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

INVOICE

Revised 9-03-02

Date: 08/28/02
Due Date:

Inv. No.: F1130
Page No.: 1

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 SITE: job sites listed below

REFERENCE	TERMS	YOUR #	OUR #	SALES REP
TEL: 718-595-3671	Upon Completion	CONTRACT ROF-REM1	F1130	PG

Exterior Cleanup

Address		Asphalt Roof	Unit Price	facade	Unit Price	Gravel Roof	Unit Price	Total
22 Barclay Street		10710	@ $1.48					$ 15,850.80
				7560	@ $2.50			$ 18,900.00
16 Barclay Street		6426	@ $1.48					$ 9,510.48
	front bldg			5670	@ $2.50			$ 14,175.00
	back bldg			2835	@ $2.50			$ 7,087.50
14 Barclay Street		3150	@ $1.48					$ 4,662.00
45 Murray Street				2100	@ $2.50			$ 5,250.00
146 Chambers Street		1976	@ $1.48					$ 2,924.48
				1950	@ $2.50			$ 4,875.00
	rear setback	260	@ $1.48					384.80
175 Broadway	rear			3000	@ $2.50			$ 7,500.00
177 Broadway	rear			3000	@ $2.50			$ 7,500.00
179 Broadway	rear			3000	@ $2.50			$ 7,500.00
181 Broadway	rear			3000	@ $2.50			$ 7,500.00
								$ 113,620.06

WWW.ACTIONHAZMAT.COM

SUB TOTAL	$ 113,620.06
TAX	0.00
TOTAL	$ 113,620.06
NET TO PAY	

E140 WTC

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

TRU 1374MN02
Building Dept. or TRU No
FOR OFFICIAL USE ONLY

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

ONLY TYPEWRITTEN FORMS WILL BE ACCEPTED

EMERGENCY
Janet

1. NYC 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 14 Barclay Street Borough N.Y Zip 10007
AKA _____ 3. Block 88 4. Lot 13
5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name Barclay Realty 8. Contact Person Gene Wetzel
9. Tel. # (718) 343-0909 Fax # (718) 343-6471
10. Address 1200 Union Turnpike 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 WANTAGH 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 8/27/02 Projected completion date 9/27/02

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.

RECEIVED
AUG 23 2002
BUREAU OF ENVIRONMENTAL REMEDIATION & ENFORCEMENT
ASBESTOS CONTROL PROGRAM
TRU

25. Total amount of asbestos-containing material to be abated during this work
3150 Square Feet, and/or _____ Linear Feet

DEP
BUREAU OF ENVIRONMENTAL REMEDIATION & ENFORCEMENT
ASBESTOS CONTROL PROGRAM
TRU 7

ACP 7
2/2001

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 1374 NO2

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	AMOUNT OF ACM LINEAR FEET	DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
Roof	(ASPHALT)		3150		

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.

Print Name of Air Monitor	Print Name of Asbestos Contractor	Print Name of Applicant (If other than Owner)
BOSUN O'GUINNARCE	ANTHONY COSTA	ANTHONY COSTA
Signature	Signature	Signature
06-03-02	6-3-02	6-3-02
Date	Date	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.

Alphonso Pennington — Print Name of Owner
Signature
8/23/02 — 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

ASBESTOS INSPECTION REPORT

PREMISE NO.	STREET: 14 Barclay Street					INSPECTION DATE: 8/27/02
FLOOR: Roof	ZIP: 10007	BORO CODE: 1	BLOCK: 88	LOT: 13	SQUAD #: 1	BADGE #: AD10
INSPECTOR: ALPHONSO PLUMPTER	BLDG TYPE:	BASIS OF INSPECT.:				PHOTOS TAKEN YES / NO

CONTRACTORS NAME: FIBER CONTROL	SAMPLE NO.
ADDRESS: 3010 BURNS AVE CITY: WANTAGH	SAMPLE NO.
STATE: N.Y ZIP: 11793 PHONE: (516) 781-3000	SAMPLE NO.
LABORATORY NAME: WARREN & PANZER ENGINEERS, PC	OWNERS NAME: Barclay Realty
ADDRESS: 228 E. 45TH ST CITY: N.Y	ADDRESS: 1200 Union TPKE CITY: New Hyde Park
STATE: N.Y ZIP: 10017 PHONE: (212) 922-0077	STATE: N.Y ZIP: 11040 PHONE: (718) 343-0700
CONTACT PERSON:	TIME OF INSPECTION FROM: 10:30 am/pm TO: 1:00 am/pm
INSPECTION DISCLOSED:	

The Cleanup of the roof was very difficult due to the poor visibility inside the building and the structure was very unsafe.

The roof was cleaned and no visible debris observed after the cleanup.

NOV #	INFRACTIONS	RESULT CODE: 5
NOV #		SUPERVISORS INITIALS: RP

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

ATHENICA
ENVIRONMENTAL SERVICES INC.
Tel. (718) 784-7490
Fax. (718) 784-4085

AIRBORNE ASBESTOS ANALYSIS BY TRANSMISSION ELECTRON MICROSCOPY

CLIENT: Warren & Panzer Engineers, P.C.
LABORATORY ID #: T02-08-146
ANALYT. METHODOLOGY: ABERA
FILTER TYPE: M.C.E.
AVERAGE G.O. AREA (mm^2): 0.012422

PROJECT: NYC DEP, 14 Barclays St.
DATE OF REPORT: 08/28/02
DATE OF ANALYSIS: 08/28/02
EFFECTIVE FILTER AREA (mm^2): 385

LABORATORY RESULTS

CLIENT #	LAB. ID #	LOCATION	VOLUME (l)	G.O.'s ANALYZED	AREA ANALYZED (mm^2)	ANALYT. SENSITIV. (struct./cm^2)	TOTAL ASBESTOS AIR CONC. (struc./cm^3)	TOTAL ASBESTOS FILTER CONC. (str./mm^2)	AIR CONC. FOR STRUCT. 0.5≤S<5µm	AIR CONC. FOR STRUCT. S≥5.0µm	ASBEST. TYPE CHRYS.	AMPHIB. ASBEST TYPE SPECIFY
01	T02-08-146-1969	East side of roof	1440	5	0.0621	0.0043	<0.0043	<16.10	NA	NA	NA	NA
02	T02-08-146-1970	West side of roof	1440	5	0.0621	0.0043	<0.0043	<16.10	NA	NA	NA	NA
03	T02-08-146-1971	South side of roof	1800	4	0.0497	0.0043	0.0043	20.13	<0.0043	0.0043	Chrys.	NA
04	T02-08-146-1972	North side of roof	1440	5	0.0621	0.0043	<0.0043	<16.10	NA	NA	NA	NA
05	T02-08-146-1973	Center of roof	1440	5	0.0621	0.0043	<0.0043	<16.10	NA	NA	NA	NA

ANALYST
E. Dimitrakas

LABORATORY DIRECTOR
Spiro Dongaris

LABORATORY CERTIFICATION NUMBERS: NVLAP 101958, ELAP 10955

- Athenica Environmental Services Inc. (AES), is responsible only for information pertaining to samples taken by its employees.
- Air sampling cassettes will be stored for sixty (60) days. AES Inc., should be notified within this time frame for a tape duplicate analysis.
- If AES Inc., did not conduct the sampling, the reported airborne concentration was derived based on information provided by the client. Under these circumstances, the air concentration data is supplied solely for the convenience of the client.
- The report relates only to items tested. This report must not be used to claim product endorsement by NVLAP or any other agency of the U.S. Government. Test reports may not be reproduced except in full and with prior approval of AES Inc.
- The liability of Athenica Environmental Services Inc. with respect to the services charged, shall in no event exceed the amount of the invoice.

228 East 45th Street
New York, NY 10017
(212) 922-0077
Fax (212) 922-0630

WARREN & PANZER ENGINEERS, P. C.

AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

PAGE ____ OF ____

24 hr+/a 12 hr+/a 6 hr+/a 3 hr+/a Immediate +/a

P.O. _____

CLIENT: NYCDEP
PROJECT: ROOF
LOCATION: 14 BARCLAYS ST

W&P FILE #: 1079-01-02
LABORATORY:
CONTACT:
ANALYSIS METHOD: PCM ~~TEM~~ TEM
(circle one) 7400 AHERA EPA LEVEL II
TECHNICIAN: FESTI OSEMWENRE

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START	FLOWRATE STOP	TIME ON	TIME OFF	TOTAL TIME	VOLUME (liters)	CONCENTR (f/cc.)
01	EAST SIDE OF ROOF	3		6	6	1030	1430	240	1440	
02	WEST " " "	3		6	6	1032	1432	240	1440	
03	SOUTH " " "	3		10	10	1034	1334	180	1800	
04	NORTH " " "	3		6	6	1036	1436	240	1440	
05	CENTER OF ROOF	3		6	6	1038	1438	240	1440	
06	BLANK									
07	"									
08	"									

COMMENTS:

SAMPLE BY: FESTI OSEMWENRE DATE: 08-27-02
SIGNATURE:
RELEASED BY: FESTI OSEMWENRE DATE: 08-27-02
SIGNATURE:
RECEIVED BY: A. CAJIGAL DATE: 8/27/02
SIGNATURE:

T02-08-146

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 ANALYSIS INFORMATION