FIBER CONTROL, INC.
3010 BURNS AVENUE
WANTAGH, NY 11793
(516) 781-3000
FAX (516) 781-3085

INVOICE

Date: 09/06/02
Due Date:
Inv. No.: F1137
Page No.: 1

BILL TO: New York City Dept of
Environmental Protection
Asbestos Control Program
59-17 Junction Blvd
Flushing, NY 11373-5108
Att: Alphonso Plumptre
Deputy Lab Director Supervising I.H.

JOB SITE: job sites listed below

REFERENCE	TERMS	YOUR #	OUR #	SALES REP
TEL: 718-595-3671	Upon Completion	CONTRACT ROF-REM1	F1137	PG

DESCRIPTION / REFERENCE	UNIT MEASURE	QUANTITY	UNIT PRICE / ITEM DISCOUNT	EXTENDED PRICE
Exterior Cleanup				

Address	Asphalt Roof	Unit Price	façade	Unit Price	Gravel Roof	Unit Price	Total
49 Murray Street							
ACP-8 rear setback	650	sq ft @ $1.48					962.00
47 Murray Street	2375	sq ft @ $1.48					3,515.00
			1875	sq ft @ $2.50			4,687.50
200 Church Street	8750	sq ft @ $1.48					12,950.00
			13125	sq ft @ $2.50			32,812.50
ACP-8 south façade			4500	sq ft @ $2.50			11,250.00
85 West Broadway (128 chambers st)	7904	sq ft @ $1.48					11,697.92
			5610	sq ft @ $2.50			14,025.00
							$ 91,899.92

R. Rachmuel sent to D... on 9-11-02

WWW.ACTIONHAZMAT.COM

SUB TOTAL	$ 91,899.92
TAX	0.00
TOTAL	$ 91,899.92
NET TO PAY	

FIBER CONTROL, INC.
3010 BURNS AVENUE
WANTAGH, NY 11793
(516) 781-3000
FAX (516) 781-3085

INVOICE

Date: 07/18/02 Inv. No.: F1059
Due Date: Page No.: 1

BILL TO: New York City Dept of
Environmental Protection
Asbestos Control Program
59-17 Junction Blvd
Flushing, NY 11373-5108
Att: Alphonso Plumptre
Deputy Lab Director Supervising I.H.

JOB SITE: job sites listed below

REFERENCE	TERMS	YOUR #	OUR #	SALES REP
TEL: 718-595-3671	Upon Completion	CONTRACT ROF-REM1	F1059	PG

Exterior Cleanup

Address	Asphalt Roof	Unit Price	façade	Unit Price	Total
10-12 CORTLAND ST	6204 sq ft @	1.48			$ 9,181.92
10-12 CORTLAND ST			5400 sq ft @	2.50	$ 13,500.00
110 READE ST	1325 sq ft @	1.48			$ 1,961.00
110 READE ST			2250 sq ft @	2.50	$ 5,625.00
111 READE ST	1998 sq ft @	1.48			$ 2,957.04
111 READE ST			1950 sq ft @	2.50	$ 4,875.00
26 WARREN ST	2392 sq ft @	1.48			$ 3,540.16
26 WARREN ST			1950 sq ft @	2.50	$ 4,875.00
53 WARREN ST	1752 sq ft @	1.48			$ 2,592.96
53 WARREN ST			1800 sq ft @	2.50	$ 4,500.00
54 WARREN ST	2185 sq ft @	1.48			$ 3,233.80
54 WARREN ST			1725 sq ft @	2.50	$ 4,312.50
143 CHAMBERS ST	2075 sq ft @	1.48			$ 3,071.00
143 CHAMBERS ST			1950 sq ft @	2.50	$ 4,875.00
144 CHAMBERS ST	1825 sq ft @	1.48			$ 2,701.00
144 CHAMBERS ST			1875 sq ft @	2.50	$ 4,687.50
145 CHAMBERS ST	2002 sq ft @	1.48			$ 2,962.96
145 CHAMBERS ST			1950 sq ft @	2.50	$ 4,875.00
148 CHAMBERS ST	1750 sq ft @	1.48			$ 2,590.00
148 CHAMBERS ST			2625 sq ft @	2.50	$ 6,562.50
154 CHAMBERS ST			1800 sq ft @	2.50	$ 4,500.00
41/43 MURRAY ST			3525 sq ft @	2.50	$ 8,812.50
49 MURRAY STREET			1950 sq ft @	2.50	$ 4,875.00
51 MURRAY STREET	2470 sq ft @	1.48			$ 3,655.60
51 MURRAY STREET			1950 sq ft @	2.50	$ 4,875.00
53 MURRAY STREET			1800 sq ft @	2.50	$ 4,500.00
26 VESEY STREET	2300 sq ft @	1.48			$ 3,404.00

SUB TOTAL	$ 128,101.44
TAX	0.00
TOTAL	$ 128,101.44
NET TO PAY	

R. Rad

E038 WTC

EMERGENCY

ONLY HANDWRITTEN FORMS WILL BE ACCEPTED

NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Corona, NY 11368-5107

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

TRU0920MN02
Building Dept. or TRU No
FOR OFFICIAL USE ONLY

1. NYC DEP (See fee schedule)

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 49 MURRAY ST Borough N.Y Zip 10007

AKA _____ 3. Block _____ 4. Lot _____

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

II. BUILDING OWNER

7. Name 49 Murray House Condominium 8. Contact Person Vincent Hanley

9. Tel. # (212) 233-2364 x305 Fax # _____

10. Address 49 Murray St City NY State N.Y Zip _____

III. GENERAL CONTRACTOR

11. Name _____ Tel. # _____

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name Fiber Control 13. Contact Person Tony Costa

14. Federal Employer ID. # PII 15. Tel. # 516-781-3000 Fax # 516-781-3085

16. Address 3010 Burns Ave City Wantagh State NY Zip 11793

V. THIRD PARTY AIR MONITOR

17. Name Warren & Panzer Engineers, PC 18. Contact Person Michael Nolan.

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

21. Address 228 East 45th Street City New York State NY Zip 10017.

22. Sample Analysis Laboratory Scientific Laboratories, Inc 23. NYS DOH ELAP # 11480

VI. PROJECT INFORMATION

24. Starting date for this portion of work 6/21/02 Projected completion date 6/29/02

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

Shift from: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm

If other, specify _____

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

RECEIVED
JUN 18 2002
DEP BANKM ASBESTOS/LE PROGRAM TRUG 2

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

1950 Square Feet, and/or _____ Linear Feet

DEP BUREAU OF ENVIRONMENTAL REMEDIATION & ENFORCEMENT ASBESTOS CONTROL PROGRAM TRU 2

ACP 7
2/2001

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler COGANO NYS DEC Permit # CT-098 Tel.# 800-272-3867

Disposal Site(s) SOUTHERN ALLEGHENIES, VALLEY LANDFILL

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

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.)
FACADE	ALL		19.50		

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.

Print Name of Air Monitor	Print Name of Asbestos Contractor	Print Name of Applicant (If other than Owner)
BOSUN GUERRARIE	ANTHONY COSTA	ANTHONY COSTA
Signature	Signature	Signature
06-03-02	6-3-02	6-3-02
Date	Date	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.

A. P
Print Name of Owner

Signature

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

ATC Associates
104 East 25 Street, New York, NY 10010
Phone: (212) 353-8280 Fax: (212) 353-8306

Attn: Mr. Fabio Podone
Warren & Panzer Engineers , P.C.
228 E. 45th Street
New York NY 10017
Fax: (212) 922-0630 Phone: (212) 922-0077
Project: NYC DEP, W&P# 1079.01.02
49 Murray Street

Received: 7/13/02 7:15:00 PM
ATC Group #: 8488
Analysis Date: 7/14/88

Asbestos Fiber Analysis by Transmission Electron Microscopy (TEM) Performed by EPA 40 CFR Part 763 Final Rule (AHERA)

Sample	Volume	Area Analyzed	Non Asb	Asbestos Type(s)	# Structures 0.5µ-5	# Structures 5µ	Analytical Sensitivity (S/cc)	Asbestos Concentration (S/mm²)	Asbestos Concentration (S/cc)	Notes
01 8488 -1	2100.00	0.0450	0	None Detected	0	0	0.0041	<22.24	<0.0041	
02 8488 -2	2100.00	0.0450	0	None Detected	0	0	0.0041	<22.24	<0.0041	
03 8488 -3	2100.00	0.0450	0	None Detected	0	0	0.0041	<22.24	<0.0041	
04 8488 -4	2100.00	0.0450	0	None Detected	0	0	0.0041	<22.24	<0.0041	
05 8488 -5	2100.00	0.0450	0	None Detected	0	0	0.0041	<22.24	<0.0041	

ROMAN PEYSAKHOV
Analyzed by: RPey

MICHAEL A. GORYCKI, Ph.D.
Approved by:

228 East 46th Street
New York, NY 10017
(212) 922-9077
Fax (212) 922-0530

8488

WARREN & PANZER ENGINEERS, P. C.

AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

P.O. ____

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

CLIENT: NYC DEP
PROJECT: 49 Murray St
LOCATION: FACADE

W&P FILE #: 1079 01 02
LABORATORY:
ANALYSIS METHOD (circle one): PCM 7400 / (TEM AHERA — circled) / TEM EPA LEVEL II
TECHNICIAN: Chetram Ramraj

CONTACT:

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	FLOWRATE STOP	TIME ON	TIME OFF	TOTAL TIME	VOLUME (liters)	CONCENTR. (f/cc.)
01	Left Side of Bld	3		10	10	09:12	12:42	210	2100	
02	Right Side of Bld	3		↓	↓	09:13	12:43	210	2100	
03	Right Side of Sidewalk	3		↓	↓	09:14	12:44	210	2100	
04	Left Side of Sidewalk	3		↓	↓	09:15	12:45	210	2100	
05	Centre of Sidewalk	3		↓	↓	09:16	12:46	210	2100	
06	{FIELD}	1	→	→	→	→	→	→	→	
07	{BLANKS}	1	→	→	→	→	→	→	→	

COMMENTS:

SAMPLE BY: Chetram Ramraj DATE: 07/13/02
SIGNATURE: Chetram Ramraj
RELEASED BY: ____ DATE: ____
SIGNATURE: ____
RECEIVED BY: ATC DATE: 07/13/02
SIGNATURE: M. Gro 19:15

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

ATC Associates Inc.
104 East 25 Street
New York, NY 10010
TEL: (212) 353-8280 FAX: (212) 353-8306

FACSIMILE TELECOPY TRANSMISSION

To: Mr. Fabio Pedone
Warren & Panzer Engineers , P.C.

Fax #: (212) 922-0630

Date: Thursday, July 14, 1988

Time: 10:42:06 AM

Comments:

From: ROMAN PEYSAKHOV

ATC Group #: 8488

Client Project: NYC DEP, W&P# 1079.01.02
49 Murray Street

Number of Pages: 3
(including cover page)

TOTAL FEET: 1950 0'

NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
ASBESTOS INSPECTION REPORT

Basis of Inspection: TRU0920MN02

FEE EXEMPT: Yes

1. $0.00

☐ Variance

ONLY TYPEWRITTEN APPLICATIONS WILL BE ACCEPTED

NOTE: ASBESTOS INSPECTION REPORT SHALL BE SUBMITTED TO NYC DEP NOT LESS THAN ONE WEEK IN ADVANCE OF START OF THE WORK (ABATEMENT ACTIVITIES)

START DATE: 6/21/02 PROJ. COMPLETION DATE: 6/29/02

I. FACILITY

ADDRESS: 49 MURRAY ST. BORO: MANHATTAN ZIP: 10007

TYPE OFFACILITY: BLOCK: LOT:

II. BUILDING OWNER

NAME: 49 MURRAY HOUSES CONDOMINIUM Contact

TEL. #:

ADDRESS: 49 MURRAY ST. CITY: NY STATE: NY ZIP:

IV. ASBESTOS ABATEMENT CONTRACTOR

NAME: FIBER CONTROL INC.

TEL. #: (516) 781-3000 FEDERAL EMPLOYER IDENTIFICATION # : PII

ADDRESS: 3010 BURNS AVE CITY: WANTAGH STATE: NY ZIP: 11793

VI. LABORATORY FOR SAMPLE ANALYSIS NAME: SCIENTIFIC LABORATORIES INC - NEW YORK CI

NYS ELAP #: 11480

ASBESTOS WORK SCHEDULE ☑ DAY ☑ EVENING ☐ NIGHT ☐ WEEKENDS ☐ WEEKDAYS

INSPECTOR NAME: Alphonso Plumptre SQUAD #: 1 BADGE #: 401

DATE OF INSPECTION: 7/13/02 TIME OF INSPECTION: From: 2 30 AM ☐ PM ☑

To: 4 00 AM ☐ PM ☑

Contact at site:

Inspection disclosed that the following sections were complied with: (Check all that apply)

☐ 1-51 - Notifications, Reports, Pla	☐ 1-71 - Air Sampling and Monitorin	☐ 1-91 - Worker Protection
☐ 1-101 - Materials and Equipment	☐ 1-116 - Work Place Preparation	☐ 1-117 - Worker Decontamination System
☐ 1-118 - Waste Decontamination System	☐ 1-126 - Engineering Controls	☐ 1-127 - Entry/Exit Procedures
☐ 1-129 - Maintenance of Barriers	☐ 1-138 - Encapsulation	☐ 1-139 - Enclosure
☐ 1-140 - Glovebag	☐ 1-141 - Tent	☐ 1-137 - ACM Disturbance, RemoveL, Handling
☐ 1-146 - Preliminary Clean-up	☐ 1-147 - Final Clean-up	

☐ Project not started . Inspection revealed all ACM to be intact. New start date: / /

☐ Project ongoing, expected completion date: / /

☐ Project completed on or about / / . All surfaces, including abated surfaces are free of visible ACM and encapsulat

☐ Follow up necessary on / /

Samples taken: ☐ No ☐ Yes 1 2 3

4 5 6 Photos taken: ☐ Yes ☐ No

Additional comments: The cleanup of the facade is complete and no visible debris observed after the cleanup.

BORO 1 = MANHATTAN 2 = BRONX 3 = BROOOKLYN 4 = QUEENS 5 = STATEN ISLAND

RESULT CODES 1 = VIOLATION ISSUED 2 = NO VIOLATION ISSUED 3 = NO ACCESS

4 = PROJECT NOT STARTED (NO NOV) 5 = PROJECT COMPLETED (NO NOV)

RESULT CODE 5

SUPERVISOR INITIALS

WASTE MANAGEMENT
LOGANO
P.O. Box 144 • Portland, CT 06480
(860) 342-0667 • 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 49011

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 ☐

GENERATOR/BUILDING OWNER

49 MURRAY HOUSE CONDOMINIUM
Address 49 MURRAY STREET
City NEW YORK, NY 10007 State Zip
Phone Number

GENERATING LOCATION

Address 49 MURRAY STREET
City NEW YORK, NY 10007 State Zip
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 R. Lowney

Transporter 1: FIBER CONTROL INC. (Name) 3010 BURNS AVENUE WANTAGH, NY 11793 (Address) 516-781-3000 (Telephone #)
Driver: Tony Costa (Signature) Registration #: NY / 450 139 AR (State / #) Date: 07/24/02
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) Registration #: 0930111me (State / #) Date: 7/25/02
Acknowledgement of receipt of materials.

TEMPORARY STORAGE / TRANSFER FACILITY: WASTE MANAGEMENT N.E.E.T., INC. • 203 PICKERING STREET • PORTLAND, CT 0648
PHONE: (800) 272-3867 PERMIT # SW 1130223
Received By: N/A Date: _____
Certification of receipt of materials covered by this manifest.

Transporter 3: _____ (Name) _____ (Address) _____ (Telephone #)
Driver: _____ (Signature) Registration #: _____ (State / #) Date: _____
Acknowledgement of receipt of materials.

Landfill Name: Southern Alleghenies Phone No: 814 479 2537
Location: Blandonville PA 15928 Permit #: 00081/ct/005/960716/2845
Approximate Volume of Asbestos Received: 1/16 CY
Discrepancy If Any: _____
Received by: Michael Mare Date: 7-26-02
Certification of receipt of materials covered by this manifest.

COPY 1 - GENERATOR

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-2076
Information Only: ☐ Yes ☐ No

FF038W

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# 092DMN02 Facility Address 49 Murray Street Borough N.Y Zip 10007

Date ACP7 was filed 6/18/02 Variance # (If any) _____

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

Original Start Date 6/21/02 Original Completion Date 6/29/02 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 FIBER CONTROL 13. Contact Person TONY COSTA
14. Federal Employer ID. PII 15. Tel. # (516) 781-3000 Fax # (516) 781-3085
16. Address 3010 BURNS AVENUE City WANTAGH State N.Y Zip 11793

V. THIRD PARTY AIR MONITOR

17. Name WARREN & PANZER ENGINEERS, PC 18. Contact Person MICHAEL NOLAN
19. Federal Employer ID. # _____ 20. Tel. # (212) 922-0077 Fax # (212) 922-0630
21. Address 228 E. 45th St City N.Y State N.Y Zip 10017
22. Sample Analysis Laboratory SCIENTIFIC LABORATORIES INC 23. NYS DOH ELAP # 11480

VI. PROJECT INFORMATION

24. Starting date for this portion of work 8/28/02 Projected completion date 8/28/02 ☐ Project Cancelled ☐ Project Postponed

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 650 Square Feet and/or _____ Linear Feet

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

RECEIVED AUG 29 2002 DEP/BANHM ASBESTOS/LEAD PROGRAM TRUG 9

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 Rear setback (Skylight)
(For each floor list ACM quantity and type)

31/32. Name of Applicant / Owner Alphonso Plumptre Tel. # (718) 595-3682
Name of Company (If any) NYCDEP Fax # _____
Address _____ City _____ State _____ Zip _____

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

Signature of Applicant /Owner — Date 8/28/02

DEP BUREAU OF ENVIRONMENTAL REMEDIATION & ENFORCEMENT ASBESTOS CONTROL PROGRAM TRU 7

ACP 8
2/2001