

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

(718) 531-2900

INVOICE

1145

TO Dept of Environmental Protection
59-17 Junction Blvd
Corona, NY 11373

DATE 7/11/02	ORDER NO.
SHIP TO Re: ROF-REM2	

	Registration # CT82620020015280				
	PIN# 82602WTCROOF2				
	For work completed @ 25 Beekman St				
	8050 SF @ 2/SF				
	Total Amount this Invoice				\$ 16,100.00

ORIGINAL

Thank You!

✓ E011WTC
EMERGENCY
 ONLY
 ASBESTOS
 WILL BE
 NOTED
 www.nyc.gov/dep



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
 59-17 Junction Boulevard, 8th Floor, Corona, NY 11368-5107
ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

TRU0833M02
 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 25 Beekman St Borough Manhattan Zip _____
 AKA _____ 3. Block 92 4. Lot 34
 5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name Rapid Park Industries 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 13. Contact Person Louie Iannico
 14. Federal Employer ID. # PII 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 & Panza 18. Contact Person _____
 19. Federal Employer ID. # PII 20. Tel. # (212) 922-0077 Fax # (212) 922-0630
 21. Address 228 East 45th St 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 6/12/02 Projected completion date 6/7/12/02

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

8050 Square Feet, and/or 0 Linear Feet



ACP 7
 2/2001

25 BEEKMAN STREET

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler IESI, NY NYS DEC Permit # NJ-462 Tel.# (718) 522-2263

Disposal Site(s) BlueRidge 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 ROOF MATERIAL : CONCRETE

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		DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
			SQUARE FEET	LINEAR FEET	
<u>ROOF</u>		<u>ROOF SURFACE</u>	<u>5950</u>		
<u>u</u>		<u>METAL STAIR CASE</u>	<u>900</u>		
<u>u</u>		<u>PARAPET WALLS</u>	<u>960</u>		
<u>u</u>		<u>PARAPET LEDGE</u>	<u>240</u>		

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.

<u>William Panzer</u> Print Name of Air Monitor <u>[Signature]</u> Signature <u>6/6/02</u> Date	<u>B. KURZBAN+SON</u> Print Name of Asbestos Contractor <u>[Signature]</u> Signature <u>6/4/02</u> 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.

[Signature] DEP 06/04/02
 Print Name of Owner Signature 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

ACP7
2/2001

ATC Associates

104 East 25 Street, New York, NY 10010

Phone: (212) 353-8280 Fax: (212) 353-8306



Attn: Mr. Fabio Pedone
 Warren & Panzer Engineers, P.C.
 228 E. 45th Street
 New York NY 10017

Received: 6/13/02 8:00:00 PM
 ATC Group #: 8090
 Analysis Date: 6/14/02

Fax: (212) 922-0630 Phone: (212) 922-0077

Project: NYC-DEP W & P File #: 1079.01.02
 25 Beekman Street.

**Asbestos Fiber Analysis by Transmission Electron Microscopy (TEM) Performed
 by EPA 40 CFR Part 763 Final Rule (AHERA)**

Sample	Volume	Area Analyzed	Non Asb	Asbestos Type(s)	# Structures 0.5µ-3 µm	Analytical Sensitivity (S/cc)	Asbestos Concentration (S/mm ³)	(S/cc)	Notes
01 8090 -1	1620.00	0.0562	0	None Detected	0	0	0.0042	<17.79	<0.0042
02 8090 -2	1620.00	0.0562	0	None Detected	0	0	0.0042	<17.79	<0.0042
03 8090 -3	1620.00	0.0562	0	None Detected	0	0	0.0042	<17.79	<0.0042
04 8090 -4	1620.00	0.0562	0	None Detected	0	0	0.0042	<17.79	<0.0042
05 8090 -5	1620.00	0.0562	0	None Detected	0	0	0.0042	<17.79	<0.0042

MARK PEYSAKHOV

Analyzed by:

MICHAEL A. GORYCKI, Ph.D.

Approved by:

Disclaimer: The laboratory is not responsible for data reported in structures/cc, which is dependent on volume collected by non-laboratory personnel. This lab is only responsible for data reported in structures/mm³. This report may not be reproduced, except in full, without written approval by ATC Associates Inc. This report may not be used to claim product endorsement by NYLAP or any other agency of the U.S. Government. This report relates only to the samples reported above. Quality control data (including 95% confidence limits and laboratory and analysis accuracy and precision) is available upon request.

Accredited for NYLAP PLM/TEM #101187-0, NY State ELAP #10079

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WARREN & PANZER ENGINEERS, P.C.
AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

0608

Analysis Method: PGM - 7400
(circle one) TEM - AHERA
TEM - EPA LEVEL II

W&P FILE #: 1079.01.02
TURN AROUND: 24 HRS.
TECHNICIAN: LOW'S SOTO

CLIENT: NYDEP
PROJECT: ROOFTOP CLEANING
LOCATION: 25 Beckman St.

[illegible]

SAMPLED BY:	L. SOTO	DATE:	6-13-02
SIGNATURE:	<i>[Signature]</i>		
RELEASED BY:	L. SOTO	DATE:	6-13-02
SIGNATURE:	<i>[Signature]</i>		
RECEIVED BY:	<i>[Signature]</i>	DATE:	6/13
SIGNATURE:	<i>[Signature]</i>		20400

SAMPLE TYPE CODES	
1 - Blank	5 - Final Clearance (inside)
2 - Pre-Abatement	6 - Final Clearance (outside)
3 - During Abatement	7 - Personal
4 - During Glove Bag Removal	8 - Background

SEE REVERSE SIDE FOR ANALYST'S INFORMATION

IESI NY CORPORATION

110 5th Street • Brooklyn, NY 11215

Phone: 718-522-2263 • Fax: 718-522-2697

MANIFEST

11103

DATE 6/24/02

G E N E R A T O R	1. Job Site Address 25 Beekman Street N Y New York, N.Y.		Owner's name Dept of Environmental Protection	Wait and Load Time In _____ Time Out _____
	2. Contractor's name and address Benjamin Kurzban & Son 1248 Ralph Avenue Brooklyn, NY 11236			Drop Date
	3. Waste disposal site name and address IESI NY Corporation P.O. Box 399 Scotland, Pa. 17254			WDS phone number Permit # 100934
	4. Name and address responsible agency (Local, District or EPA Office where notification was sent) US EPA 290 Broadway, New York 10007			
T R A N S P O R T E R	5. Description of materials NIF	6. VEH. LIC. #	7. TOTAL QUANTITY	
	(RQ) WASTE ASBESTOS 9, NA2212, III	TYPE	BAGS	
		SIZE	2 CUBIC YARDS	
	8. Generator Certification			
W A S T E S I T E	9. CONTRACTOR CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international government regulations. <i>[Signature]</i>			
	Printed/Typed Name IESI NY CORPORATION • 110 5th Street, Brooklyn, NY 11215		Title DRIVER	
	Signature <i>[Signature]</i>		Date (M/D/Y) 6/24/02	
	DEC Permit No. JA-462			
	11. Transporter #2 (Acknowledgement of receipt of materials)		DEC PERMIT #	
	Printed/Typed Name Jesus		Title DRIVER	
	Signature <i>[Signature]</i>		Date (M/D/Y) 6/24/02	
	12. Discrepancy indication space			
	13. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item #12			
	Printed/Typed Name Kathrina K. Kirk		Title Gatekeeper	
	Signature <i>[Signature]</i>		Date (M/D/Y) 6/26/02	

WHITE:LANDFILL • GREEN:IESI • PINK:GENERATOR • YELLOW:CONTRACTOR • GOLD:JOB SITE