State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1): 03 / 09 / 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 #1 ☐ 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: 5,000	# of Floors: 2 — Bldg. Age: 10+ years
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 Engineering & Environmental	ASCM No.	Name of Abatement Contractor (9): Tricon Enterprises, Inc.	
Street Address: 300 Kimball Drive		Street Address: 332 Beers Street	
City, State, Zip Code: Parsippany, NJ. 07054		City, State, Zip Code: Keyport, NJ. 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	1,000 SF.	☒	☐	☐	☐
Flat Roof	☐	☐	☒	Roof Material	760 SF.	☒	☐	☐	☐
Throughout Foundation Wall	☐	☐	☒	Water proofing. Damproofing	1,300 SF.	☒	☐	☐	☐
Ground Level	☐	☐	☒	Transite Pipe & Tar. Mastic Cover	100 LF.	☒	☐	☐	☐

Name of Registered Waste Hauler: Waste Management of Trenton	NJDEP Waste Hauler ID No.: 17273	Cubic Yards of Waste: 40	Name of Registered Landfill: Fairless Landfill
City, State: Trenton, NJ.		Disposal Date: 11/20/2020	City, State: Morrisville, PA.

Completed By (Print or Type): SAIFON BIPS	Title: PROJECT MANAGER	Signature:	Date: 03/09/2021

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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322 Beers Street
Keyport NJ 07735
732-739-1200
732-739-5991

Tricon Enterprises

Fax

To:	DOL Office of Asbestos Control & Licensing	From:	Martin Hayes
Fax:	609-633-0664	Pages:	
Phone:		Date:	10/21/2020
Re:	Notification of Asbestos Abatement	cc:	

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments:

P. 1

* * * Communication Result Report (Oct. 21. 2020 1:37PM) * * *

21

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

State of New Jersey
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	City, State, Zip Code: Trenton NJ 08618
	Name of Contact: Mark M Dae — Telephone Number: 609 984-9711

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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 Engineelrng & Environmental S	ASCM No.	Name of Abatement Contractor (9): TRICON ENTERPRISES	
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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
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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

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

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	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Ground Level	☐	☐	☒	Transite Element & Wire Insulation	200 LF	☒	☐	☐	☐
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