State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1): 10 / 21 / 20	Name of Building Owner/Operator (2): The NJ Office Of Building Management & Operation
Agencies Notified: ☐ EPA ☒ DOLWD ☐ DOH ☐ DCA (NJAC 5:23-8)	Type Notification: ☒ Initial ☐ Amended Amendment #_____ ☐ Emergency (including justification) ☐ Cancellation
	Street Address: 33 West State Street
	City, State, Zip Code: Trenton NJ 08618
	Name of Contact: Mark M Dae — Telephone Number: 609 984-9711

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3): Biological Lab Building	Type of Facility (4): ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)
Street Address: 369 S Warren Street	
City (5): Trenton	Square Feet: 5000 — # of Floors: 2 — Bldg. Age:
County (6): Mercer County — County Code (7)(STATE USE ONLY):	Current Use (Prior if being demolished):

Name of Monitoring Firm Hired by Building Owner (8): Langan Engineeirng & Environmental S — ASCM No.:	Name of Abatement Contractor (9): TRICON ENTERPRISES	
Street Address: 300 Kimball Drive	Street Address: 322 BEERS STREET	
City, State, Zip Code: Parsippany NJ 07054	City, State, Zip Code: KEYPORT NEW JERSEY 07735	
Project Manager for Monitoring Firm: Sony David — Telephone No.: 973 560-4626	Telephone No.: 732-739-1200 — License No.: 01095	
Start Date (10): 11 / 09 / 20 — Scheduled Completion Date (11): 11 / 09 / 21	Name of OSHA Monitor: N/A	
Occupancy Status During Abatement (Check only one): ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM/_____PM-_____AM	Street Address:	
	City, State, Zip Code:	

Scope of Work (Check all that apply)

☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf

☐ Renovation ☒ Demolition

☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes	No	N/A	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type: Removal	Repair	Encapsulate	Enclosure
North Section Floor 1&2	☐	☐	☒	VAT/Mastic	1000 SF	☒	☐	☐	☐
Flat Roof	☐	☐	☒	Roof Material	760 SF	☒	☐	☐	☐
Throughout Foundation Wall	☐	☐	☒	Water proofing/Damproofing Material	1300 SF	☒	☐	☐	☐
Ground Level	☐	☐	☒	Transite Pipe & Tar/Mastic Cover	100 LF	☒	☐	☐	☐

Name of Registered Waste Hauler: Newark Carting — NJDEP Waste Hauler ID No.: 04509	Cubic Yards of Waste: 40	Name of Registered Landfill: Fairless Landfill / Grand Central Landfill	
City, State: Newark NJ	Disposal Date: 11/20/20	City, State: Morrisville, PA	
Completed By (Print or Type): MARTIN MCREA	Title: SUPERVISOR	Signature:	Date: 10/21/20

ASB-41
JAN 13

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

DOL Asbestos Notification asb-41-unprotected State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Continuation Sheet

Name of Facility Where Abatement is Taking Place (3)
369 S Warren Street Trenton NJ 08618

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Ground Level	☐	☐	☒	Transite Element & Wire Insulation	200 LF	☒	☐	☐	☐
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* * * Communication Result Report (Oct. 21. 2020 1:37PM) * * *

Date/Time: Oct. 21. 2020 1:36PM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
1980	Memory TX	6096330664	P. 3	OK	

Reason for error
E. 1) Hang up or line fail
E. 2) Busy
E. 3) No answer
E. 4) No facsimile connection
E. 5) Exceeded max. E-mail size
E. 6) Destination does not support IP-Fax