

WTC Visual Survey Form

100419

Premise Address: <u>213 Pearl Street.</u>		
Block: <u>69</u> Lot: <u>5</u>	Residential ☐ Commercial ☐ Mix Use ☐ Other ☐	Name of Building:
# of Stories:	AKA's:	
Building Owner/Management: Name:		Telephone Number: () 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:			
North	☒ N/A	Inspected	Debris
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 <u>Gutter with debris</u>			
Debris: ☒ No Visible/Fine Layer ☒ ½ to 1" ☐ > 1"			
Description: <u>Inspected from 205 Pearl Street</u>			
Setbacks <u>N/A</u> ☒			
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: 2/20/2002

Inspection Team: Name: Moham
Name: _____

Agency: DEP
Agency: _____