State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1): 10 / 19 / 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): GREENHOUSE	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	Square Feet: 5000 — # of Floors: 1 — Bldg. Age:
City (5): Trenton	
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 / 02 / 20 — Scheduled Completion Date (11): 11 / 02 / 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
Perimeter & Partition Wall	☐	☐	☒	Caulk	160 LF	☒	☐	☐	☐
Throughout Building (windows)	☐	☐	☒	Putty / Caulk Material	4000 LF	☒	☐	☐	☐
South Section Ceiling	☐	☐	☒	Putty Material	900 LF	☒	☐	☐	☐
Throughout Building	☐	☐	☒	Transite	1260 SF	☒	☐	☐	☐

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: 10/19/20

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) <u>TO BE ABATED</u> 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
Through Foundation Wall	☐	☐	☒	Waterproofing/Dampproofing Material	1150 SF	☒	☐	☐	☐
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* * * Communication Result Report (Oct. 19. 2020 3:12PM) * * *

1)
2)

Date/Time: Oct. 19. 2020 3:09PM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
1975 Memory TX	6096330664	P. 5	OK	

Reason for error
E. 1) Hang up or line fail
E. 3) No answer
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E. 4) No facsimile connection
E. 6) Destination does not support IP-Fax

322 Beers Street
Keyport NJ 07735
732-739-4200
732-739-5301

Tricon Enterprises

Fax

To:	DOL Office of Asbestos Control & Licensing	From:	Martin Merea
Fax:	609-633-0664	Pages:	5
Phone:		Date:	10/19/2020
Re:	Notification of Asbestos Abatement	cc:	

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