



WASTE MANAGEMENT

LOGANO

P.O. Box 144 • Portland, CT 06480
(860) 342-0867 • Fax: (860) 342-4866
Out of State 1-800-272-3867

E.P.A. AGENCY

CT, MA, RI, VT, NH, ME
GENERATORS

EPA New England
1 Congress Street
Boston, MA 02114-2023
(617) 918-1111

NY GENERATORS

EPA Region 2
290 Broadway, 26th Floor
New York, NY 10007-1866
(212) 264-6770

#99 49010

EMERGENCY RESPONSE
TELEPHONE
#1-800-272-3867

FB# 7536 ASBESTOS DISPOSAL & DOCUMENTATION FORM

Job Number _____ P.O. # _____
Contractor **FIBER CONTROL INC.**
Address **3010 BURNS AVENUE**
City **WANTAGH** State **NY** Zip **11793**
Telephone Number **(516) 781-3000**
Date Container Del. **06/26/02** Date of Pickup **07/25/02**
Type of Container **100 YARD**
VOLUME **1/16** CY Friable ☒ Non-Friable ☐
Bag ☒ Drum ☐ Wrapped ☐ Other ☐
RQ, ASBESTOS, 9, NA2212, PG III

GENERATOR/BUILDING OWNER**ANDREWS BUILDING CORP**Address **382 LAFAYETTE STREET**City **NEW YORK, NY** State **NY** Zip **10003**

Phone Number _____

GENERATING LOCATIONAddress **4143 MURRY STREET**City **NEW YORK, NY** State **NY** Zip **10003**Phone Number **INV #: F1059**

I certify the above named material does not contain free liquid as defined by 40 CFR part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to NESHAP standards for asbestos waste disposal found in 40 CFR part 61.150.

Shipper's Certification: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national government regulations.

AUTHORIZED SIGNATURE

Transporter 1: **FIBER CONTROL INC.** **3010 BURNS AVENUE WANTAGH, NY 11793** **516-781-3000**

Driver: **Tony Costa** **NY 1480 139 AR** **07/24/02**
Name Address Telephone #
Signature Registration #: State / # Date:

Acknowledgement of receipt of materials.

Transporter 2: **Waste Management N.E.E.T., Inc., PO Box 144, Portland, CT 06480 1-800-272-3867**

Driver: **[Signature]** **0930111 me** **7/25/02**
Signature Registration #: State / # Date:

Acknowledgement of receipt of materials.

TEMPORARY STORAGE / TRANSFER FACILITY: **WASTE MANAGEMENT N.E.E.T., INC. • 203 PICKERING STREET • PORTLAND, CT 06480**
PHONE: (800) 272-3867 PERMIT # SW 1130223

Received By: **N/A** Date: _____

Certification of receipt of materials covered by this manifest.

Transporter 3: **N/A** _____

Driver: **N/A** _____
Name Address Telephone #
Signature Registration #: State / # Date:

Acknowledgement of receipt of materials.

Landfill Name: **Southern Highlands** Phone No: **8744792537**

Location: **Danville, VA 21598** Permit #: **100151/ct/005/60016/2845**

Approximate Volume of Asbestos Received: **1/16 CY**

Discrepancy If Any: _____

Received by: **Muhammad Muneer** Date: **7-26-02**

Certification of receipt of materials covered by this manifest.

COPY 1 - GENERATOR

WTC Visual Survey Form

Premise Address: <u>41 MURRAY</u>		
Block:	Residential ☐ Commercial ☒	Name of Building:
Lot:	Mix Use ☒ Other ☐	
# of Stories: <u>5</u>	AKA's:	
Building Owner/Management:		Telephone Number: ()
Name:		FAX: ()
Address:		
On Site Contact:		Telephone Number: ()
Name:		
Building Owner Management Activities		
Interior Survey Performed ☐ Yes ☐ No		
Exterior Survey Performed ☐ Yes ☐ No		
General Clean Up ☐ Yes ☐ No Locations: _____		
ACM Clean Up ☐ Yes ☐ No Locations: _____		
Air Monitoring ☐ Yes ☐ No Locations: _____		
Copies of All Reports and Data Requested ☐ Yes		

Visual Inspection Results:

Facade:					
		Inspected	Debris		
North	☐ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
South	☐ N/A	☒ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
East	☐ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
West	☐ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Facade Description: <u>broken windows etc DIRTY WINDOWS</u>					
Roof					
Debris: ☒ No Visible /Fine Layer ☐ ½ to 1" ^{light dust} ☐ > 1" ^{1 dust.}					
Description: <u>INSPECTED FROM 37 MURRAY</u>					
Setbacks <u>N/A</u> ☒					
Floor: _____	Debris: ☐ No Visible/Fine Layer		☐ ½ to 1"	☐ > 1"	
Floor: _____	Debris: ☐ No Visible/Fine Layer		☐ ½ to 1"	☐ > 1"	
Floor: _____	Debris: ☐ No Visible/Fine Layer		☐ ½ to 1"	☐ > 1"	
Floor: _____	Debris: ☐ No Visible/Fine Layer		☐ ½ to 1"	☐ > 1"	
Floor: _____	Debris: ☐ No Visible/Fine Layer		☐ ½ to 1"	☐ > 1"	
Comments <u>ROAD CONSTRUCTION</u>					

Date: 01/27/2002
 Inspection Team: Name: AL Agency: _____
 Name: HENRIK Agency: _____