ASBESTOS REMOVAL CORP.
14-20 129th Street
College Point, New York 11356
(718) 961-4100 • Fax # (718) 961-4103

NYC DEP
PROJECT 55 NASSAU STREET
NEW YORK, NY

CONTRACT# ROF-REM3
INVOICE # 41
DATE 11/27/2002

ITEM#	DESCRIPTION OF ITEM	UNIT PRICE	TY/SQ. FT.	TOTAL VALUE
1	Roof cleanup-Asphalt/Uncovered Surface up to 2500 sq. ft. of clean-up per bldg/structure	$ 1.00	1600	$ 1,600.00
2	Roof cleanup-Asphalt/Uncovered Surface between 2500 sq. ft.5000 sq. ft.	$ 0.85	0	$0.00
3	Roof cleanup-Asphalt/Uncovered Surface greater than 5000 sq. ft.	$ 0.80	0	$ -
4	Roof cleanup-Gravel/Stone Surface up to 2500 sq. ft. of clean-up per bldg/structure	$ 3.00	0	$ -
5	Roof cleanup-Gravel/Stone Surface between 2500 sq. ft.and 5000 sq. ft.	$ 2.75	0	0
6	Roof cleanup-Gravel/Stone Greater than 5000 Sq. FT.	$ 2.50	0	0
7	Façade Clean-up (up to 5000 sq. ft.)	$ 2.60	4250	$ 11,050.00
8	Façade Clean-up (6-15 Story Buildings) (greater than 5000 sq. ft.	$ 2.45	0	$ -
	TOTAL			$ 12,650.00

R. Rad

E200 WTC

NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
55-17 Junction Boulevard, 8th Floor, Corona, NY 11368-5107

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

TRU1690MN02
Building Dept. or TRU No
FOR OFFICIAL USE ONLY

1. NYC DEP
(See fee schedule)

ONLY TYPEWRITTEN FORMS WILL BE ACCEPTED

When submitting this form at the NYC Department of Buildings, the original form and three (3) copies with original signatures are required. Submittal at the NYCDEP requires one copy of the form with original signatures. This form must be submitted to the NYC DEP not less than one week in advance of the start of abatement activities.

I. FACILITY

2. Address 55 NASSAU STREET Borough Manhattan Zip _____

AKA 24-26 MAIDEN LANE 3. Block _____ 4. Lot _____

5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name HARRY MORGANSTERN 8. Contact Person HARRY MORGANSTERN

9. Tel..# _____ Fax # _____

10. Address _____ City _____ State _____ Zip _____

III. GENERAL CONTRACTOR

11. Name _____ Tel. # _____

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name TRIO ASBESTOS REMOVAL CORP. 13. Contact Person STEVEN PARMIGIANI

14. Federal Employer ID. # PII 15. Tel. # (718) 961-4100 Fax # (718) 961-4103

16. Address 14-20 129 STREET City COLLEGE POINT State NY Zip 11356

V. THIRD PARTY AIR MONITOR

17. Name WARREN & PANZER ENGINEERS, P.C. 18. Contact Person MIKE NOLAN

19. Federal Employer ID. # _____ 20. Tel. # (212) 922-0077 Fax # (212) 922-0630

21. Address 228 EAST 45 STREET City NEW YORK State NY Zip 10017

22. Sample Analysis Laboratory WARREN & PANZER ENG.,P.C. 23. NYS DOH ELAP # 11251

VI. PROJECT INFORMATION

24. Starting date for this portion of work 10/10/02 Projected completion date 10/19/02

Asbestos work schedule ☑ Monday ☑ Tuesday ☑ Wednesday ☑ Thursday ☑ Friday ☑ Saturday ☑ Sunday

Shift from: 8:00 ☑ am ☐ pm to 8:00 ☐ am ☑ pm

If other, specify _____

Access to inspect the premises must be provided during the work schedule indicated in this item.

25. Total amount of asbestos-containing material to be abated during this work

1,600 Square Feet, and/or 0 Linear Feet

RECEIVED
OCT 11 2002
BUREAU OF ENVIRONMENTAL REMEDIATION & ENFORCEMENT
ASBESTOS CONTROL PROGRAM
TRU 1

ACP 7
2/200

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler ASBESTOS TRANS. CO. NYS DEC Permit # 1A-371 Tel.# (631) 924-5050

Disposal Site(s) IMPERIAL- P.O. 47, 11 BOGGS RD., PA. / SOUTHERN ALLEGHANIES- VALLEYVIEW DR., PA.

27. This asbestos abatement is part of a (Item a through e requires filing of this form with NYC Department of Buildings)

a) ☐ Demolition b) ☐ Boiler Replacement c) ☐ Sprinkler Replacement d) ☐ Renovation/Alteration

e) ☐ Fireproofing Replacement f) ☐ Other (Describe) _____

28. TYPE OF ABATEMENT (Check all appropriate boxes)

☐ Removal ☐ Enclosure ☐ Encapsulation ☐ Repair ☐ Clean up

29. ABATEMENT PROCEDURE (Check all appropriate boxes)

☐ Full Containment ☐ Glovebag ☐ Tent ☐ DEP Variance Application

TM 1690HN02

30. LOCATIONS OF ABATEMENT

Floor(s)	DESCRIBE SECTION OF FLOOR (e.g. entire, east wing, room #, boiler room, lobby, etc)	AFFECTED SURFACES CONTAINING ACM (e.g. Pipe lagging, ceiling, plenum ducts, storage tanks, decking, etc.)	AMOUNT OF ACM SQUARE FEET	AMOUNT OF ACM LINEAR FEET	DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
ROOF	MAIN & BULKHEAD	ASPHALT ROOF	1,600		

31. I hereby declare that the information provided herein is true and complete to the best of my knowledge. I am familiar with Federal, State and NYC laws and regulations applicable to asbestos related work.

WARREN & PANZER EG., P.C.	TRIO ASBESTOS REMOVAL	STEVEN PARMIGIANI
Print Name of Air Monitor	Print Name of Asbestos Contractor	Print Name of Applicant (If other than Owner)
Signature	Signature	Signature
Date	10/10/02 Date	10/10/02 Date

32. I understand that as the owner of a building where asbestos abatement activity occurs, I am responsible for the performance of the asbestos abatement activities in accordance with the Asbestos Control Program Rules. I have contracted the third party air monitor who is completely independent of all parties involved in the asbestos project. I hereby declare that I have authorized the filing of this notification for the work specified herein.

NYC DEP — Print Name of Owner

Signature

10/10/02 — Date

A STAMPED COPY OF THIS FORM INCLUDING AMENDMENTS MUST BE AVAILABLE AT THE WORK SITE.

Any modification of information provided on this form must be reported immediately in writing directly to the NYC DEP ACP.

The requirements of the Asbestos Control Program Rules may not be lawfully avoided or lessened through the performance of work in incremental or piecemeal fashion.

ACP7
2/2001

ATHENICA
ENVIRONMENTAL SERVICES INC.
Tel. (718) 784-7490
Fax. (718) 784-4085

AIRBORNE ASBESTOS ANALYSIS BY TRANSMISSION ELECTRON MICROSCOPY

CLIENT: Warren & Panzer Engineers, P.C.
LABORATORY ID #: T02-10-062
ANALYT. METHODOLOGY: AHERA
FILTER TYPE: M.C.E.
AVERAGE G.O. AREA (mm²): 0.013838

PROJECT: NYC DEP, 55 Nassau Street, NY
DATE OF REPORT: 10/11/02
DATE OF ANALYSIS: 10/11/02
EFFECTIVE FILTER AREA (mm²): 385

LABORATORY RESULTS

CLIENT #	LAB. ID #	LOCATION	VOLUME (l)	G.O.'s ANALYZED	AREA ANALYZED (mm^2)	ANALYT. SENSITIV. (struct./cm^3)	TOTAL ASBESTOS AIR CONC. (struc./cm^3)	TOTAL ASBESTOS FILTER CONC. (str./mm^2)	AIR CONC. FOR STRUCT. 0.5≤S<5µm	AIR CONC. FOR STRUCT. S>5.0µm	ASBEST. TYPE CHRYS.	AMPHIB. ASBEST TYPE SPECIFY
03	T02-10-062-2998	Entrance roof	1800	4	0.0554	0.0039	<0.0039	<18.07	NA	NA	NA	NA
04	T02-10-062-2999	Middle roof	1800	4	0.0554	0.0039	<0.0039	<18.07	NA	NA	NA	NA
05	T02-10-062-3000	Roof north east	1800	4	0.0554	0.0039	<0.0039	<18.07	NA	NA	NA	NA
06	T02-10-062-3001	Roof north west	1800	4	0.0554	0.0039	<0.0039	<18.07	NA	NA	NA	NA
07	T02-10-062-3002	Roof south east	1800	4	0.0554	0.0039	<0.0039	<18.07	NA	NA	NA	NA

E. Sioukri

ANALYST
E. Sioukri

LABORATORY DIRECTOR
Spiro Dongaris

LABORATORY CERTIFICATION NUMBERS: NVLAP 101958, ELAP 10955

- Athenica Environmental Services Inc. (AES), is responsible only for information pertaining to samples taken by its employees.
- Air sampling cassettes will be stored for sixty (60) days. AES Inc., should be notified within this time frame for a true duplicate analysis.
- If AES Inc., did not conduct the sampling, the reported airborne concentration was derived based on information provided by the client. Under these circumstances, the air concentration data is supplied solely for the convenience of the client.
- The report relates only to items tested. This report must not be used to claim product endorsement by NVLAP or any other agency of the U.S. Government. Test reports may not be reproduced except in full and with prior approval of AES Inc
- The liability of Athenica Environmental Services Inc. with respect to the services charged, shall in no event exceed the amount of the invoice

228 East 45th Street
New York, NY 10017
(212) 922-0977
Fax (212) 922-9690

WARREN & PANZER ENGINEERS, P. C.

AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

24 hr+/a | 12 hr+/a | 6 hr+/a | 3 hr+/a | Immediate +/a

P.O. ———

CLIENT: N.Y.C. D.E.P.
PROJECT: 55 NOSTRAND ST. N.Y. N.Y.
LOCATION: ROOF

W&P FILE #: 1079-01-01
LABORATORY:
ANALYSIS METHOD: PCM | TEM (AHERA) | TEM EPA LEVEL II (circle one) — 7400

CONTACT: BENEDETTO

FAX SUB #

TECHNICIAN: LAWRENCE BAER

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	FLOWRATE STOP	TIME ON	TIME OFF	TOTAL TIME	VOLUME (liters)	CONCENTR. (fib./cc.)
-01	FIELD BLANK	1	—	—	—	0945	—	—	—	
-02	FIELD BLANK	1	—	—	—	0946	—	—	—	
-03	EAST ROOF	3	06	10.0	10.0	0950	1250	180	1800	
-04	MID ROOF	3	10	10.0	10.0	0952	1252	180	1800	
-05	ROOF N.E.	3	90	10.0	10.0	0953	1253	180	1800	
-06	ROOF N.W.	3	02	10.0	10.0	0955	1255	180	1800	
-07	ROOF S.E.	3	15	10.0	10.0	0957	1257	180	1800	

COMMENTS:

T02-10-062

SAMPLE BY: LAWRENCE BAER — DATE: 10/10/02 THURSDAY
SIGNATURE: Lawrence Baer
RELEASED BY: LAWRENCE BAER — DATE: 10/10/02 THURSDAY
SIGNATURE: Lawrence Baer
RECEIVED BY: A CAMPOS — DATE: 10/11/02
SIGNATURE:

SAMPLE TYPE CODES	
1 - Blank	5 - Final Clearance (inside)
2 - Pre-Abatement	6 - Final Clearance (outside)
3 - During Abatement	7 - Personal
4 - During Glove Bag Removal	8 - Background

SEE REVERSE SIDE FOR ANALYSIS INFORMATION

ATHENICA
ENVIRONMENTAL SERVICES INC.
Tel. (718) 784-7490
Fax. (718) 784-4085

AIRBORNE ASBESTOS ANALYSIS BY TRANSMISSION ELECTRON MICROSCOPY

CLIENT: Warren & Panzer Engineers, P.C.
LABORATORY ID #: T02-10-075
ANALYT. METHODOLOGY: AHERA
FILTER TYPE: M.C.E.
AVERAGE G.O. AREA (mm^2): 0.013838

PROJECT: NYC DEP, 55 Nassau, Façade
DATE OF REPORT: 10/13/02
DATE OF ANALYSIS: 10/13/02
EFFECTIVE FILTER AREA (mm^2): 385

LABORATORY RESULTS

CLIENT #	LAB. ID #	LOCATION	VOLUME (l)	G.O.'s ANALYZED	AREA ANALYZED (mm^2)	ANALYT. SENSITIV. (struct./cm^3)	TOTAL ASBESTOS AIR CONC. (struc./cm^3)	TOTAL ASBESTOS FILTER CONC. (str./mm^2)	AIR CONC. FOR STRUCT. 0.5≤S<5µm	AIR CONC. FOR STRUCT. S≥5.0µm	ASBEST. TYPE CHRYS.	AMPHIB. ASBEST TYPE SPECIFY
01	T02-10-075-3061	East façade	1440	4	0.0554	0.0048	<0.0048	<18.07	NA	NA	NA	NA
02	T02-10-075-3062	East façade	1440	4	0.0554	0.0048	<0.0048	<18.07	NA	NA	NA	NA
03	T02-10-075-3063	North east façade	1440	4	0.0554	0.0048	<0.0048	<18.07	NA	NA	NA	NA
04	T02-10-075-3064	North façade	1440	4	0.0554	0.0048	<0.0048	<18.07	NA	NA	NA	NA
05	T02-10-075-3065	North façade	1440	4	0.0554	0.0048	<0.0048	<18.07	NA	NA	NA	NA

E. Sioukri

ANALYST
E. Sioukri

LABORATORY DIRECTOR
Spiro Dongaris

LABORATORY CERTIFICATION NUMBERS: NVLAP 101958, ELAP 10955

- Athenica Environmental Services Inc. (AES), is responsible only for information pertaining to samples taken by its employees.
- Air sampling cassettes will be stored for sixty (60) days. AES Inc., should be notified within this time frame for a true duplicate analysis.
- If AES Inc., did not conduct the sampling, the reported airborne concentration was derived based on information provided by the client. Under these circumstances, the air concentration data is supplied solely for the convenience of the client.
- The report relates only to items tested. This report must not be used to claim product endorsement by NVLAP or any other agency of the U.S. Government. Test reports may not be reproduced except in full and with prior approval of AES Inc.
- The liability of Athenica Environmental Services Inc. with respect to the services charged, shall in no event exceed the amount of the invoice.

326 East 48th Street
New York, NY 10017
(212) 922-9077
Fax (212) 922-9630

WARREN & PANZER ENGINEERS, P. C.

AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

PAGE ____ OF ____

(24 hr+/a) 12 hr+/a 6 hr+/a 3 hr+/a Immediate +/a

P.O. ____

CLIENT: DEP
PROJECT: 55 NASSAU FACADE
LOCATION: 55 NASSAU FACADE

W&P FILE #: 1074.01.02
LABORATORY:
ANALYSIS METHOD: PCM (circle one) TEM 7400 TEM AHERA TEM EPA LEVEL II

CONTACT:

TECHNICIAN: E. OBRIEN

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	FLOWRATE STOP	TIME ON	TIME OFF	TOTAL TIME	VOLUME (liters)	CONCENTR. (fib./cc.)
01	EAST FACADE	3	1	6	6	1030	1430	240	1440	
02	EAST FACADE	3	2	6	6	1030	1430	240	1440	
03	NORTHEAST FACADE	3	3	6	6	1032	1432	240	1440	
04	NORTH FACADE	3	4	6	6	1033	1433	240	1440	
05	NORTH FACADE.	3	5	6	6	1035	1435	240	1440	
06		1								
07	FIELD BLANK	1								
08		1								

COMMENTS:

T02-10-075

SAMPLE BY: EDWIN OBRIEN DATE: 10-12-2002
SIGNATURE:

RELEASED BY: E OBRIEN DATE: 10.12.2002
SIGNATURE:

RECEIVED BY: A.CAJIGAL DATE: 10/13/02
SIGNATURE: A Cajigal

SAMPLE TYPE CODES	
1 - Blank	5 - Final Clearance (inside)
2 - Pre-Abatement	6 - Final Clearance (outside)
3 - During Abatement	7 - Personal
4 - During Glove Bag Removal	8 - Background

SEE REVERSE SIDE FOR ANALYSIS INFORMATION

ASBESTOS INSPECTION REPORT

PREMISE NO.	STREET					INSPECTION DATE
	55 Nassau Street (aka) 24 Maiden Lane					10/11/02
FLOOR: Roof & facade	ZIP	BORO CODE: 1	BLOCK	LOT	SQUAD #: 1	BADGE #: A078

INSPECTOR	BLDG TYPE	BASIS OF INSPECT.	PHOTOS TAKEN
R. Rammohan	B	TRU/1690MN02	YES (NO)

CONTRACTORS NAME: Trio Asbestos Removal	SAMPLE NO.
ADDRESS: 14-20 129 Street CITY: College Point.	SAMPLE NO.
STATE: NY ZIP: 11356 PHONE: (718) 961-4100	SAMPLE NO.
LABORATORY NAME: Warren & Panzer Engineers P.C.	OWNERS NAME: Harry Morgenstern.
ADDRESS: 228 East 45 Street CITY: New York	ADDRESS CITY
STATE: NY ZIP: 10017 PHONE: (212) 922-0630.	STATE ZIP PHONE
CONTACT PERSON: Steven Parmigiani / Trio.	TIME OF INSPECTION FROM: (am)/pm 8 am TO: am/(pm) 4 pm

Inspection disclosed that the following Requirements, Specifications, and Procedures were complied with

- ☐ Section 1-51 Notifications, Reports, Plans, and Fees
- ☐ Section 1-71 Air Sampling, Monitoring, and Analysis
- ☐ Section 1-91 Worker Protection
- ☐ Section 1-101 Materials and Equipment
- ☐ Section 1-116 Work Place Preparation
- ☐ Section 1-117 Worker Decontamination Enclosure System
- ☐ Section 1-118 Waste Decontamination Enclosure System
- ☐ Section 1-126 Engineering Controls ☐ Section 1-127 Entry/Exit
- ☐ Section 1-128 Equipment, Waste Decontamination & Removal
- ☐ Section 1-129 Maintenance of Decontamination System & Barriers
- ☐ Section 1-137 ACM Disturbance, Handling, & Removal
- ☐ Section 1-138 Encapsulation ☐ Section 1-139 Enclosure
- ☐ Section 1-140 Glovebag ☐ Section 1-141 Tent
- ☐ Section 1-146 Preliminary Clean Up
- ☐ Section 1-147 Final Clean Up
- ☐ Project ongoing, expected completion date____/____/____
- ☐ Project completed on or about____/____/____All surfaces, including abated surfaces are free of visible ACM debris and Encapsulated
- ☐ No Access Premise ☐ Locked, No response to bell or knocks ☐ Abandoned
- ☐ Inspection based on complaint, no ACM being disturbed or present
- ☐ Variance Inspection-Approved/Disapproved. Section (s)_____
- ☐ Follow Up Necessary

Contact person at the site: Jan Wolkowicz + 2 handlers – for roof & Larry w&p
Marian Wiacek + 4 handlers – for facade & Edman w&p

Additional Comments

10/10/02 (THURSDAY): The crew started cleaning the roof and air sampling was delayed due to power not available. At the end of the day roof cleaning was completed including bulkhead walls & roof

10/12/02 (Saturday): facade washing started at 9:30am due to rain at Nassau street facade. At 1:30pm Nassau side was completed and the boom truck was moved to Maiden Lane facade. At 4 pm maiden Lane facade completed and boom was moved to 62 william for extra help. Visual was satisfactory.

NOV #	INFRACTIONS	RESULT CODE
		5
NOV #		SUPERVISORS INITIALS
		RL

BORO: 1 = MANHATTAN 2 = BRONX 3 = BROOKLYN 4 = QUEENS 5 = RICHMOND

BLDG TYPE: A > 6 Stories B < 6 Stories C Single Family D School E Hospital F Public Owned Property

RESULT CODES: 1 = Violation Issued 2 = No Violations Issued 3 = No Access 4 = Project not Started (No NOV) 5 = Project Completed (No NOV)

ACP 30/92

DEC-04-2002 10:33

E200 WTC

ONLY TYPEWRITTEN FORMS WILL BE ACCEPTED

NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Corona, NY 11368-5107

ASBESTOS PROJECT AMENDMENT FORM

FOR FORM ACP 7

FOR OFFICIAL USE ONLY
Fee (if any) $ _____
Amendment 2002A-2832
Information Only: ☐ Yes ☐ No

A modification is valid only if it is received by the NYCDEP prior to the previously filed date of completion, except for start date changes that must be received by the original start date.

ACP7 TRU/BN# 1690MN02 Facility Address 55 NASSAU STREET Borough Manhattan Zip _____

Date ACP7 was filed 10/11/02 Variance # (If any) _____

Was this ACP7 amended before? ☐ Yes ☑ No If yes, specify date _____

Original Start Date 10/10/02 Original Completion Date 10/19/02 from ACP 7, #24.

PLEASE ENTER THE INFORMATION THAT IS BEING CHANGED:

A notification may be modified no more than twice.
Only the building owner may amend items IV and V.
The original applicant or building owner may amend all other items.

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name Trio Asbestos Removal Corp. 13. Contact Person _____
14. Federal Employer ID. # PII 15. Tel. # _____ Fax # _____
16. Address _____ City _____ State _____ Zip _____

RECEIVED DEC 04 2002 FED SAN ASBESTOS/LEAD PROGRAM TRUG 9

V. THIRD PARTY AIR MONITOR

17. Name Warren & Panzer Group 18. Contact Person _____
19. Federal Employer ID. # _____ 20. Tel. # _____ Fax # _____
21. Address _____ City _____ State _____ Zip _____
22. Sample Analysis Laboratory _____ 23. NYS DOH ELAP # _____

VI. PROJECT INFORMATION

☐ Project Cancelled
☐ Project Postponed

24. Starting date for this portion of work _____ Projected completion date _____

Asbestos work schedule ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Shift from: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm If other, specify _____

25. Additional asbestos-containing material to be disturbed during this work 4,250 Square Feet, and/or — Linear Feet

Reduction in the amount of ACM to be disturbed during this work — Square Feet, and/or — Linear Feet

29. Abatement Procedure for Additional Material (Check all appropriate boxes)
☐ Full Containment ☐ Glovebag ☐ Tent ☐ DEP Variance Application

Other Changes _____

30. Locations of abatement modified by above FACADE - ITEM # 7
(For each floor list ACM quantity and type)

31/32. Name of Applicant / Owner TRIO ASBESTOS REMOVAL CORP. / NYC DEP. Tel. # (718) 961-4100

Name of Company (If any) _____ Fax # _____

Address 14-20 129 STREET City COLLEGE POINT State NY Zip 11356

I hereby declare that the information provided herein is true and complete.

Signature of Applicant /Owner 12/05/02 Date 10/22/02

ACP 8
2/2001

TOTAL P.02