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

DESCRIPTION / REFERENCE		UNIT MEASURE	QUANTITY	UNIT PRICE / ITEM DISCOUNT	EXTENDED PRICE
Address	Asphalt Roof	Unit Price	facade	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

E068/WTC

EMERGENCY

ONLY TYPEWRITTEN FORMS WILL BE ACCEPTED

NEW YORK CITY DEPARTMENT OF DEP ENVIRONMENTAL PROTECTION www.nyc.gov/dep

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

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

TRU 1001/4

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 53 Murray STREET Borough N.Y Zip 10007

AKA _____ 3. Block 133 4. Lot 11

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

II. BUILDING OWNER

7. Name 53 Murray LLC 8. Contact Person _____

9. Tel. # 6(2)944-810 Fax # _____

10. Address 53 Murray St City N.Y State N.Y Zip 10007

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 7/5/02 Projected completion date 8/12/02

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 28 2002
EP/BANHM
ESTOS/LE
PROGRAM
TRUG
2

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

1800 Square Feet, and/or _____ Linear Feet

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

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler COGNO 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

TR-1001/M102

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			1800		

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 GUANARKE	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 Pedone
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
53 /51 Murray

Received: 7/13/02 8:30:00 PM
ATC Group #: 8484
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 8484 -1	1300.00	0.0674	0	None Detected	0	0	0.0044	<14.83	<0.0044	
02 8484 -2	1300.00	0.0674	0	None Detected	0	0	0.0044	<14.83	<0.0044	
03 8484 -3	1300.00	0.0674	0	None Detected	0	0	0.0044	<14.83	<0.0044	
04 8484 -4	1300.00	0.0674	0	None Detected	0	0	0.0044	<14.83	<0.0044	
05 8484 -5	1300.00	0.0674	0	None Detected	0	0	0.0044	<14.83	<0.0044	

ROMAN PEYSAKHOV
Analyzed by:

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

Accredited for NVLAP PLM/TEM #101187-0, NY State ELAP #10879

228 East 45th Street
New York, NY 10017
(212) 922-0077
Fax (212) 922-0530

8484

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: NYC DEP
PROJECT: 53/51 MURRAY
LOCATION: FA

W&P FILE #: 1079-01-02
LABORATORY: ATC
ANALYSIS METHOD: PCM (circle one) | TEM 7400 | TEM AHERA | TEM EPA LEVEL II
TECHNICIAN: R. FERNANDEZ

CONTACT: _____

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	FLOWRATE STOP	TIME ON	TIME OFF	TOTAL TIME	VOLUME (liters)	CONCENTR (fib./cc.)
01	(L) SIDE BLDG	3		10.0	10.0	0702	0912	130	1300	
02	NO STANDING SIGN (SIDEWALK	3		10.0	10.0	0703	0913			
03	MIDDLE (SIDEWALK	3		10.0	10.0	0704	0914			
04	(R) SIDE BLDG BICADE	3		10.0	10.0	0706	0915			
05	SIDEWALK (R)	3		10.0	10.0	0707	0917	130	1300	
06	FB	1					NA			
07	FB	1					NA			

COMMENTS:

SAMPLE BY: R. FERNANDEZ DATE: 7-13-02
SIGNATURE: _____
RELEASED BY: _____ DATE: _____
SIGNATURE: _____
RECEIVED BY: ATC DATE: 07/13/02
SIGNATURE: M. Gray 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

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: 9:00:43 AM

Comments:

From: ROMAN PEYSAKHOV

ATC Group #: 8484

Client Project: NYC DEP, W&P# 1079.01.02
53 /51 Murray

Number of Pages: 3
(including cover page)

ASBESTOS INSPECTION REPORT

PAGE 1 OF

PREMISE NO.	STREET					INSPECTION DATE
53	Murray St					6/25/02
FLOOR	ZIP	BORO CODE	BLOCK	LOT	SQUAD #	BADGE #
R/F	10007	1	133	11	1	AD10

INSPECTOR	BLDG TYPE	BASIS OF INSPECT.	PHOTOS TAKEN YES / NO
ALPHONSO PLUMPTRE		TRY100/Mno2	

CONTRACTORS NAME: FIBER CONTROL	SAMPLE NO.
ADDRESS: 3010 BURNS AVE CITY: WANTAGH	SAMPLE NO.
STATE: N.Y ZIP: 11793 PHONE: (516) 781-3000	SAMPLE NO.
LABORATORY NAME: WARREN & PANZER ENGINEERS, PC	OWNERS NAME: 53 Murray LLC
ADDRESS: 328 E. 45TH ST CITY: N.Y	ADDRESS CITY
STATE: N.Y ZIP: 10017 PHONE: (212) 922-0077	STATE ZIP PHONE: (212) 964-8700
CONTACT PERSON:	TIME OF INSPECTION FROM: 11 30 am/pm TO: 6 00 am/pm
INSPECTION DISCLOSED:	

The owner instructed specifically not to touch the roof and send us a note except #1 to clean only the facade.

The facade was cleaned on 7/13/02 and passed visual inspection.

NOV #	INFRACTIONS	RESULT CODE
		5
NOV #		SUPERVISORS INITIALS
		a

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 30/93

FILE

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 49013

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
53 MURRAY LLC
Address 53 MURRAY STREET
City NEW YORK, NY 10007 State Zip
Phone Number

GENERATING LOCATION
Address 53 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 _____

Transporter 1: FIBER CONTROL INC. 3010 BURNS AVENUE WANTAGH, NY 11793 516-781-3000
Name Address Telephone #
Driver: Tony Costa Registration #: NY / 480 139 AR Date: 07/24/02
Signature State / #
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: _____ Registration #: 0930111 me Date: 7/25/02
Signature State / #
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: N/A Registration #: _____ Date: _____
Signature State / #
Acknowledgement of receipt of materials.

Landfill Name: Southern Alleghenies Phone No: 814 479 2537
Location: Davidson Rd PA 15928 Permit# 100081/cf/bas/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 - GENERATOR