WTC Visual Survey Form

Premise Address: 21 South William St

Block: **Lot:** **Residential** ☐ **Commercial** ☒ **Mix Use** ☐ **Other** ☐ **Name of Building:**

# of Stories: 6 **AKA's:**

Building Owner/Management Name: **Telephone Number:** ( ) **FAX:** ( )

Address:

On Site Contact Name: Doris Nieves **Telephone Number:** (212) 594 6046

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:

		Inspected	Debris		
North	☐ N/A	☒ Yes ☐ No	☒ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
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: Construction debris is present.

Roof

Debris: ☒ No Visible /Fine Layer ☐ ½ to 1" ☐ > 1"

Description: New wet ~~roof~~ Concrete roof placed down today.

Setbacks N/A ☐

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 Sampling data submitted.

Date: 11/8/2002 ENTERED **Inspection Team: Name:** CARL **Agency:**

Name: **Agency:**

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# of Stories:	**AKA's:**	

Building Owner/Management: Telephone Number: ( )
Name: 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:

		Inspected	Debris		
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West	☐ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"

Facade Description: No Access

Roof

Debris: ☐ No Visible /Fine Layer ☐ ½ to 1" ☐ > 1"
Description: No Access

Setbacks N/A ☐

Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
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Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"

Comments

Date: 8/30/2002 ENTERED

Inspection Team: Name: CARL Agency: _____
Name: _____ Agency: _____