		Γ	Bldg.		
531 HUDSON STREET						1	11,249	3			10		
City (5) County (6)					ty Code (7)	100000000000000000000000000000000000000	ent Use (Pri LEGE/UNI\		demoli	shed)	Pharr	n. Lat	0.
HOBOKEN HUDSON)wnor	- (2)		(STATE	ASCM No.		e of Abate		ractor	(9)	-		\neg
Name of Monitoring Firm Hired by Building C LANGAN ENGINEERING	witei	(0)			99		ENVIRON				N		
Street Address							et Address						
300 KIMBALL DRIVE							SPOOK RC						
City, State, Zip Code PARSIPPANY, NEW	IED	SEVO	7054				State, Zip (FERN, NEV		0901				
Project Manager for Monitoring Firm				Number		-	phone Num			nse N	ımber	9	
VIJAY PATEL		201-3	98-45	544		845-	369-7500		110	1			
Expected State Date (10)	Sche			tion Date			e of OSHA						
8 / 22 17 Month Day Year	Moi	7 i		15 Day	/18 Year	QUA	LITY ENVI	RONMEN	L				
Occupancy Status During Abatement (Check or						Stre	et Address		-				
Facility Closed/Vacated During Entir	e Peri	od of	Abate	ement		1376	ROUTE 9						
Abatement Performed Outside of No X Other - Describe: MONDAY-FRI					ibe:	City	State, Zip	Code PINGERS	ΕΔΙΙ	NY S	12590		
Scope of Work (Check all that apply)					X Full Conta	I ainme	nt with Neg			, , , , ,	12000		-
Demolition X	Reno	vation	į.		Mini-Encl				Wra	p and	Cut		
>3SF OR LF					X Glovebag X Non-Friab								
x >160 SF OR 260 LF Location of	led	Locati	on		Description of As		***************************************			T At	atem	ent Ty	/pe
Asbestos-containing	80000	nally u	550 P.C.A		ontaining Materi			Amo		RE	ᇛ		EN
Material (ACM)	2000 2000	olely b	30. 3		(ie. Thermal sy			(Spe	25)	MO	PAIR	CAF	CLC
TO BE ABATED in Facility (13)	115 CH100 CO	t/Cust taff (1:			nsulation, surfaci or other miscella			3501	MOVAL	R	ENCAPSULE	CLOSURE	
mir domey (10)	Yes		N/A									E	ᇛ
1ST FLOOR ROOM 120 & 122 HALL			X	PIPE INS	ULATION			45 LF		X			
1ST FLOOR ROOM 103, 122, 120			X	PIPE FIT	TINGS			50 LF		X			
1 ST FL ACTIVE SENSING LAB & HALL			X	VAT				730 SF		X			
1ST FLOOR BATHROOMS			X	MIRROR	GLUE		CHI A CONTROL OF THE	20 SF		X			
1ST FLOOR ROOM 122			X	CHALK B	OARD GLUE			60 SF		X			
1ST FLOOR THROUGHOUT CCC			X	PIPE INS	ULATION/ FITT	INGS		550 LF		X			
2ND FLOOR THROUGHOUT CONCEALED			X	PIPE INS	ULATION/ FITT	INGS		550 LF		X			
2ND FLOOR BATHROOMS			X	MIRROR	GLUE			20 SF		×			
3RD FLOOR THROUGHOUT			X	VAT				4,800 SF		X			
3RD FLOOR THROUGHOUT CONCEALED			X	PIPE INS	SULATION/ FITT	INGS		250 LF		X			
3RD FLOOR BATHROOMS			X	MIRROR	NESONO CONTRACTOR OF THE PARTY			20 LF		X			
EXTERIOR - 1ST FLOOR			X	WINDOV	V CAULK			50 SF		X			
EXTERIOR - 2ND FLOOR			X	WINDOV				57 SF		X			
EXTERIOR -3RD FLOOR			X	WINDOV				57 SF		X			
	_	1	1										

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

Name of Building Owner/Operator (2)

/br	(i dis	uaric	10 111	Name	of Building Ow	ner/Operator (2	2)	OM9V	0 0								
				THE TE	RUSTEES OF S	TEVENS INSTI	TUTE OF TECHNOL	92			M						
Date of Notification (1)	Street Address																
Agencies Notified Type Notification	CASTLE POINT ON HUDSON																
EPA Initial Notification	Agonolog Trombo							City, State, Zip Code									
DEP x Amended Notifica	ition	#5		HOBOKEN, NEW JERSEY 07030													
X DOL Cancellation				Name of Contact Telephona Sams for CONTROL													
X DOH On Hold EMERGENCY N	OTIFICA	ATIO	N	DAVID FERNANDEZ 201-216-8705 LICENSING													
DCA EMERGENCT IV		F	ACILI	TY INFO	RMATION		- (4)				-						
Name of Facility Where Abatement is Taking Pl	ace (3)					Type of Facilit	y (4) -12)										
						Subchant	er 8 (Other than K-12	2)									
STEVENS INSTITUTE OF TECHNOLOGY - LIEB	BUILD	ING					private & commcl. bl	dgs., h	dg. A	s, etc.	\dashv						
- 1 A J J 1 2 2 2		_				Square Feet	# of Floors	DI	100	ge							
Street Address 531 HUDSON STREET					(7)	11,249	rior if being demolish	ed) Ph	narm.	Lab.	7						
City (5) County (6)				Count	y Code (7) USE ONLY)	COLLEGE/UN	IVERSITY				_						
HOROKEN HUDSON				(STATE	ASCM No.	Name of Abat	ement Contractor (9	9)									
Name of Monitoring Firm Hired by Building Ov	vner (o	1			99	PAR ENVIRO		-									
LANGAN ENGINEERING Street Address						Street Address 313 SPOOK F	ROCK ROAD										
300 KIMBALL DRIVE						City, State, Zi											
City State Zin Code	IEDOE)	v 070	15/			SUFFERN, NI		-									
PARSIPPANY, NEW	JERSE	lepho	ne N	umber		Telephone Nu		se Nun	nber								
Project Manager for Monitoring Firm	4		845-369-7500					\dashv									
VIJAY PATEL Expected State Date (10)	on Date		Name of OSH	VIRONMENTL													
8 / 22 17	19 Day	/17 Year						\dashv									
Month Day Year Occupancy Status During Abatement (Check on	Duj		Street Addres														
		of A	oaten	nent		1376 ROUTE	. 9										
Abatement Performed Outside of No	mai Fa	CIIITY	Hours	5 - Desc	ribe:	City, State, Z	ip Code		2500								
X Other - Describe: MONDAY -FR	AM-3:30) PM	301 1	1			APPINGERS FALLS	, NY 12	2590								
Scope of Work (Check all that apply)					X Full Con Mini-En		egative Pressure Wra	and C	Cut								
Demolition	Renova	ation				g Procedure											
>3SF OR LF >160 SF OR 260 LF					X Non-Fri	able Procedure		T Ab	otomi	ent Ty	ne						
x >160 SF OR 260 LF Location of	Is Lo	catio	n		Description of	Asbestos-	Amount	_		E	EN						
Asbestos-containing	norma			Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, SF or LF) Amount (Specify SF or LF)						CA	CL.						
Material (ACM)	Maint/	ely by			insulation, surfa	cing, VAT,	SF or LF)	NA	PAIR	CAPSULE	CLOSURE						
TO BE ABATED in Facility (13)		ff (12			or other misce	ellaneous)		-		JLE	JR.						
iiii aciiity (10)	Yes N	10	N/A		2.8.21		45 LF	X									
1ST FLOOR ROOM 120 & 122 HALL		-	-		SULATION		50 LF	×									
1ST FLOOR ROOM 103, 122, 120			X	PIPE FI	TTINGS		730 SF	×									
1 ST FL ACTIVE SENSING LAB & HALL			X	VAT			20 SF	×									
1ST FLOOR BATHROOMS			X		R GLUE		60 SF	X									
1ST FLOOR ROOM 122			X		BOARD GLUE		550 LF	×									
1ST FLOOR THROUGHOUT CC C			X		SULATION/ FI			×									
2ND FLOOR THROUGHOUT CONCEALED			X	PIPE IN	SULATION/ FI	TTINGS	550 LF	X	+								
2ND FLOOR BATHROOMS X				MIRRO	R GLUE		20 SF	X	+	+							
3RD FLOOR THROUGHOUT			X	VAT			4,800 SF	×	+	1	1						
3RD FLOOR THROUGHOUT CONCEALED			Х	PIPE II	NSULATION/ F	TTINGS	250 LF		+	+							
3RD FLOOR BATHROOMS			X	MIRRO	OR GLUE		20 LF	X	+	+							
			X	WIND	OW CAULK		50 SF	X	+	-	+						
EXTERIOR - 1ST FLOOR			Х	WIND	OW CAULK		57 SF	X	+	+	1						
EXTERIOR - 2ND FLOOR	1		Х	WIND	OW CAULK		57 SF	X									
EXTERIOR -3RD FLOOR		_															

. well

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

Date of Notification (1)								/ENS INSTI		最 H N	OLO	GY [W	国				
B / 21 /17	THE TRUSTEES OF STEVENS INSTITUTE OF TECHNOLOGY W																	
Agencies Notified Type Notification	CASTLE POINT ON HUDSON										2010							
EPA Initial Notification DEP X Amended Not Cancellation		n #2)			Zip Code , NEW JE		07030		The state of	EP	2 7	2017	and of the same of				
X DOH On Hold DCA EMERGENO	Y NOT	FICATI	ON			ontact RNANDEZ			Telephone, 201-216-87		STOS LICE)L&				
				CILITY INF	ORMA	NOITA							Market Tuber					
Name of Facility Where Abatement is Takir	g Place	e (3)					Туре	of Facility	(4)	100								
								School (K-										
STEVENS INSTITUTE OF TECHNOLOGY - I	JEB BU	IILDING	3				V		er 8 (Other the orivate & cor			hom	.00 0					
Street Address				X	uare Feet	# of Floo		blugs	Bldg.		(0.)							
531 HUDSON STREET				11,249	3			10	9000-000									
City (5) County (6)	7/7		T	Coun	ty Co	de (7)	Curr	ent Use (Pri	ior if being d	emolis	shed)	Pharr	n. Lat	0.				
HOBOKEN HUDSON				(STATE				LEGE/UNI\										
Name of Monitoring Firm Hired by Building	Owne	r (8)			AS	CM No. 99	1000000		ment Contr MENTAL CO			140						
LANGAN ENGINEERING						99		et Address	VIENTAL CC	JKFU	KAIIC	714						
Street Address 300 KIMBALL DRIVE								SPOOK RC	CK ROAD									
City, State, Zip Code			_					State, Zip			711-2							
PARSIPPANY, NE							-		V YORK 10	_				_				
Project Manager for Monitoring Firm				Number			Telephone Number License Number											
VIJAY PATEL											845-369-7500 1101 Name of OSHA Monitor							
Expected State Date (10) 8 / 22 17	Sche	a. Com 7 /	ipie	tion Date (15		/18			RONMENT									
Month Day Year	Мо	nth		Day	<i>.</i>	Year												
Occupancy Status During Abatement (Check Facility Closed/Vacated During Er Abatement Performed Outside of	tire Peri	iod of A			be:		100000	et Address 6 ROUTE 9										
X Other - Describe: MONDAY-F							City	, State, Zip WAP	Code PINGERS F	ALLS	, NY	12590						
Scope of Work (Check all that apply)					X	Full Conta	ainme		ative Pressu									
Demolition X	Reno	vation			Mini-Enclo , Wrap and Cut X Glovebag Procedure													
>3SF OR LF × >160 SF OR 260 LF					X	Glovebag Non-Friat												
x >160 SF OR 260 LF Location of	Is	Locatio	n *	Г	17.5	ption of As					At	atem	ent Ty	ре				
Asbestos-containing	E 000000	nally us	G0.0		ontair	ing Materi	ial (AC	CM)	Amou	nt	RE	RE	EN	E				
Material (ACM)	10.0	olely by	90. 9	4		hermal sy			(Speci	- 158	MOVAL	PAIR						
TO BE ABATED in Facility (13)		t/Custo taff (12	Showard.			on, surfaci er miscella			SF or L	-r)	\X	P	CAPSULE	CLOSURE				
III adiity (13)	Yes		1/A								Ľ		Fi	R				
1ST FLOOR ROOM 120 & 122 HALL		×	(PIPE INS	JLAT	ON			45 LF		X							
1ST FLOOR ROOM 103, 122, 120		×	(PIPE FITT	rings	;			50 LF		X							
1 ST FL ACTIVE SENSING LAB & HALL		×		VAT					730 SF		X							
1ST FLOOR BATHROOMS		>		MIRROR	GLUE				20 SF		X							
1ST FLOOR ROOM 122		,		CHALK B			100		60 SF		X							
1ST FLOOR ROOM 122	+)			a Alexandra	ION/ FITT	INGS		550 LF		X							
	-					ION/ FITT			550 LF		X							
2ND FLOOR THROUGHOUT CONCEALED				11400		20 SF		X										
2ND FLOOR BATHROOMS	-	+	<u> </u>	MIRROR	GLUE		-				X			\vdash				
3RD FLOOR THROUGHOUT	-	+ +	<u> </u>	VAT		IONI EITT	INICO		4,800 SF		×	-						
3RD FLOOR THROUGHOUT CONCEALED			<		-	ION/ FITT	INGS		250 LF		+		-					
3RD FLOOR BATHROOMS		1	<u> </u>	MIRROR		-110-20			20 LF		X		-					
EXTERIOR - 1ST FLOOR		1	X	WINDOW	CAU	LK			50 SF		X		-					
EXTERIOR - 2ND FLOOR			X	WINDOW	CAU	LK			57 SF		X	-	+	\vdash				
EXTERIOR -3RD FLOOR			X	WINDOW	CAU	LK			57 SF		X		1					



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

Date of Notification (1) 09 / 21 /		47		T		Iding Owner/Operator		IN E C	E		W-			
	-	17			Livingsto	on Board of Educa	tion	Check # 496	967 \$200					
Agencies Notified	ficatio	n			Street Addre	SS		HAH CE	P 2	7 ,	047	jus		
	12.17				11 Foxor	oft Drive		III III or	1 4	1 6	2017			
☑ DOLWD☑ Amend☑ DHSSAmend		# 2			City, State, Z	ip Code								
☑ DCA ☐ Emerge			Ji		Livinasto	n, New Jersey 070	139	ASBES	700	CON	700	31		
(NJAC 5:23-8) justifica			iing	1	Name of Con			ASBES	HOEN	LON	3	16		
Cancel				- 1'	James Pe	20.75.0.75.75		Telephone Number						
						INFORMATION		973-492-3300 Ext 306						
Name of Facility Where Abatement is	s Taki	ng Pla	ice (3)	TACILITY	INFORMATION	Type of Facility	(4)		-				
School Administration Buildi		Š		85"			1 22.0	70000						
Street Address							☐ School (K-1	8 (Other than K-	12)					
11 Foxcroft Drive							☐ Other (i.e., p	private and comm	nercial	buildi	ngs.			
City (5)			-				homes, etc.)						
Livingston, New Jersey 07039	۵						Square Feet	# of Floors		Bldg.	Age	-		
County (6)							10,000	1			yrs.			
Bergen					County Code	(7)(STATE USE ONLY)	Current Use (Pr	rior if being demo	lished)		-		
	:1-1:						School							
Name of Monitoring Firm Hired by Bu		Owne	r (8)		CM No.	Name of Abateme)				1000		
Omega Environmental Service	es				N/A	Lilich Corpor	ation							
Street Address				Kan my Carto		Street Address					-			
280 Huyler Street						606 McBride	Avenue				1			
City, State, Zip Code						City, State, Zip Co								
South hackensack, New Jerse	y 07	606				S & I	rk, New Jerse	07404						
Project Manager for Monitoring Firm			Ti	eleph	one No.	Telephone No.	in, ivew beise	Contract of the Contract of th						
Anton Rezin			390-5858	973-225-8400		License No.								
Start Date (10)	Sche	duled	Com		Date (11)	Name of OSHA M	- 11	01104						
09 /22 /17					/17		onitor nental Labs LL	•			297			
Occupancy Status During Abatement (nental Labs LL	_C						
☐ Facility Closed/Vacated During Enti	ira Da	riod o	f Ab.) 		Street Address								
Abatement Performed Outside of N	lorma	l Facil	ity H	atemer	II Dogazika	2333 Route 22								
Time of Abatement: 7AM-3:30PM/	,	PM-	ity i i	AM	Describe	City, State, Zip Co	de				100			
Scope of Work (Check all that apply)						Union, NJ 070	83							
scope of work (Check all that apply)								-		-		110		
≥3 sf or ≥3 If		⊠R	enov	ation			inment with Neg	ative Pressure						
≥160 sf or ≥260 If			emo	lition		Glovebag								
						☐ Non-Exen	pted (*) and Nor	n-Friable Procedu	ire					
Longition of				cation nally						atem	ent 1	 T`\		
Location of Asbestos-Containing Material (ACM	1)	Us	ed S	olely b	V	Description of				7	T	- 1		
TO BE ABATED	./	Ma	ainte	nance.	ASD	estos Containing Mate e., thermal systems in	erial (ACM)	Amount	\em	Repair	inci			
IN Facility		Cus	stodi: (1	al Staf	? '	surfacing, VAT, o	or	(Specify SF or LF)	Remova	air	squ			
(13)		Yes	TN		/^	other miscellaneo	us)		-		Encapsulate			
rst Floor - Office & Server Store			1=		/A						(0	İ		
of the store	age				Suspe	nded Ceiling Tiles		544 SF				-		
									1=		[-		
			-						ᆛᆜ	Щ.		1		
		П	1									1		
												1		
									뉴	П	П	1		
ime of Registered Waste Hauler				NJDE	P Waste	Cubic Yards of	Name of Registe	ered Landfill						
ame of Registered Waste Hauler				NJDE Haule	P Waste	Waste	Name of Registe							
ame of Registered Waste Hauler Lillich Corporation				NJDE	P Waste	Waste 5	G.R.O.W.S.							
ame of Registered Waste Hauler Lilich Corporation y, State				NJDE Haule	P Waste	Waste 5 Disposal Date	G.R.O.W.S.	Landfill			<u> </u>			
ame of Registered Waste Hauler Lilich Corporation ty, State Woodland Park, New Jersey	Title			NJDE Haule	P Waste	Waste 5 Disposal Date 09/25/2017	G.R.O.W.S.				<u> </u>	1.		
ame of Registered Waste Hauler Lilich Corporation ty, State	Title	eside		NJDE Haule	P Waste	Waste 5 Disposal Date	G.R.O.W.S.	Landfill Pennsylvania	te 9/21		<u> </u>	1		

for the

State of NJ

D&S Proj. #: 17-261	PA	ID		cation of As uant to NJA				MEC		$\overline{\mathbb{W}}$	E	F	7			
Date of Notification (1)		Name of Bu	ilding Owr	ner/Operator (2	2)				ا ك	<u>"</u>		-				
10 9 /12 11 /11 17		david h. a	370	ion operator (2	-)			IIIII SEE	2 7	Core		IIIII	11			
Agencies Notified Type Notifica	tion	Street Addre	111111111111111111111111111111111111111					IT IT OF	2/	7(11)		W	4—			
☐ EPA ☐ Initial ☐ Amended																
Amendment #	:	City, State, 2	Zip Code					ASBESTOS CONTROL & LICENSING								
DOL Emergency	- 11	newark,	nj 0711	2						<u> </u>	-	-	J			
DOH (including justification	. 11	Name of Cor	tact					Telephone	e Numbe							
DCA Cancellatio	- 11	david h.	andrews													
		<u> </u>	FAC	ILITY INFORM	MATION	1940										
Name of facility where abatement	is taking p	place (3)					T	Type of Facility (4								
david h. andrews								=	(K - 12)							
Street Address							=	☐ Subcha	apter 8 (C			(-12)				
								Bldgs./l	Homes, e	tc.						
City (5)	I Cou	unty (6)			T -		_	Square Feet	# of Floor	S	В	ldg. A	ge			
City (5)	000	unity (6)				Code (7) use only)		Current Head (De	a a le la alia	- 4		\له د				
newark	ess	sex			(State)	y		Current Use (Pri	or it bein	g der	nolish	ea)				
Name of Monitoring Firm Hired by	Bldg. Owr	ner (8)		ASCM No.	Na	ame of Abatem	ent C	Contractor (9)								
						D & S REST	ORA	TION, INC.								
Street Address						reet Address										
						20 California	-	е.								
City, State, Zip Code					City	y, State, Zip Co	ode			1885-18 18 K						
Project Manager for Monitoring Firm						Paterson, NJ		03								
Project Manager for Monitoring Firm	1	Pho	one Numb	er	Te	lephone Numb 973-345-80			License	Num 169						
01 15 ((10)	10.				Na Na	ame of OSHA	SS 5016579	or.		1109						
Start Date (10)	Sche	d. Completio	n Date (11)	1.1	D & S Resto										
10/02/1717		0/17			1	reet Address										
Occupancy Status During Abatemen					-112	20 California	Ave	nue								
Facility closed/vacated during Abatement performed outside	of norma	riod of abater I facility hours	nent. :-		City	y, State, Zip Co	ode									
Describe:		radinty ridar			-11	D	. 0.7.5	0.2								
Other-Describe: NORMAL H					- 11 -	Paterson, NJ										
Scope of Work (check all that apply >3 sf or >3 if	**						_	ull Containment w/ lini-enclosure	negative	press	sure					
	Renovati						_	lovebag procedure								
≥160 sf or ≥260 lf	Demolitio							on-Exempted (*) a		riable		edure				
Location of asbestos-containing		on normally u tenance/custo			20					e e	R	E n	E			
material (acm) to be	staff(12)			Description material (stos-containing	3	Amount (Specify SF	or	m	р	c	n			
abated in facility (13)	Yes	No	N/A	inatonal (/	/ (OWI)			LF)		o v	l a	а	Ľ			
hazamant				DIDE DIGH	T ATTION	,		7010		е			<u></u>			
basement basement				PIPE INSU		· · · · · · · · · · · · · · · · · · ·		58 l ft			片		ዙ			
ousement				bare heating	s pipes			30 l ft		屵	님		ዙ			
							-			부	片	片	늗			
							1000			片	片	片	H			
Registered Waste Hauler	NJD	EP Hauler ID	# Ci	ubic Yards of V	Vaste IN:	ame of Registe	red I	andfill		Ц	Ш	Ш				
D & S RESTORATION, INC.		506		yd				ESOURCE REC	COVER	Y						
City, State			isposal D			city, State										
PATERSON, NJ 07503	7:41		10/03/17		<u> </u>	TULLYTOW	/N, F									
Completed by (Print or Type)	Title			Signature					Date							