

**BENJAMIN KURZBAN
& SON CONTROL, INC.**
1248 Ralph Ave.
BROOKLYN, N.Y. 11236

(718) 531-2900

INVOICE

1190

TO

Dept of Environmental Protection

59-17 Junction Blvd

Corona, NY 11368

DATE 9/24/02	ORDER NO.
SHIP TO Contract REM-ROF2	

SALESPERSON	DATE SHIPPED	SHIPPED VIA	F.O.B. POINT	TERMS
QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL	
>	Registration # CT 82620020015280			
	Pin# P11			
	For work completed at 215 Pearl St			
	11,085 SF @ 2/SF			
	Total Amount due this Invoice			\$22,170.00
	<i>R. Kurzban</i>			

ORIGINAL

Thank You!

22. Sample Analysis Laboratory

VI. PROJECT INFORMATION

24. Starting date for this portion of work 09/10/02

Projected completion date 10/10/02

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

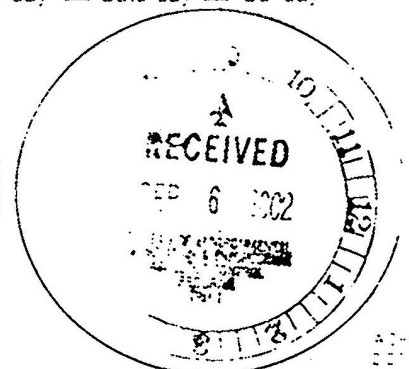
Shift from: 6:00 ☒ am ☐ pm to 6:00 ☐ am ☒ pm

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

9960 Square Feet, and/or 0 Linear Feet



EMERGENCY
UNWRITTEN
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)

Handwritten: 101447MNO
Building Dept. or TRU No
FOR OFFICIAL USE ONLY

1. 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 215 PEARL STREET Borough MAN Zip 10038
AKA _____ 3. Block 68 4. Lot 4
5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name _____ 8. Contact Person _____
9. Tel. # _____ Fax # _____
10. Address _____ City _____ State _____ Zip _____

III. GENERAL CONTRACTOR

11. Name _____ Tel. # _____

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name BENJAMIN KURZBAN & SON CONTROL INC 13. Contact Person LOUIE IANNICO
14. Federal Employer ID. # P11 15. Tel. # (718) 531-2900 Fax # (718) 209-1808
16. Address 1248 RALPH AVENUE City BROOKLYN State NY Zip 11236

V. THIRD PARTY AIR MONITOR

17. Name WARREN & PANZER ENGINEERS 18. Contact Person MICHAEL NOLAN
19. Federal Employer ID. # P11 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 _____ 23. NYS DOH ELAP # _____

VI. PROJECT INFORMATION

24. Starting date for this portion of work 09/10/02 Projected completion date 10/10/02

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

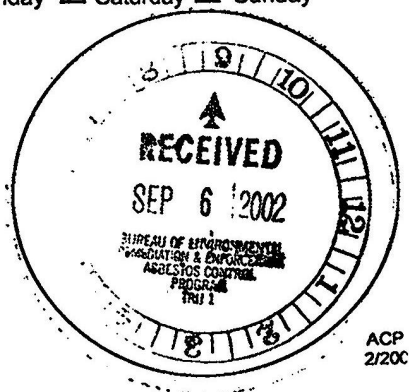
Shift from: 8⁰⁰ ☒ am ☐ pm to 8⁰⁰ ☐ am ☒ pm

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

9960 Square Feet, and/or 0 Linear Feet



ACP
2/20C

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler IESI, NY NYS DEC Permit # NJ-462 Tel.# 522-2263
 Disposal Site(s) BLUE RIDGE LANDFILL PO BOX 399 SCOTSDALE PA 17254

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) _____

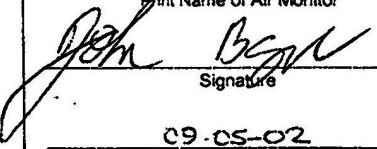
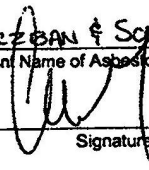
28. TYPE OF ABATEMENT (Check all appropriate boxes)
☐ Removal ☐ Enclosure ☐ Encapsulation ☐ Repair ☒ Clean up

29. ABATEMENT PROCEDURE (Check all appropriate boxes)
☐ Full Containment ☐ Glovebag ☐ Tent ☐ DEP Variance Application

30. LOCATIONS OF ABATEMENT

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 LINEAR FEET	DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
ROOF		ROOF SURFACE	2813	
"	WALL	BULK HEAD	90	
FACADE	WEST FACADE	FIRE ESCAPES	2600	
SET BACK		ROOF SURFACE	899	
"		AC UNITS & METAL	600	
LOWER SET BACK		ROOF SURFACE	348	
FACADE	WEST FACADE	FACADE SURFACE	2610	

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.

WADDEN & PANZER ENGINEERS Print Name of Air Monitor  Signature 09-05-02 Date	B. KURZBAN & SON, CONTROL Print Name of Asbestos Contractor  Signature 09-05-02 Date	Print Name of Applicant (If other than Owner) Signature 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.

 Print Name of Owner

 Signature
 09/05/02
 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.

E148WTC

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 AMENDMENT FORM
FOR FORM ACP 7

FOR OFFICIAL USE ONLY

Fee (if any) \$ _____

Amendment 2002A-2220Information Only: ☐ Yes ☐ No

A modification is valid only if it is received by the NYCDEP prior to the previously filed date of completion, except for start date changes that must be received by the original start date.

ACP7 TRU/BN# 1447MN02 Facility Address 215 PEARL STREET Borough MAN Zip 10038

Date ACP7 was filed 09/10/02 Variance # (if any) _____

Was this ACP7 amended before? ☐ Yes ☒ No If yes, specify date _____

Original Start Date _____ Original Completion Date _____ from ACP 7, #24.

PLEASE ENTER THE INFORMATION THAT IS BEING CHANGED:

A notification may be modified no more than twice.
 Only the building owner may amend items IV and V.
 The original applicant or building owner may amend all other items.

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name _____ 13. Contact Person _____

14. Federal Employer ID. # _____ 15. Tel. # _____ Fax # _____

16. Address _____ City _____ State _____ Zip _____

V. THIRD PARTY AIR MONITOR

17. Name _____ 18. Contact Person _____

19. Federal Employer ID. # _____ 20. Tel. # _____ Fax # _____

21. Address _____ City _____ State _____ Zip _____

22. Sample Analysis Laboratory _____ 23. NYS DOH ELAP # _____

VI. PROJECT INFORMATION

24. Starting date for this portion of work _____ Projected completion date _____

☐ Project Cancelled

☐ Project Postponed

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

Shift from: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm If other, specify _____

25. Additional asbestos-containing material to be disturbed during this work 1125 Square Feet, and/or 0 Linear Feet

Reduction in the amount of ACM to be disturbed during this work _____ Square Feet, and/or _____ Linear Feet

29. Abatement Procedure for Additional Material (Check all appropriate boxes)

☐ Full Containment ☐ Glovebag ☐ Tent ☐ DEP Variance Application

Other Changes _____

30. Locations of abatement modified by above _____
 (For each floor list ACM quantity and type)

31/32. Name of Applicant / Owner _____ Tel. # _____

Name of Company (if any) _____ Fax # _____

Address _____ City _____ State _____ Zip _____

I hereby declare that the information provided herein is true and complete.

Signature of Applicant / Owner

09/10/02
 Date

ACP 8
 2/2001

RECEIVED
 NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
 ASBESTOS CONTROL PROGRAM

Asbestos Inspection Report

Premise No. 215 PEARL STREET					Inspection Date: AS NOTED	
Floor ROOF & FACADE	Zip 10038	Borough 1	Block 68	Lot 4	Squad # N/A	Badge # A020
Inspector Dennis Antzoulatos		Building Type MIXED USE		Basis of Inspection WTC Survey		Photos Taken (Yes/ No)
Contractor's Name Benjamin Kurzban & Son Control				Sample Number N/A		
Address City 1248 Ralph Avenue, Brooklyn				Sample Number N/A		
State Zip Phone NY 11236 (718)531-2900				Sample Number N/A		
Laboratory Name Warren & Panzer Engineers Inc.				Owner's Name		
Address City 228 East 45 Street New York				Address City		
State Zip Phone NY 10017 (212) 922-0077				State Zip Phone		
Contact Person				Time of Inspection from: AS NOTED		

THURSDAY SEPTEMBER 12 2002

THE CLEAN UP OF THE ROOF WORK AREA WAS CONDUCTED TODAY. THE ROOF CLEAN UP OF THE ADJACENT BUILDING, 213 PEARL STREET, WAS PERFORMED SIMULTANEOUSLY. FOR AIR MONITORING PURPOSES THE ROOF AREAS OF THESE TWO BUILDINGS WERE TREATED AS ONE WORK AREA. A REMOTE DECON UNIT WAS ERECTED ON THE ROOF OF 205 PEARL STREET. AIR SAMPLING FOR THIS PORTION OF THE CLEAN UP WAS PERFORMED BY JOHN BOYD (CERTIFICATE # AH 90-05530 EXP 01/03).

FRIDAY SEPTEMBER 13 2002

THE CLEAN UP OF THE WEST (REAR) FACADE WAS CONDUCTED TODAY. THE CLEAN UP OF THE FACADES OF 211 AND 213 PEARL STREET WERE PERFORMED SIMULTANEOUSLY. FOR AIR SAMPLING PURPOSES THE WEST FACADES OF THESE THREE BUILDINGS WERE TREATED AS ONE WORK AREA. AIR SAMPLING WAS PERFORMED BY JOHN BOYD. THE CLEAN UP OF THE SET BACK AREA OF THE PREMISE BEGAN TODAY.

SATURDAY SEPTEMBER 14 2002

THE CLEAN UP OF THE SET BACK AREA IS COMPLETED. AIR SAMPLING WAS PERFORMED BY JOHN BOYD. THE CLEAN UP OF THE EAST FACADE WAS ALSO PERFORMED TODAY. THE CLEAN UP WAS LIMITED TO THE HEPA VACUUMING AND WET WIPING OF WINDOW SURFACES. NO POWER WASHING WAS DONE DUE TO SEVERAL AREAS OF SEVERE CRACKING OF THE BRICK FACADE SURFACE. THE FACADE CLEAN UP OF THE ADJACENT BUILDINGS, 213 AND 211 PEARL STREET OCCURRED SIMULTANEOUSLY. FOR AIR MONITORING PURPOSES THE EAST FACADE OF THESE THREE BUILDINGS WERE TREATED AS ONE WORK AREA. AIR SAMPLING FOR THE FACADE CLEAN UP WAS PERFORMED BY

P4

Asbestos Inspection Report

Premise No. 215 PEARL STREET	Inspection Date: As NOTED
Inspector Dennis Antzoulatos	Page <u>2</u> of <u>2</u>

SATURDAY SEPTEMBER 14 2002 (CONT).

OCHOGRHO ERHABOR (CERTIFICATE # AH00-16198 EXP 12/02). A DECON TRUCK WAS UTILIZED. A BOOM TRUCK WAS USED TO ACCESS THE FACADE. NO PLASTIC DYKE WAS CONSTRUCTED FOR THIS FACADE CLEAN UP BECAUSE NO POWER WASHING ACTIVITIES WERE EMPLOYED. AT THE COMPLETION OF THE CLEAN UP ACTIVITIES I CONDUCTED A VISUAL INSPECTION OF THE CLEANED SURFACES AND I OBSERVED NO VISIBLE WTC DEBRIS. THE CLEAN UP PROJECT AT THE PREMISE IS NOW COMPLETE.

NOTE: THE AREA IN BETWEEN 213 AND 215 PEARL STREET IS LITTERED WITH CONSTRUCTION DEBRIS AND IS NOT ACCESSIBLE. WTC DEBRIS MAY BE PRESENT AT THIS LOCATION.

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