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

INVOICE

REVISED 8-13-02

Date: 08/08/02 Inv. No.: F1088
Due Date: 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 REF
TEL: 718-595-3671	Upon Completion	CONTRACT ROF-REM1	F1088	PG

DESCRIPTION / REFERENCE	UNIT MEASURE	QUANTITY	UNIT PRICE / ITEM DISCOUNT	EXTENDED PRIC

Exterior Cleanup

Address	Asphalt Roof	Unit Price	facade	Unit Price	Total
92 Reade Street	1500 sq ft @	1.48			$ 2,220.00
94 Reade Street	1500 sq ft @	1.48			$ 2,220.00
92-94 Warren Street	4900 sq ft @	1.48			$ 7,252.00
92-94 Warren Street			3750 sq ft @	2.50	$ 9,375.00
150-152 Chambers Street	3400 sq ft @	1.48			$ 5,032.00
150-152 Chambers St (ACP-8)	750 sq ft @	1.48			$ 1,110.00
75 Murray	1450 sq ft @	1.48			$ 2,146.00
75 Murray			1875 sq ft @	2.50	$ 4,687.50
121 Chambers Street			1950 sq ft @	2.50	$ 4,875.00
121 Chambers St (103 Reade St)			1950 sq ft @	2.50	$ 4,875.00
97 Chambers	7052 sq ft @	1.48			$ 10,436.96
					$ 54,229.46

R. Kaehm

WWW.ACTIONHAZMAT.COM

SUB TOTAL	$ 54,229.46
TAX	0.00
TOTAL	$ 54,229.46
NET TO PAY	

E-121 WTC

ONLY TYPEWRITTEN FORMS WILL BE ACCEPTED

NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Corona, NY 11368-5107

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

TRU 1233MN02
Building Dept. or TRU No
FOR OFFICIAL USE ONLY

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 97 CHAMBERS STREET Borough N.Y Zip 10007
AKA 79-81 READE ST 3. Block 149 4. Lot 12
5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name DEE & DEE CHAMBERS STREET 8. Contact Person _____
9. Tel. # (212) 243-5620 Fax # _____
10. Address 97 CHAMBERS ST City N.Y State N.Y Zip 10007

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 8/2/02 Projected completion date 9/2/02

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
7,052 Square Feet, and/or _____ Linear Feet

RECEIVED
AUG 0 2 2002
DEP ASBESTOS CONTROL PROGRAM TRU 1

DEP BUREAU OF ENVIRONMENTAL COMPLIANCE & ENFORCEMENT ASBESTOS CONTROL PROGRAM TRU 1

ACP 2/200

ASBESTOS INSPECTION REPORT (continued)

*26. Asbestos Hauler COGANO 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 TRE1233HN02

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)		7,052		

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 OGUNNAIKE	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.

Print Name of Owner	Signature	Date
Alphonso Plumpton		8/2/02

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

PAGE 1 OF __

PREMISE NO. / STREET: 97 CHAMBERS STREET						INSPECTION DATE: 8/2/02
FLOOR: Roof	ZIP: 10007	BORO CODE: 1	BLOCK	LOT	SQUAD #: 1	BADGE #: AD10
INSPECTOR: ALPHONSO PLUMPTRE	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: Dee & Dee of Chambers St
ADDRESS: 228 E. 45TH ST CITY: N.Y	ADDRESS: 97 Chambers St CITY: N.Y
STATE: N.Y ZIP: 10017 PHONE: (212) 922-0077	STATE: N.Y ZIP: 10007 PHONE
CONTACT PERSON:	TIME OF INSPECTION FROM: 12 15 am/pm TO: 1 00 am/pm
INSPECTION DISCLOSED:	

The cleanup of the started in the early part of the day. Visual inspection was done on the roof after the cleanup and no visible debris on the roof.

NOV #	INFRACTIONS	RESULT CODE: 5
NOV #		SUPERVISORS INITIALS

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