

1707-2210

New Jersey Department of Health  
Consumer, Environmental and Occupational Health Service  
PO Box 369  
Trenton, NJ 08625-0369  
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: <u>11</u> / <u>6</u> / <u>17</u> <span style="float: right; font-size: small;">*Amendment #2 - change start date<br/>&amp; add 60 SF to each floor</span>                                                                                          |                              |                                          |  |
| <input checked="" type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended #2 <input type="checkbox"/> Cancellation <input type="checkbox"/> Emergency (must include justification)                                                                         |                              |                                          |  |
| Type of Work: <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Renovation                                                                                                                                                                         |                              |                                          |  |
| II. BUILDING INFORMATION                                                                                                                                                                                                                                                 |                              |                                          |  |
| Name of Building Owner/Operator: <u>State of New Jersey - Department of Treasure, DPMC</u>                                                                                                                                                                               |                              |                                          |  |
| Street Address: <u>PO Box 034</u> City: <u>Trenton</u> State: <u>NJ</u> Zip: <u>08625</u>                                                                                                                                                                                |                              |                                          |  |
| Name of Contact: <u>Mark Vetterl</u> Telephone No.: <u>908-619-8675</u>                                                                                                                                                                                                  |                              |                                          |  |
| III. FACILITY INFORMATION                                                                                                                                                                                                                                                |                              |                                          |  |
| Name of Facility Where Work Activity is to Take Place: <u>Health &amp; Agriculture Blding</u>                                                                                                                                                                            |                              |                                          |  |
| Describe Facility Use: <u>Office Building</u>                                                                                                                                                                                                                            |                              |                                          |  |
| Street Address: <u>369 South Warren Street</u> City: <u>Trenton</u> State: <u>NJ</u> Zip: <u>080625</u>                                                                                                                                                                  |                              |                                          |  |
| County Name: <u>Mercer</u> County Code (State Use Only): _____                                                                                                                                                                                                           |                              |                                          |  |
| Scheduled Start Date: <u>12</u> / <u>01</u> / <u>2017</u> Scheduled Completion Date: <u>01</u> / <u>19</u> / <u>2018</u>                                                                                                                                                 |                              |                                          |  |
| <b>Occupancy Status During Activity (check only one):</b>                                                                                                                                                                                                                |                              |                                          |  |
| <input type="checkbox"/> Facility Closed/Vacated During Entire Activity <span style="float: right; font-size: small;">**Not working weekends of 12/15, 12/22 &amp; 12/29</span>                                                                                          |                              |                                          |  |
| <input checked="" type="checkbox"/> Activity Performed Outside Normal Facility Hours—Describe: <u>Weekend Work</u>                                                                                                                                                       |                              |                                          |  |
| <input checked="" type="checkbox"/> Other—Describe: <u>Fridays 5:00 pm to Saturday 1:30 am, Saturdays 8:00 am to 4:30 pm</u>                                                                                                                                             |                              |                                          |  |
| <b>Scope of Work (check all that apply):</b>                                                                                                                                                                                                                             |                              |                                          |  |
| <input checked="" type="checkbox"/> Floor Tile                                                                                                                                                                                                                           | Square Footage: <u>3,691</u> | Percentage Asbestos: <u>          </u> % |  |
| <input type="checkbox"/> Mastic                                                                                                                                                                                                                                          | Square Footage: _____        | Percentage Asbestos: <u>          </u> % |  |
| <div style="font-size: x-small; margin-top: -10px;">             4th Fl. Lobby - 890 SF<br/>             5th Fl. Lobby - 891 SF<br/>             6th Fl. Lobby - 879 SF<br/>             7th Fl. Lobby - 110 SF<br/>             8th Fl. Lobby - 921 SF           </div> |                              |                                          |  |
| IV. CONTRACTOR INFORMATION                                                                                                                                                                                                                                               |                              |                                          |  |
| Company Name: <u>Asbestos and Mold Services, Corp.</u> Telephone No.: <u>609-702-0400</u>                                                                                                                                                                                |                              |                                          |  |
| Street Address: <u>3859 Sylon Boulevard</u> City: <u>Hainesport</u> State: <u>NJ</u> Zip: <u>08036</u>                                                                                                                                                                   |                              |                                          |  |
| New Jersey Asbestos License Number (if applicable): <u>#00862</u>                                                                                                                                                                                                        |                              |                                          |  |
| Monitoring Firm (if applicable): <u>USA Environmental Management, Inc.</u> Telephone No.: <u>609-656-8101</u>                                                                                                                                                            |                              |                                          |  |
| V. SIGNATURE                                                                                                                                                                                                                                                             |                              |                                          |  |
| Completed By (type or print legibly): <u>Kimberly Trumbetti</u> Title: <u>Administrator</u>                                                                                                                                                                              |                              |                                          |  |
| Signature:                                                                                                                                                                                                                                                               |                              | Date: <u>11/16/2017</u>                  |  |

[illegible]

Figure 1. The effect of the concentration of the *Agrobacterium* suspension on the transformation efficiency of *Agrobacterium* strains.

the 1990s, the number of people in the world who are illiterate has increased from 750 million to 850 million. The number of illiterate people in the world is projected to reach 900 million by the year 2015. The number of illiterate people in the world is projected to reach 900 million by the year 2015. The number of illiterate people in the world is projected to reach 900 million by the year 2015.

10. The following table shows the number of people who have been convicted of a crime in the United States since 1970, by race and sex. The data are from the U.S. Department of Justice, Bureau of the Census, and the U.S. Department of Education, Office of Education Statistics.

[illegible]

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[illegible][illegible]