NYC 9/11 Public Portal Document

1001267

WTC Visual Survey Form

Premise Address: 129 Fulton Street

Block: 91 **Lot:** 13

Residential ☐ Commercial ☐ Mix Use ☐ Other ☐

Name of Building:

# of Stories:

AKA's: 129-133 Fulton St / 96-102 Nassau

Building Owner/Management:

Name:

Telephone Number: ( )

FAX: ( )

36-48 Ann St

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		
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:

Roof

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

Description:

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

Date: 2/17/2002

Inspection by: Name: AP Agency: DEP

Name: Agency:

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WTC Visual Survey Form

Premise Address: 129 [redacted] FULTON STREET

Block: 91 **Lot:** 13	Residential ☐ Commercial ☐ Mix Use ☐ Other ☐	**Name of Building:**
# of Stories:	**AKA's:** 36-40 ANN STREET	

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		
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:

Roof

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

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

Date: 2 / 19 2002 Inspection by: Name: C.L. Agency: DEP
Name: _____ Agency: _____