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

INVOICE

Date: 07/26/02
Due Date:

Inv. No.: F1065
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	F1065	PG

DESCRIPTION / REFERENCE	UNIT MEASURE	QUANTITY	UNIT PRICE / ITEM DISCOUNT	EXTENDED PRIC

Exterior Cleanup

Address	Asphalt Roof	Unit Price	facade	Unit Price	Total
19 PARK PLACE	3473 sq ft @	1.48			$ 5,140.04
19 PARK PLACE			2070 sq ft @	2.50	$ 5,175.00
18 VESEY STREET	4550 sq ft @	1.48	N/A		$ 6,734.00
112 READE STREET	2205 sq ft @	1.48	N/A		$ 3,263.40
					$ 20,312.44

SUB TOTAL	$ 20,312.44
TAX	0.00
TOTAL	$ 20,312.44
NET TO PAY	

E.O.70 WTC

EMERGENCY
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 NOTIFICATION
(ASBESTOS INSPECTION REPORT)

Tfr 100344007
Building Dept. or TRU No.
FOR OFFICIAL USE ONLY

1. NYCDEP
(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 112 Reade St Borough N.Y Zip
AKA 109-113 W. Broadway 3. Block 4. Lot
5. Type of Facility 6. Name of Building

II. BUILDING OWNER

7. Name Cortlandt Realty Co 8. Contact Person
9. Tel. # Fax #
10. Address City State 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 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
2205 Square Feet, and/or _____ Linear Feet

RECEIVED
JUN 28 2002
EP/BANHM
ESTOS/LEA
PROGRAM
TRUG
2

ACP 7
2/2001

DEP
BUREAU OF ENVIRONMENTAL PEST CONTROL & ENFORCEMENT
ASBESTOS CONTROL PROGRAM
TRUG

Jun 28 2002 11:28 P.11 Fax:212-361-1433 DEP ECB

PREMISE NO.	STREET					INSPECTION DATE
112 READE ST / 109-113 WEST BROADWAY						7-17-02
FLOOR	ZIP	BORO CODE	BLOCK	LOT	SQUAD #	BADGE #
Roof	10013	1	146	11	1	AD10

INSPECTOR	BLDG TYPE	BASIS OF INSPECT.	PHOTOS TAKEN YES / NO
ALPHONSO PLUMPTRE		TRU1003M702	

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 CORTLANDT REALTY CO
ADDRESS 328 E. 45TH ST CITY N.Y	ADDRESS 140 Fulton St CITY N.Y
STATE N.Y ZIP 10017 PHONE (212) 922-0077	STATE N.Y ZIP 10038 PHONE
CONTACT PERSON:	TIME OF INSPECTION FROM: 1 00 am/pm TO: 1 30 am/pm
INSPECTION DISCLOSED:	

In the Company of John (the abatement supervisor), I inspected the roof and I observed that it has been Cleaned and no visible debris observed on it.

NOV #	INFRACTIONS	RESULT CODE
		5
NOV #		SUPERVISORS INITIALS

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 49016

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 1/4 CY Friable ☒ Non-Friable ☐

Bag ☒ Drum ☐ Wrapped ☐ Other ☐

GENERATOR/BUILDING OWNER

Address 112 READE STREET

City NEW YORK, NY State Zip

Phone Number

GENERATING LOCATION

Address 112 READE STREET

City State NEW YORK, NY Zip

Phone Number INV #: F1065

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. ANTONY

Transporter 1: FIBER CONTROL INC. (Name) 3010 BURNS AVENUE WANTAGH, NY 11793 (Address) 516-781-3000 (Telephone #)

Driver: TONY COSTA (Signature) Registration #: NY / 480 139 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 #: 0930111 me (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) N/A (Address) (Telephone #)

Driver: _____ (Signature) Registration #: _____ (State / #) Date: _____

Acknowledgement of receipt of materials.

Landfill Name: Southern Alleghenies Phone No. 814 4792537

Location: Davidsville PA 15928 Permit #00081/ct/008/960716/28W

Approximate Volume of Asbestos Received: 1/4 CY

Discrepancy If Any: _____

Received by: Michael Mark Date: 7-26-02

Certification of receipt of materials covered by this manifest.

COPY 1 - GENERATOR