

As specified in **NJAC 7:26-2.12** the following notification of intention to demolish/renovate involving regulated asbestos containing material is provided 10 days prior to activity. This form, once completed, must be copied and mailed by the generator to the:

New Jersey Department of Environmental Protection

Division of Solid and Hazardous Waste

CN 414

JOB #

Trenton, NJ 08624-0414

This form must accompany the transporter with the asbestos load to the landfill. After mailing, do not wait for the State of NJ to contact you. Call 732-918-0142 (ext 602) for an appointment / job number 24 to 72 hours in advance of the intended disposal date. The form will have to be transposed onto an "Official 4-part form" in the Scales Office upon arrival at the landfill.

Asbestos Origin:	Name: _____	Telephone: _____
	Address: _____	
	State: NJ	County: Monmouth
Removal Contractor:	Name: _____	Telephone: _____
	Address: _____	
Type of asbestos material:	_____	
Quantity of asbestos material:	_____	
Transporter:	Name: _____	Telephone: _____
	Address: _____	
Disposal Site:	Name: Monmouth County Reclamation Center	NJ Facility ID#:133600590 E3
	Address: 6000 Asbury Avenue	
	Tinton Falls, NJ 07753	
Anticipated Disposal:	Date: _____	Time: _____

FACILITY USE ONLY

Discrepancies:	_____	

Facility Receipt:	_____	Date: _____

SOLID WASTE ENFORCEMENT TEAM