

FIBER CONTROL, INC.

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

INVOICE

Date: 07/18/02
Due Date:

Inv. No.: F1059
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: 718-695-3671	Upon Completion	CONTRACT ROF-REM1	F1059	PG

DESCRIPTION		UNIT MEASURE	QUANTITY	UNIT PRICE	EXTENDED PRICE
REFERENCE				ITEM DISCOUNT	
Exterior Cleanup					
<u>Address</u>	<u>Asphalt Roof</u>	<u>Unit Price</u>	<u>façade</u>	<u>Unit Price</u>	<u>Total</u>
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	
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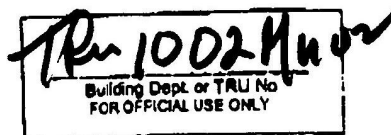
50694
EMERGENCY

ONLY
TYPEWRITTEN
FORMS WILL BE
ACCEPTED



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Corona, NY 11358-5107

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 110 READE STREET Borough N.Y. Zip _____
AKA _____ 3. Block 146 4. Lot 10
5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name SALIM SAUAGE 8. Contact Person _____
9. Tel. # (212) 406-5514 Fax # _____
10. Address 110 Reade 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 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 & PAIZER 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 7/10/02 Projected completion date 8/14/02

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

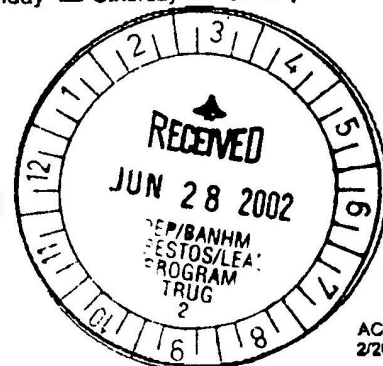
Shift from: _____ am _____ pm to _____ am _____ pm

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

3575 Square Feet, and/or _____ Linear Feet



ACP 7
2/2001

U.S.P.
BUREAU OF ENVIRONMENTAL
RECLAMATION & CONSERVATION
ASBESTOS CONTROL
PROGRAM
10/12

DEP ECB

Fax: 212-361-1433

Jun 28, 2002 11:26 P. 08

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler LOGANO 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

TRU 10024uov

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		DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
			SQUARE FEET	LINEAR FEET	
<u>FACADE</u>	<u>ALL</u>		<u>2250</u>		
<u>ROOF</u>	<u>(ASPHALT)</u>		<u>1325</u>		

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

A. P. [Signature] _____
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

Received: 7/11/02

3:45:00 PM

ATC Group #: 8447

Analysis Date: 7/11/02

Project: NYC DEP, W&P# 1079.01.02

110 Read Street

**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 µ	Analytical Sensitivity (S/cc)	Asbestos Concentration (S/mm ²)	Notes
001A 8447 -1	1400.00	0.0562	0	None Detected	0	0.0049	<17.79	<0.0049
002A 8447 -2	1400.00	0.0562	0	None Detected	0	0.0049	<17.79	<0.0049
003A 8447 -3	1400.00	0.0562	0	None Detected	0	0.0049	<17.79	<0.0049
004A 8447 -4	1400.00	0.0562	0	None Detected	0	0.0049	<17.79	<0.0049
005A 8447 -5	1400.00	0.0562	0	None Detected	0	0.0049	<17.79	<0.0049

MARK PEYSAKHOV

Analyzed by:

MICHAEL A. GORYCKI, Ph.D.

Approved by:

Disclaimer: The laboratory is not responsible for data reported in structures/cc, which is dependant on volume collected by non-laboratory personnel. This lab is only responsible for data reported in structures/mm². This report may not be reproduced, except in full, without written approval by ATC Associates Inc. This report may not be used to claim product endorsement by NVLAP or any other agency of the U.S. Government. This report relates only to the samples reported above. Quality control data (including 95% confidence limits and laboratory and analysis accuracy and precision) is available upon request.

Accredited for NVLAP PLWTEM #101187-0, NY State ELAP #10879

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

CLIENT: NIC DEP

PROJECT: Long Runway

LOCATION: 110th Ave

W&P FILE #: 1679-0502

LABORATORY: ATC

ANALYSIS METHOD: PCM

circle one

TECHNICIAN:

TEM

AHERA

TEM

EPA LEVEL II

CONTACT: Mike Nolan

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	STOP	TIME ON	TIME OFF	TOTAL TIME	VOLUME (liters)	CONCENTR (fib./cc.)
0001A	Entrance to Long Runway	3		10	10	15:30	17:50	140	1400	
0002A	Driveway of Long Runway	3		10	10	15:31	17:51	140	1400	
0003A	Center of road	3		10	10	15:32	17:52	140	1400	
0004A	Adj to Sky Deck	3		10	10	15:33	17:53	140	1400	
0005A	Right side of road	3		10	10	15:34	17:54	140	1400	
0006A	Field Blank									
0007A	Field Blank									
0008A	Sealed Blank									

COMMENTS:

SAMPLE BY: Theresa Wells DATE: 7/11

SIGNATURE: Theresa Wells

RELEASED BY: Michael DATE: 7/11/02

SIGNATURE: Michael

RECEIVED BY: ATC DATE: 7/11/02

SIGNATURE: TD DATE: 15:45

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



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.

From: MARK PEYSAKHOV

ATC Group #: 8447

Fax #: (212) 922-0630

Client Project: NYC DEP. W&P# 1079.01.02

Date: Thursday, July 11, 2002

110 Read Street

Time: 11:43:16 PM

Comments:

Number of Pages:

3

(including cover page)

ATC Associates

104 East 25 Street, New York, NY 10010

Phone: (212) 353-8280

Fax: (212) 353-8306



Received: 7/13/02

8:30:00 PM

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

110 Rade Street

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 µ	Analytical Sensitivity (S/cc)	Asbestos Concentration (S/mm ³)	(S/cc)	Notes
001A 8485 -1	1350.00	0.0674	0	None Detected	0	0	0.0042	<14.83	<0.0042
002A 8485 -2	1350.00	0.0674	0	None Detected	0	0	0.0042	<14.83	<0.0042
003A 8485 -3	1350.00	0.0674	0	None Detected	0	0	0.0042	<14.83	<0.0042
004A 8485 -4	1350.00	0.0674	0	None Detected	0	0	0.0042	<14.83	<0.0042
005A 8485 -5	1350.00	0.0674	0	None Detected	0	0	0.0042	<14.83	<0.0042

ROMAN PEYSAKHOV

Analyzed by:

MICHAEL A. GORYCKI, Ph.D.

Approved by:

Disclaimer: The laboratory is not responsible for data reported in structures/cc, which is dependent on volume collected by non-laboratory personnel. This lab is only responsible for data reported in structures/mm³. This report may not be reproduced, except in full, without written approval by ATC Associates Inc. This report may not be used to claim product endorsement by NVLAP or any other agency of the U.S. Government. This report relates only to the samples reported above. Quality control data (including 95% confidence limits and laboratory and analysis accuracy and precision) is available upon request.

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

Page 1 of 1

WARREN & PANZER ENGINEERS, P. C.
AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

PAGE 1 OF 1

8485

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

P.O.

CLIENT: NICDOP

W&P FILE #: 89-01-02

LABORATORY: ATC

PROJECT: Carade Drive
LOCATION: 110 Leade St

ANALYSIS METHOD: PCM TEM TEM
circle one 7400 AHERA EPA LEVEL II

TECHNICIAN:

CONTACT:

·#人77

SCA-JOB#:

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	FLOWRATE STOP	TIME ON	TIME OFF	TOTAL TIME	VOLUME (liters)	CONCENTRATION (lb./cc.)
001A	Embarras area by steps	3		10	10	15:15	17:30	135	1350	
002A	adj to collar deer	3		10	10	15:16	17:31	135	1350	
003A	adj to bldg in street	3		10	10	15:17	17:32	135	1350	
004A	next to ramp to bldg	3		10	10	15:18	17:33	135	1350	
005A	adj to ramp in street	3		10	10	15:19	17:34	135	1360	
006A	Field	1		10	10					
007	Field	1		10	10					
008	Sealed	1		10	10					

COMMENTS:

SAMPLE BY: John Wiley DATE: 7/10/02
 SIGNATURE: [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

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.

From: ROMAN PEYSAKHOV

Fax #: (212) 922-6630

ATC Group #: 8485

Date: Thursday, July 14, 1988

Client Project: NYC DEP. W&P# 1079.01.02
110 Rcade Street

Time: 9:43:49 AM

Number of Pages: 3
(including cover page)

Comments:

ASBESTOS INSPECTION REPORT

PAGE 1 OF 1

PREMISE NO. 110		STREET READE STREET				INSPECTION DATE 7/11/02	
FLOOR R/F	ZIP	BORO CODE 1	BLOCK 146	LOT 10	SQUAD # 1	BADGE # AD10	
INSPECTOR ALPHONSO PLUMPTRE		BLDG TYPE	BASIS OF INSPECT TRU 1002MN02			PHOTOS TAKEN YES/NO	
CONTRACTORS NAME FIBER CONTROL				SAMPLE NO.			
ADDRESS 3010 BURNS AVE				CITY WANTAGH			
STATE N.Y.		ZIP 11793	PHONE 815-781-3000		SAMPLE NO.		
LABORATORY NAME WARREN & PANZER ENGINEERS, PC				OWNERS NAME SALIM K. SAUJAGE			
ADDRESS 228 E. 45TH ST		CITY N.Y.		ADDRESS		CITY	
STATE N.Y.		ZIP 10017	PHONE 212-922-0077		STATE N.Y.		ZIP 10017
CONTACT PERSON:				TIME OF INSPECTION FROM: 2:30 am/pm TO: 3:35 am/pm			
INSPECTION DISCLOSED:							
The roof was cleaned and no visible debris observed after the cleanup. The facade was cleaned on 7/13/02 and visual inspection was done and there were no visible debris observed on the facade.							

NOV #	INFRACTIONS					RESULT CODE 5
NOV #						SUPERVISORS INITIALS C

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

**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 48752

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 ☐
 U.S. NA2212, PG III

GENERATOR/BUILDING OWNER

SALIM SAUARE
 Address **110 READE STREET**
 City **NEW YORK, NY** State **NY** Zip _____
 Phone Number _____

GENERATING LOCATION

Address **110 READE STREET**
 City **NEW YORK, NY** State **NY** 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**
 Driver: **TONY COSTA** **NY / 480 139 AR** **07/24/02**
 Signature _____ 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: _____ **0930111 me** **7/25/02**
 Signature _____ 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: **NA** Date: _____
 Certification of receipt of materials covered by this manifest.

Transporter 3: **N/A**
 Driver: _____
 Signature _____ State / # _____ Date: _____
 Acknowledgement of receipt of materials.

Landfill Name: **Southern States** Phone No: **800 447 2537**
 Location: **Burlington, VT 05405** Permit # **100081/CT/02/96016/2845**
 Approximate Volume of Asbestos Received: **1/16 CY**
 Discrepancy If Any: _____
 Received by: **Kubal Mack** Date: **7-26-02**
 Certification of receipt of materials covered by this manifest.

COPY 1 - GENERATOR