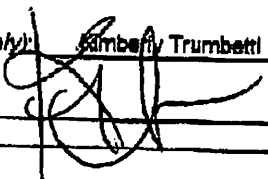


Amend #1
Change start/end
dates.

New Jersey Department of Health
Consumer, Environmental and Occupational Health Service
PO Box 369
Trenton, NJ 08626-0369
Telephone: 609-826-4950 Fax: 609-826-4975

NOTIFICATION OF NON-FRIABLE ASBESTOS WORK ACTIVITIES

Must be submitted 10 days prior to the beginning of work. Please type or print legibly.

I. NOTIFICATION INFORMATION			
Date of Notification:	8 / 23 / 17		
Initial	☒ Amended #1	☐ Cancellation	☐ Emergency (must include justification)
Type of Work:	☐ Demolition ☒ Renovation		
II. BUILDING INFORMATION			
Name of Building Owner/Operator:	State of New Jersey - Department of Treasure, DPMC		
Street Address:	PO Box 034	City:	Trenton State: NJ Zip: 08625
Name of Contact:	Mark Vetterl	Telephone No.:	908-619-8675
III. FACILITY INFORMATION			
Name of Facility Where Work Activity is to Take Place:	Health & Agriculture Blding		
Describe Facility Use:	Office Building		
Street Address:	369 South Warren Street	City:	Trenton State: NJ Zip: 080625
County Name:	Mercer	County Code (State Use Only):	
Scheduled Start Date:	11 / 3 / 2017	Scheduled Completion Date:	12 / 6 / 2017
Occupancy Status During Activity (check only one):			
☐ Facility Closed/Vacated During Entire Activity			
☒ Activity Performed Outside Normal Facility Hours—Describe: Weekend Work			
☒ Other—Describe: Fridays 5:00 pm to Saturday 1:30 am, Saturday 8:00 am to 4:30 pm			
Scope of Work (check all that apply):			
☒ Floor Tile	Square Footage:	3,691	Percentage Asbestos: %
☐ Mastic	Square Footage:		Percentage Asbestos: %
IV. CONTRACTOR INFORMATION			
Company Name:	Asbestos and Mold Services, Corp.		Telephone No.: 609-702-0400
Street Address:	3859 Sylon Boulevard	City:	Hainesport State: NJ Zip: 08036
New Jersey Asbestos License Number (if applicable):	#00862		
Monitoring Firm (if applicable):	USA Environmental Management, Inc.		Telephone No.: 609-656-8101
V. SIGNATURE			
Completed By (type or print legibly):	Sambory Trumbetti		Title: Administrator
Signature:			Date: 9-8-2017

CEOH-2
DEC 15



REVISED NOTIFICATION FORM

DATE: 9-8-17 TIME: 12:15 pm

FAX TO: DOH only

FAX FROM: Kim Trumbetti/Joann Mullarkey, A.M.S., Corp.

SUBJECT: Amendment to Notification

PROJECT SITE: Health and Agriculture

NUMBER OF PAGES INCLUDING TRANSMITTAL: 2

The following revisions apply: (please see attached for details)

Start / end date changes

**FOR FURTHER INFORMATION PLEASE CONTACT ME
AT (609) 702.0400**

Asbestos and Mold Services. 3859 Sylon Blvd. Hainesport, NJ 08036

Phone 609.702.0400 Fax 609.702.1013