



**Department of  
Environmental  
Protection**

59-17 Junction Boulevard  
Corona, New York  
11368-5107

**Joel A. Miele Sr., P.E.  
Commissioner**

**Robert C. Avaltroni  
Deputy Commissioner**

**Bureau of Air, Noise, &  
Hazardous Materials**

Tel (718) 595-4418  
Fax (718) 595-4422

April 25, 2002

Richard L. Grossman Family Limited  
85 South Street  
New York, NY 10038-4932

*Subject:* 85 South Street

Dear Sir/ Madam:

In September 2001, the New York City Department and Environmental Protection (NYC DEP) and the Department of Health (NYC DOH) advised building owners regarding building maintenance and re-occupancy issues following the collapse of the World Trade Center. The steps included the professional assessment of building contamination for possible hazardous components, including asbestos, and a retrospective filing, as required, if applicable.

The NYC DEP is hereby requesting copies of the environmental hazard assessments including bulk sample results and air monitoring results and a summary of clean-up activities at the above referenced site. Please forward the requested documents to our offices within FIVE BUSINESS DAYS. They may be faxed to (718) 595-3744 or sent to the NYC DEP Asbestos Control Program at 59-17 Junction Boulevard, 8<sup>th</sup> floor, Corona, New York 11373-5108.

Please be advised building owners are responsible for the cleaning of building exteriors, grounds, and common areas. Adherence to proper cleaning methods is important for the protection of public health and the environment. DEP inspectors will be following up on this matter.

If you have any questions, you may reach the Department at (718) 595-3682 during office hours or the 24-hour Help Center at (718) DEP-HELP. DEP staff is available to provide guidance and technical assistance.

Sincerely,

R. Radhakrishnan, P.E.

Director

Asbestos Control Program



[www.ci.nyc.ny.us/dep](http://www.ci.nyc.ny.us/dep)

(718) DEP-HELP

## WTC Visual Survey Form

1001142

✓

Premise Address: 85 South St

Block: 72 Residential ☒ Commercial ☐ Name of Building: \_\_\_\_\_  
 Lot: 27 Mix Use ☐ Other ☐

# of Stories: 8 AKA's: \_\_\_\_\_

Building Owner/Management: \_\_\_\_\_ Telephone Number: (212) \_\_\_\_\_  
 Name: GPH Laine Mgmt FAX: ( ) 742 1127  
 Address: \_\_\_\_\_

On Site Contact: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_  
 Name: None

Building Owner Management Activities

|                           |                                                                           |
|---------------------------|---------------------------------------------------------------------------|
| Interior Survey Performed | <input type="checkbox"/> Yes <input type="checkbox"/> No                  |
| Exterior Survey Performed | <input type="checkbox"/> Yes <input type="checkbox"/> No                  |
| General Clean Up          | <input type="checkbox"/> Yes <input type="checkbox"/> No Locations: _____ |
| ACM Clean Up              | <input type="checkbox"/> Yes <input type="checkbox"/> No Locations: _____ |
| Air Monitoring            | <input type="checkbox"/> Yes <input type="checkbox"/> No Locations: _____ |

Copies of All Reports and Data Requested ☐ Yes

## Visual Inspection Results:

Facade:

|       |                              | Inspected                                                           | Debris                                                                                                        |
|-------|------------------------------|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| North | <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |
| South | <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |
| East  | <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |
| West  | <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |

Facade Description: \_\_\_\_\_

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Roof

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

Description: \_\_\_\_\_

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Setbacks N/A ☐

|              |                                                                                                                       |
|--------------|-----------------------------------------------------------------------------------------------------------------------|
| Floor: _____ | Debris: <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |
| Floor: _____ | Debris: <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |
| Floor: _____ | Debris: <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |
| Floor: _____ | Debris: <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |
| Floor: _____ | Debris: <input type="checkbox"/> No Visible/Fine Layer <input type="checkbox"/> ½ to 1" <input type="checkbox"/> > 1" |

Comments

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: 4/17/2002

ENTERED

Inspection Team: Name: CR

Name: \_\_\_\_\_

Agency: \_\_\_\_\_

Agency: \_\_\_\_\_

Page: 1 Document Name: Extra

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04/22/02          N.Y.C. DEPARTMENT OF BUILDINGS          BISPIQ31
          MULTI-AGENCY COMPOSITE PROPERTY & OWNER INFORMATION QUERY
85..... SOUTH STREET..... 1 MANHATTAN          10038 BIN# 1001142
DCP GEOGRAPHICAL INFORMATION:
SOUTH STREET          85 - 85          HEALTH AREA : 77          TAX BLK: 72...
SOUTH STREET          84 - 84          CENSUS TRACT: 21009          TAX LOT: 27...
                                   COMMUNITY BD: 101          CONDO :
                                   MULTI STRUCT: 1          CUI NO :
DOF OWNER NAME & ADDRESS FROM BILLING FILE: DOF OWNER NAME FROM PROPERTY FILE
OWNER NAME : RICHARD L GROSSMAN FAMILY LIMI          RICHARD L GROSSMAN FA
CORP. NAME :          LPC LANDMARK STATUS: LANDMARK
ADDRESS : 85          SOUTH ST          DOB LOCAL LAW STATUS: NO
          NEW YORK NY 10038-4932
DOF BUILDING INFORMATION:          TRANS LAND VALUE: 1,450,000
BLDG SIZE: 0036.00 X 0165.00          TAX EXEMPT FLAG : NO
LOT SIZE: 0035.50 X 0164.67          TAX EXEMPT CLASS:
BLDG CLASS : D2 ELEVATOR APT          CITY OWNERSHIP : NO
STORIES : 8          UPDATE DATE : 03/25/02
FOR CITY } MGMT TYPE:          MGMT CODE:          MGMT CODE NAME:
OWNERSHIP }          MGMT HOLDER CODE:          MGMT HOLDER CODE NAME:
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PF1 =PREV  PF2 =MAIN  PF7 = NEW ADDRESS  PF8 = NEW BLK/LOT  PF9 = NEW BIN

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Date: 4/22/ 2 Time: 02:11:21 PM