

FIBER CONTROL, INC.

3010 BURNS AVENUE
WANTAGH, NY 11793
(516) 781-3000
FAX (516) 781-3085

INVOICE

09/25/02

F1168

Date:

Inv. No.: 1

Due Date:

Page No.:

**BILL TO: New York City Dept of
Environmental Protection
Asbestos Control Program
59-17 Junction Blvd
Flushing, NY 11373-5108
Att: Alphonso Plumtre
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	F1168	PG

DESCRIPTION	UNIT MEASURE	QUANTITY	UNIT PRICE	EXTENDED PRICE
REFERENCE			ITEM DISCOUNT	

**Exterior Cleanup
Address**

	Asphalt Roof	Unit Price	façade	Unit Price	Gravel Roof	Unit Price	Total
22 Warren Street	roof 2500 sq ft @ 1.48		2250 sq ft @ 2.50				3,700.00 ✓ 5,625.00 ✓
12-16 Vesey Street	façade		3375 sq ft @ 2.50		3450 sq ft @ 2.98		8,437.50 ✓ 10,281.00 ✓ 816.96 ✓ 805.12 ✓ 754.80 ✓ 296.00 ✓
	3rd setback 552 sq ft @ 1.48						
	back setback 544 sq ft @ 1.48						
	2nd fl setback 510 sq ft @ 1.48						
	1st fl setback 200 sq ft @ 1.48						
56-58 Warren Street	roof 4500 sq ft @ 1.48		3275 sq ft @ 2.50				6,660.00 ✓ 8,187.50 ✓
116 Chambers Street	façade		1875 sq ft @ 2.50				4,687.50 ✓
5-7 Dey Street	1st fl (awnings)		780 sq ft @ 2.50				1,950.00 ✓
57 Murray Street	façade		1260 sq ft @ 2.50				3,150.00 ✓ 2,486.40 ✓
	roof 1680 sq ft @ 1.48						
59 Murray Street	façade		780 sq ft @ 2.50				1,950.00 ✓ 3,196.80 ✓ 62,984.58
	roof 2160 sq ft @ 1.48						



WWW.ACTIONHAZMAT.COM

SUB TOTAL	\$ 62,984.58
TAX	0.00
TOTAL	\$ 62,984.58
NET TO PAY	

E158WTC

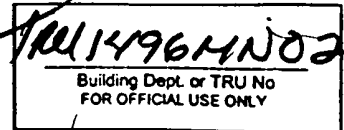


NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program

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

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)



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 56-58 WARREN STREET Borough N.Y. Zip 10007
AKA _____ 3. Block 136 4. Lot 12
5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name 56 WARREN OWNERS CORP. 8. Contact Person _____
9. Tel. # _____ Fax # _____
10. Address 271 MADISON AVENUE City N.Y. State N.Y. Zip 10016

III. GENERAL CONTRACTOR

11. Name _____ Tel. # _____

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name FIBER CONTROL 13. Contact Person TONY COSTA
14. Federal Employer ID. # PII 5. Tel. # 516-781-3000 Fax # 516-781-3085
16. Address 3010 BURNS AVE City WANTASH 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, LLC 23. NYS DOH ELAP # 11480

VI. PROJECT INFORMATION

24. Starting date for this portion of work 9/21/02 Projected completion date 10/21/02

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

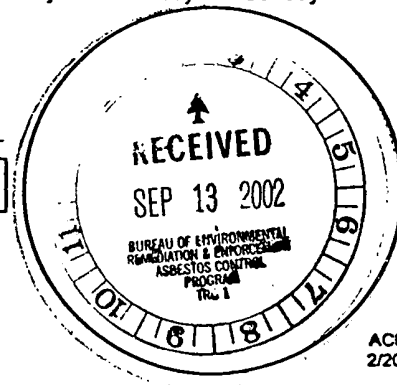
Shift from: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm

If other, specify _____

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

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

7775 Square Feet, and/or _____ Linear Feet



ACP 7
2/2001

DEP
BUREAU OF ENVIRONMENTAL
REMIEDIATION & ENFORCEMENT
ASBESTOS CONTROL
PROGRAM
10/17

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler LOGANO NYS DEC Permit # CT-098 Tel. # 800-272-3867
 Disposal Site(s) Southern Alleghenies, Valley Land Fill

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)

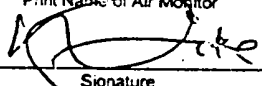
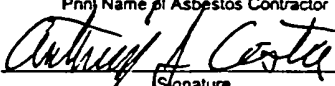
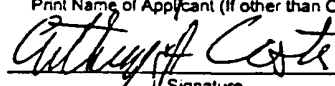
- ☐ Full Containment ☐ Glovebag ☐ Tent ☐ DEP Variance Application

30. LOCATIONS OF ABATEMENT

TRU 14964502

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		DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
			SQUARE FEET	LINEAR FEET	
Roof	(Asphalt)		4500		
Facade			3275		

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.

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

Alfonso Plimpton  9/13/02
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.

ASBESTOS INSPECTION REPORT

HOUSE NO. 56, WARREN STREET					INSPECTION DATE 9/17/02	
ZIP 10007	BORO CODE 1	BLOCK 136	LOT 12	SQUAD # 1	BADGE # AD10	
INSPECTOR PHILIPSON PLUMPTRE		BLDG TYPE	BASIS OF INSPECT. TRM 1496mm		PHOTOS TAKEN YES/NO	
TRACTOR NAME FIBER CONTROL				SAMPLE NO.		
ADDRESS 5010 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 CONESTONE Mgmt Systems INC		
ADDRESS 228 E. 45TH ST CITY N.Y.				ADDRESS 271 MADISON AVE Suite 9101 N.Y.		
STATE N.Y. ZIP 10017 PHONE (212) 922-0077				STATE N.Y. ZIP 10016 PHONE		
CONTACT PERSON:				TIME OF INSPECTION FROM: 5:00 am/pm TO: 9:00 am/pm		
SPECTION DISCLOSED:						

The Cleanup of both facade and roof started simultaneously. All the tenants and the electrical store on main street floor were notified.

After the Cleanup, there were no visible debris on the roof and facade.

NOV #	INFRACTIONS	RESULT CODE
		5
NOV #		SUPERVISORS INITIALS
		RP

- 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 3093

ASBESTOS INSPECTION REPORT

HOUSE NO.		STREET				INSPECTION DATE	
56		WARREN STREET				9/17/02	
DR	ZIP	BORO CODE	BLOCK	LOT	SQUAD #	BADGE #	
JF	10007	1	136	12	1	AD10	
INSPECTOR		BLDG TYPE	BASIS OF INSPECT.			PHOTOS TAKEN YES / NO	
Plumpton			TRU 1496mm				
TRACTORS NAME				SAMPLE NO.			
FIBER CONTROL							
ADDRESS				SAMPLE NO.			
3010 BURNS AVE CITY WANTAGH							
STATE				SAMPLE NO.			
N.Y. ZIP 11793 PHONE (516) 781-3000							
LABORATORY NAME				OWNERS NAME			
WARREN & PAUZEER ENGINEERS, PC				CONESTONE Mgmt Systems INC			
ADDRESS				ADDRESS			
228 E. 45TH ST CITY N.Y.				271 MADISON AVE Suite 1101 N.Y.			
STATE				STATE			
N.Y. ZIP 10017 PHONE (212) 922-0077				N.Y. ZIP 10016 PHONE			
CONTACT PERSON:				TIME OF INSPECTION FROM: 5:00 am/pm TO: 9:00 am/pm			
SPECTION DISCLOSED:							
The cleanup of both facade and roof started simultaneously. All the tenants and the electrical store on main street floor were notified. After the cleanup, there were no visible debris on the roof and facade.							
NOV #						RESULT CODE	
INFRACTIONS						5	
NOV #						SUPERVISORS INITIALS	
						RP	

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 3093

FILE


ATHENICA

ENVIRONMENTAL SERVICES INC.

Tel. (716) 784-7490

Fax. (716) 784-4085

AIRBORNE ASBESTOS ANALYSIS BY TRANSMISSION ELECTRON MICROSCOPY

CLIENT: Warren & Pauzer Engineers, P.C.

LABORATORY ID #: T02-09-061

ANALYT. METHODOLOGY: AHERA

FILTER TYPE: M.C.E.

 AVERAGE G.O. AREA (mm²): 0.013771

PROJECT: NYC DEP, 56-58 Warren Street

DATE OF REPORT: 09/17/02

DATE OF ANALYSIS: 09/17/02

 EFFECTIVE FILTER AREA (mm²): 385

AIRBORNE ASBESTOS ANALYSIS

CLIENT #	LAB. ID #	LOCATION	VOLUME (l)	G.O. ANAL. VOLUME	AREA ANALY. (mm ²)	ANALYT. SENSITIVITY (pg/m ³)	TOTAL ASBESTOS AIR CONC. (pg/m ³)	TOTAL ASBESTOS CONC. (pg/m ³)	AIR CONC. FOR 0.55-5µm	AIR CONC. FOR 0.55-10µm	ASBEST. TYPE CHYRS.	AMPHIB. ASBEST. TYPE SPECTRY
001A	T02-09-061-2370	Center area in street	1300	5	0.0689	0.0043	<0.0043	<14.52	NA	NA	NA	NA
002A	T02-09-061-2371	Left side on sidewalk	1300	5	0.0689	0.0043	<0.0043	<14.52	NA	NA	NA	NA
003A	T02-09-061-2372	Left side adjacent to building	1300	5	0.0689	0.0043	<0.0043	<14.52	NA	NA	NA	NA
004A	T02-09-061-2373	Right side by area	1300	5	0.0689	0.0043	<0.0043	<14.52	NA	NA	NA	NA
005A	T02-09-061-2374	Right side adjacent to gate	1300	5	0.0689	0.0043	<0.0043	<14.52	NA	NA	NA	NA

E. Sioukri

ANALYST

E. Sioukri

LABORATORY DIRECTOR

Spiro Donganis

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 concentrations 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 may 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) 922-0077
Fax (212) 922-0630

WARREN & PANZER ENGINEERS, P. C.

AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

PAGE 1 OF 1

P.O.

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

CLIENT: N.Y.C. Del

PROJECT: Forensic Chemistry

LOCATION: St. 58 Warden St

W&P FILE #: 1079-01-03

LABORATORY: ATC

CONTACT: Nick Nolan

ANALYSIS METHOD: PCM

LLWH:

SCA JOB#:

TECHNICIAN: N. Wells

TECHNICAL: 7400

TECHNICAL: 7400

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	STOP	ON	OFF	TOTAL TIME	VOLUME (liters)	CONCENTRATION (lb./cc.)
001A	Center area in Street	3		10	10	18:00	20:10	130	1300	
002A	Left side on sidewalk	3		10	10	18:01	20:11	130	1300	
003A	Left side adj to bldg	3		10	10	18:02	20:12	130	1300	
004A	Right side by crane	3		10	10	18:03	20:13	130	1300	
005A	Right side adj to gate	3		10	10	18:04	20:14	130	1300	
006	Field	1								
007	Field	1								
008	Sealed	1								

COMMENTS: Bridgman Lab

702-09-061

SAMPLE BY: <u>N. Wells</u>	DATE: <u>9/17</u>
SIGNATURE: <u>N. Wells</u>	DATE: <u>9/17</u>
RELEASED BY: <u>N. Wells</u>	DATE: <u>9/17</u>
SIGNATURE: <u>N. Wells</u>	DATE: <u>9/17</u>
RECEIVED BY: <u>C. Siano</u>	DATE: <u>9/18/02</u>
SIGNATURE: <u>[Signature]</u>	

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