

WTC Visual Survey Form

Premise Address: 90 West St.		
Block:	Residential ☐ Commercial ☒ Mix Use ☐ Other ☐	Name of Building:
Lot:		
# of Stories: 23	AKA's:	
Building Owner/Management:		Telephone Number: (914) 937 5995
Name: ANDY GORDON		FAX: ()
Address:		
On Site Contact:		Telephone Number: (914) 937 5995
Name: Superintendent Paul GOLDBERG		
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:					
Roof					
Debris: ☒ No Visible /Fine Layer ☐ ½ to 1" ☐ > 1"					
Description: Roof was cleaned by Seaboard					
Waterproofing (212) 240 10731					
Setbacks N/A ☐					
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					
Debris present is from ongoing construction work.					
No visible WTC debris					

Date: 4/15/2004 Inspection by: Name: CARL Agency: DEIS
 Name: _____ Agency: _____

WTC Visual Survey Form

Premise Address: 87 West St		
Block:	Residential ☐ Commercial ☒	Name of Building:
Lot:	Mix Use ☐ Other ☐	
# of Stories:	AKA's:	
Building Owner/Management:		Telephone Number: ()
Name:		FAX: ()
Address:		
On Site Contact:		
Name:		Telephone Number: ()
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: Wrapped in safety net					
Roof					
Debris: ☐ No Visible /Fine Layer ☐ ½ to 1" ☐ > 1"					
Description: _____					
Setbacks N/A ☐					
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					

Date: 5/28/2002

Inspection Team: Name: CAM

Name: _____

Agency: _____

Agency: _____

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