

Jul 17 02 01:41p

P. 4

FIBER CONTROL, INC.
 3010 BURNS AVENUE
 WANTAGH, NY 11793
 (516) 781-3000
 FAX (516) 781-3085

INVOICE

Date: 6/24/02

Inv. No.:

F1027

Due Date:

Page No.:

BILL TO: New York City Dept of
 Environmental Protection
 Asbestos Control Program
 59-17 Junction Blvd
 Flushing, NY 11373-5108
 Att: Alphonso Plumptre
 Deputy Lab Director Supervising I.H.

Job Locations
 See Below

REFERENCE TERMS YOUR # OUR # SALES REP
 F1027 PG

DESCRIPTION REFERENCE	UNIT MEASURE	QUANTITY	UNIT PRICE ITEM DISCOUNT	EXTENDED PRICE
CONTRACT NO. ROF-REM1				
Exterior Cleanup				
<u>Address</u>	<u>Facade</u>	<u>Roof</u>	<u>Lot</u>	<u>Unit Price</u>
96 Chambers Street	720 sq ft			@ \$2.50 per ft
98 Chambers Street	1170 sq ft			@ \$2.50 per ft
155 Chambers Street	1950 sq ft			@ \$2.50 per ft
156 Chambers Street	2160 sq ft			@ \$2.50 per ft
27 Park Place	1520 sq ft			@ \$2.50 per ft
173 Broadway	3720 sq ft			@ \$2.50 per ft
173 Broadway	2400 sq ft			@ \$1.48 per ft
175 Broadway	1875 sq ft			@ \$2.50 per ft
175 Broadway	2000 sq ft			@ \$1.48 per ft
177 Broadway	1950 sq ft			@ \$2.50 per ft
177 Broadway	2470 sq ft			@ \$1.48 per ft
179 Broadway	2340 sq ft			@ \$2.50 per ft
179 Broadway	2860 sq ft			@ \$1.48 per ft
12 Barclay Street (asphalt roof rate as agreed upon)		10,506 sq ft	@ \$1.48	
				Total

SUB TOTAL
 TAX
 TOTAL

73,461.78

NET TO PAY

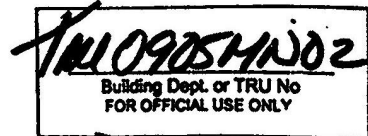
73,461.78

OK 7-17-02

E030WTC



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Corona, NY 11368-5107



ONLY
TYPEWRITTEN
FORMS WILL BE
ACCEPTED

ASBESTOS PROJECT NOTIFICATION (ASBESTOS INSPECTION REPORT)

1. DEP
(See fee schedule)

EMERGENCY

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 12 BARCLAY ST Borough N.Y. Zip 10007
AKA _____ 3. Block _____ 4. Lot _____
5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name BARCLAY STREET REALTY 8. Contact Person Bill Hodel
9. Tel. # (718) 343-0909 Fax # _____ PII
10. Address 1200 Union TPK City NEW HYDE PARK State N.Y. Zip 11040

III. GENERAL CONTRACTOR

11. Name _____ Tel. # _____

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name FIBER CONTROL 13. Contact Person TONY COSTA
14. Federal Employer ID. # _____ PII 15. Tel. # 516-781-3000 Fax # 516-781-3085
16. Address 3010 BURNS AVE City WANTASH State NY Zip 11793

V. THIRD PARTY AIR MONITOR

17. Name WARREN & PANZER ENGINEERS, PC 18. Contact Person MICHAEL NOLAN
19. Federal Employer ID. # _____ 20. Tel. # 212-922-0077 Fax # 212-922-0630
21. Address 228 EAST 45th STREET City NEW YORK State NY Zip 10017
22. Sample Analysis Laboratory SCIENTIFIC LABORATORIES, Inc 23. NYS DOH ELAP # 11480

VI. PROJECT INFORMATION

24. Starting date for this portion of work 6/21/02 Projected completion date 7/21/02

Asbestos work schedule ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

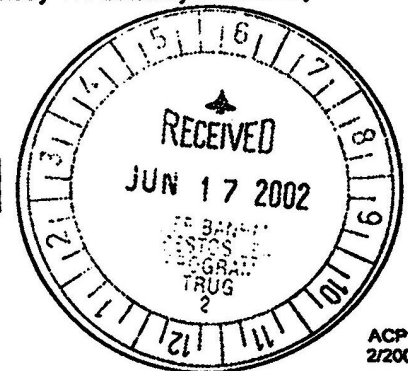
Shift from: _____ am _____ pm to _____ am _____ pm

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

10,506 Square Feet, and/or _____ Linear Feet



ACP 7
2/2001

DEP
BUREAU OF ENVIRONMENTAL
REGULATION & ENFORCEMENT
ASBESTOS CONTROL
PROGRAM
TRUG 2

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler LOGANO NYS DEC Permit # CT-098 Tel.# 800-272-3867
 Disposal Site(s) SOUTHERN ALLEGHENIES, VALLEY LANDFILL

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

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 SQUARE FEET LINEAR FEET	DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
MAIN	ENTIRE PARKING GARAGE ASPHALT GROUND		10,506	

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>BOSUN OGUINAKI</u> Print Name of Air Monitor <u>[Signature]</u> Signature <u>06-03-02</u> Date	<u>ANTHONY COSTA</u> Print Name of Asbestos Contractor <u>[Signature]</u> Signature <u>6-3-02</u> Date	<u>ANTHONY COSTA</u> Print Name of Applicant (If other than Owner) <u>[Signature]</u> Signature <u>6-3-02</u> Date
--	---	---

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.

A.P. [Signature] _____
 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.

JUN-24-2002 16:11

BANHM LABORATORY UNIT

P.03/05

ATC Associates

104 East 25 Street, New York, NY 10010

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



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

Received: 6/23/02 9:30:00 AM
ATC Group #: 8236
Analysis Date: 6/23/02

Fax: (212) 922-0630 Phone: (212) 922-0077
Project: NYC-DEP W & P File #: 1079.01.02
12 Barclay

**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-5 µ	Analytical Sensitivity (S/cc)	Asbestos Concentration (S/mm ²)	(S/cc)	Notes
01 8236 -1	1440.00	0.0562	0	None Detected	0	0	0.0048	<17.79	<0.0048
02 8236 -2	1440.00	0.0562	0	CHRYSTOTILE	0	1	0.0048	17.79	0.0048
03 8236 -3	1440.00	0.0562	0	None Detected	0	0	0.0048	<17.79	<0.0048
04 8236 -4	1680.00	0.0562	0	None Detected	0	0	0.0041	<17.79	<0.0041
05 8236 -5	1680.00	0.0562	0	None Detected	0	0	0.0041	<17.79	<0.0041

ROMAN 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/mm². 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 NVLAP 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 NVLAP PLM/TEM #101167-0, NY State ELAP #10879

Page 1 of 1

JUN-24-2002 15:26

P.03

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: 6/23/02 9:30:00 AM
ATC Group #: 8236
Analysis Date: 6/23/02

Fax: (212) 922-0630 Phone: (212) 922-0077
Project: NYC-DEP W & P File #: 1079.01.02
12 Barclay

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

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02 8236 -2	1440.00	0.0562	0	CHRYSTOTILE	0	1	0.0048	17.79	0.0048
03 8236 -3	1440.00	0.0562	0	None Detected	0	0	0.0048	<17.79	<0.0048
04 8236 -4	1680.00	0.0562	0	None Detected	0	0	0.0041	<17.79	<0.0041
05 8236 -5	1680.00	0.0562	0	None Detected	0	0	0.0041	<17.79	<0.0041

ROMAN PEYSAKHOV

Analyzed by:

MICHAEL A. GORYCKI, Ph.D.

Approved by:

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Accredited for NVLAP PLM/TEM #101187-0, NY State ELAP #10879

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

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

Project: NYC-DEP W & P File #: 1079.01.02
 12 Barclay

Received: 6/23/02 9:30:00 AM

ATC Group #: 8236

Analysis Date: 6/23/02

**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-5 µ	Analytical Sensitivity (S/cc)	Asbestos Concentration (S/mm ²)	(S/cc)	Notes
01 8236 -1	1440.00	0.0562	0	None Detected	0	0	0.0048	<17.79	<0.0048
02 8236 -3	1440.00	0.0562	0	CHRYSTILE	0	1	0.0048	17.79	0.0048
03 8236 -3	1440.00	0.0562	0	None Detected	0	0	0.0048	<17.79	<0.0048
04 8236 -4	1680.00	0.0562	0	None Detected	0	0	0.0041	<17.79	<0.0041
05 8236 -5	1680.00	0.0562	0	None Detected	0	0	0.0041	<17.79	<0.0041

ROMAN PEYSAKHOV

Analyzed by:

MICHAEL A. GORYCKI, Ph.D.

Approved by:

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Accredited for NVLAP P-TEM #10118-0, NY State ELAP #10879



ATC Associates Inc.

104 East 25 Street

New York, NY 10010

TEL: (212) 353-8280 FAX: (212) 353-8306

FACSIMILE TELECOPY TRANSMISSION

To: Mr. Fabio Pedone
Warren & Panzer Engineers, P.C.

From: ROMAN PEYSAKHOV

ATC Group #: 8236

Fax #: (212) 922-0630

Client Project: NYC-DEP W & P File #: 1079.01.02
12 Barclay

Date: Sunday, June 23, 2002

Time: 1:54:26 PM

Number of Pages:

3

(including cover page)

Comments:

ASBESTOS INSPECTION REPORT

PAGE 1 OF

PREMISE NO.		STREET				INSPECTION DATE	
12		Basclay Street				6-22-02	
FLOOR	ZIP	BORO CODE	BLOCK	LOT	SQUAD #	BADGE #	
LOT	10007	1	88	14	1	AD10	
INSPECTOR		BLDG TYPE	BASIS OF INSPECT.			PHOTOS TAKEN YES / NO	
ALPHONSO PLUMPTRE			TRUOGOSMNDZ				
CONTRACTORS NAME				SAMPLE NO.			
FIBER CONTROL							
ADDRESS				SAMPLE NO.			
3010 BURNS AVE WANTAGH							
STATE				SAMPLE NO.			
N.Y. ZIP 11793 PHONE (616) 781-3000							
LABORATORY NAME				OWNERS NAME			
WARREN & PANZER ENGINEERS, PC				Basclay Street Realty.			
ADDRESS				ADDRESS			
228 E. 45TH ST CITY N.Y.				1200 Union TPKE CITY New Hyde Park			
STATE				STATE			
N.Y. ZIP 10017 PHONE (212) 922-0077				N.Y. ZIP 11040 PHONE			
CONTACT PERSON:				TIME OF INSPECTION FROM: TO:			
TONY COSTA				12 MD - 600 AM			
INSPECTION DISCLOSED:							

The parking lot was hoga vacuumed and later washed which made it free of visible debris. Visual inspection was done after the cleanup and no visible debris observed.

NOV #	INFRACTIONS	RESULT CODE
		5
NOV #		SUPERVISORS INITIALS
		W

BORO 1 - MANHATTAN 2 - BRONX 3 - BROOKLYN 4 - QUEENS 5 - RICHMOND

BLDG TYPE A > 6 Stories B < 6 Stories C Single Family
D School E Hospital F Public Owned Property

RESULT CODES 1 - Violation issued 2 - No Violations issued 3 - No Access
4 - Project not Started (No NOV) 5 - Project Completed (No NOV)

ACP 30/93

FILE

**LOGANO**

P.O. Box 144 • Portland, CT 06480
 (860) 342-0667 • Fax: (860) 342-4866
 Out of State 1-800-272-3867

E.P.A. AGENCY

CT, MA, RI, VT, NH, ME
 GENERATORS

EPA New England
 1 Congress Street
 Boston, MA 02114-2023
 (617) 918-1111

NY GENERATORS

EPA Region 2
 290 Broadway, 26th Floor
 New York, NY 10007-1866
 (212) 264-6770

#99 48723

EMERGENCY RESPONSE
 TELEPHONE
 #1-800-272-3867

FB# 6256

ASBESTOS DISPOSAL & DOCUMENTATION FORM

Job Number _____ P.O. # _____
 Contractor **FIBER CONTROL INC.**
 Address **3010 BURNS AVENUE**
 City **WANTAGH** State **NY** Zip **11793**
 Telephone Number **(516) 781-3000**
 Date Container Del. **06/20/02** Date of Pickup **06/26/02**
 Type of Container **100 YARD**
VOLUME 1 CY Friable ☒ Non-Friable ☐
 Bag ☒ Drum ☐ Wrapped ☐ Other ☐
 NA2212 PG 10

GENERATOR/BUILDING OWNER

BARCLAY STREET REALTY
 Address **1200 UNION TPKE**
 City **NEW HYDE PARK, NY** State **NY** Zip **11040**
 Phone Number _____

GENERATING LOCATION

Address _____
 City **12 BARCLAY STREET** State **NY** Zip **10007**
 Phone Number **INV #: F1027**

I certify the above named material does not contain free liquid as defined by 40 CFR part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to NESHAP standards for asbestos waste disposal found in 40 CFR part 61.150.

Shipper's Certification: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national government regulations.

AUTHORIZED SIGNATURE

R. F. F. F. F.

Transporter 1: **FIBER CONTROL INC.** **3010 BURNS AVENUE WANTAGH, NY 11793** **516-781-3000**
 Name Address Telephone #
 Driver: *Anthony Costa* Registration #: **NY / 480 139 AR** Date: **06/25/02**
 Signature State / #
 Acknowledgement of receipt of materials.

Transporter 2: **Waste Management N.E.E.T., Inc., PO Box 144, Portland, CT 06480 1-800-272-3867**
 Driver: *G. Saville* Registration #: **ME / 0348285** Date: **6/26/02**
 Signature State / #
 Acknowledgement of receipt of materials.

TEMPORARY STORAGE / TRANSFER FACILITY: WASTE MANAGEMENT N.E.E.T., INC. • 203 PICKERING STREET • PORTLAND, CT 06480
PHONE: (800) 272-3867 PERMIT # SW 1130223

Received By: **N/A** Date: _____
 Certification of receipt of materials covered by this manifest.

Transporter 3: _____
 Name Address Telephone #
 Driver: **N/A** Registration #: _____ Date: _____
 Signature State / #
 Acknowledgement of receipt of materials.

Landfill Name: **S. Alleghenies** Phone No: **814-479-2531**
 Location: **Darkeville PA 15928** Permit #: **100081/CT/008/960716/284**
 Approximate Volume of Asbestos Received: **1 CY**
 Discrepancy If Any: _____
 Received by: *E. J. J.* Date: **06/10/02**
 Certification of receipt of materials covered by this manifest.

COPY 1 - GENERATOR