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 Inv. No.: F1130
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 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	

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

CONTRACT NO. ROF-REM1
Exterior Cleanup

Address	Façade	Roof	Lot	Unit Price	Total
96 Chambers Street	720 sq ft			@ $2.50 per ft	1,800.00
98 Chambers Street	1170 sq ft			@ $2.50 per ft	2,925.00
155 Chambers Street	1950 sq ft			@ $2.50 per ft	4,875.00
156 Chambers Street	2160 sq ft			@ $2.50 per ft	5,400.00
27 Park Place	1520 sq ft			@ $2.50 per ft	3,800.00
173 Broadway	3720 sq ft			@ $2.50 per ft	9,300.00
173 Broadway		2400 sq ft		@ $1.48 per ft	3,552.00
175 Broadway	1875 sq ft			@ $2.50 per ft	4,687.50
175 Broadway		2000 sq ft		@ $1.48 per ft	2,960.00
177 Broadway	1950 sq ft			@ $2.50 per ft	4,875.00
177 Broadway		2470 sq ft		@ $1.48 per ft	3,655.60
179 Broadway	2340 sq ft			@ $2.50 per ft	5,850.00
179 Broadway		2860 sq ft		@ $1.48 per ft	4,232.80
12 Barclay Street (asphalt roof rate as agreed upon)			10,506 sq ft	@ $1.48	15,548.88

SUB TOTAL	73,461.78
TAX	
TOTAL	
NET TO PAY	73,461.78

OK 7.17.02

E027 WTC

EMERGENCY

ONLY TYPEWRITTEN FORMS WILL BE ACCEPTED

NEW YORK CITY DEPARTMENT OF DEP ENVIRONMENTAL PROTECTION 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)

Building Dept. or TRU No FOR OFFICIAL USE ONLY: ~~M1089411NO2~~

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 177 BROADWAY Borough NY Zip 10007

AKA _____ 3. Block _____ 4. Lot _____

5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name CENTURY REALTY INC 8. Contact Person _____

9. Tel. # (212) 267-7778 Fax # _____

10. Address 140 Fulton St City N.Y. State N.Y. Zip 10038

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 6/18/2002 Projected completion date 7/18/2002

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 JUN 17 2002 DEP BANKS ASBESTOS/LEAD PROGRAM TRUG 2

25. Total amount of asbestos-containing material to be abated during this work

4420 Square Feet, and/or _____ Linear Feet

DEP BUREAU OF ENVIRONMENTAL REMEDIATION & ENFORCEMENT ASBESTOS CONTROL PROGRAM TRU 2

ACP 2/20

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	AMOUNT OF ACM LINEAR FEET	DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
FACADE	ALL		1950		
Roof	ASPHALT		2470		

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 GUARNACCE	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.

A. P
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
2/2

ASBESTOS INSPECTION REPORT

PREMISE NO. 177	STREET Broadway					INSPECTION DATE 6-18-02
FLOOR RF	ZIP 10007	BORO CODE 1	BLOCK 63	LOT 19	SQUAD # 1	BADGE # AD10
INSPECTOR ALPHONSO PLUMPTER	BLDG TYPE	BASIS OF INSPECT. TRU0894MM02				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 Century Realty Inc
ADDRESS 228 E. 45TH ST CITY N.Y	ADDRESS 140 Fulton St CITY N.Y
STATE N.Y ZIP 10017 PHONE (212) 922-0077	STATE N.Y ZIP 10038 PHONE (212) 267-7778
CONTACT PERSON: TONY COSTA	TIME OF INSPECTION FROM: 8:00 am/pm TO: 5:00 pm/pm
INSPECTION DISCLOSED:	

Checked all the handlers and supervisor licenses and all were in order. The Air Technicians was also on site. After the Completion of the roof Cleanup; Visual inspection was Conducted and it was free of visual debris.

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

FILE

ASBESTOS INSPECTION REPORT

PREMISE NO. 177	STREET Broadway					INSPECTION DATE 6-22-02
FLOOR FACADE	ZIP 10007	BORO CODE 1	BLOCK 63	LOT 19	SQUAD # 1	BADGE # AD10
INSPECTOR ALPHONSO PLUMPTRE	BLDG TYPE	BASIS OF INSPECT. TRM0894MM02			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 Century Realty Inc
ADDRESS 228 E. 45TH ST CITY N.Y	ADDRESS 140 Fulton St CITY NY
STATE N.Y ZIP 10017 PHONE (212) 922-0077	STATE N.Y ZIP 10038 PHONE
CONTACT PERSON: TONY COSTA	TIME OF INSPECTION FROM: am/pm 12MD TO: am/pm 600 AM
INSPECTION DISCLOSED:	

The cleanup of the facade failed once after the 1st Visual inspection and was recleaned. Final visual inspection was done and no visible debris observed on the facade.

NOV #	INFRACTIONS	RESULT CODE 5
NOV #		SUPERVISORS INITIALS a

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

WASTE MANAGEMENT
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 48721

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 06/25/02

Type of Container 100 YARD

VOLUME 1/2 CY Friable ☒ Non-Friable ☐

Bag ☒ Drum ☐ Wrapped ☐ Other ☐

NA2212 PG I

GENERATOR/BUILDING OWNER

CENTURY REALTY INC

Address 140 FULTON STREET

City NEW YORK, NY 10007 State Zip

Phone Number

GENERATING LOCATION

Address 177 BROADWAY

City NEW YORK, NY 10007 State Zip

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. Hanlon

Transporter 1: FIBER CONTROL INC. (Name) 3010 BURNS AVENUE WANTAGH, NY 11793 (Address) 516-781-3000 (Telephone #)

Driver: Anthony Costa (Signature) Registration #: NY / 480 139 AR (State / #) Date: 06/25/02

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: Joseph Ulick (Signature) Registration #: ME/0348285 (State / #) Date: 6/26/02

Acknowledgement of receipt of materials.

TEMPORARY STORAGE / TRANSFER FACILITY: WASTE MANAGEMENT N.E.E.T., INC. • 203 PICKERING STREET • PORTLAND, CT 0648(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 (Signature) Registration #: _____ (State / #) Date: _____

Acknowledgement of receipt of materials.

Landfill Name: S. Alleghenies Phone No: 814-479-2531

Location: Davidsville PA 15928 Permit #: 100081/CT/008/960716/2803

Approximate Volume of Asbestos Received: 1/2 cy

Discrepancy If Any: _____

Received by: Eric Smith Date: 06/27/02

Certification of receipt of materials covered by this manifest.

COPY 1 - GENERATOR

ONLY TYPEWRITTEN FORMS WILL BE ACCEPTED

KRISH

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

ASBESTOS PROJECT AMENDMENT FORM
FOR FORM ACP 7

www.nyc.gov/dep

FOR OFFICIAL USE ONLY
Fee (if any) $ _____
2002-A-1951
Amendment _____
Information Only: ☐ Yes ☐ No

A modification is valid only if it is received by the NYCDEP prior to the previously filed date of completion, except for start date changes that must be received by the original start date.

ACP7 TRU/BN# D894mm02 Facility Address 177 Broadway Borough N.Y Zip _____

Date ACP7 was filed 6/17/02 Variance # (if any) _____

Was this ACP7 amended before? ☐ Yes ☒ No If yes, specify date _____

Original Start Date 6/18/02 Original Completion Date 7/16/02 from ACP 7, #24.

PLEASE ENTER THE INFORMATION THAT IS BEING CHANGED:

A notification may be modified no more than twice.
Only the building owner may amend items IV and V.
The original applicant or building owner may amend all other items.

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name FIBER CONTROL 13. Contact Person TONI COSTA

14. Federal Employer ID. # PII 15. Tel. # (516) 781-3000 Fax # (516) 781-3085

16. Address 3010 BURNS AVENUE City WANTAGH State N.Y 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 E. 45th St City N.Y State N.Y 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 8/13/02 Projected completion date 8/31/02 ☐ Project Cancelled ☐ Project Postponed

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

Shift from: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm If other, specify _____

25. Additional asbestos-containing material to be disturbed during this work 3000 Square Feet, and/or _____ Linear Feet

Reduction in the amount of ACM to be disturbed during this work _____ Square Feet, and/or _____ Linear Feet

RECEIVED
AUG 14 2002
DEP/BEAU...
ASBESTOS CONTROL
PROGRAM
TRU 2

29. Abatement Procedure for Additional Material (Check all appropriate boxes)
☐ Full Containment ☐ Glovebag ☐ Tent ☐ DEP Variance Application

Other Changes _____

30. Locations of abatement modified by above REAR FACADE
(For each floor list ACM quantity and type)

31/32. Name of Applicant / Owner Alphonso Plunkett Tel. # (718) 595-3682

Name of Company (if any) NYCDEP Fax # _____

Address _____ City _____ State _____ Zip _____

I hereby declare that the information provided herein is true and complete.

Signature of Applicant /Owner _____ Date 8/9/02

DEP BUREAU OF ENVIRONMENTAL REMEDIATION & ENFORCEMENT ASBESTOS CONTROL PROGRAM TRU 2

ACP 8
2/2001

PAGE 1 OF ____

ASBESTOS INSPECTION REPORT

PREMISE NO. 177	STREET Broadway					INSPECTION DATE 8/13/02
DOOR Rear Facade	ZIP 10007	BORO CODE 1	BLOCK 63	LOT 19	SQUAD # 1	BADGE # AD10
INSPECTOR T. Thomas PLUMPTON	BLDG TYPE B	BASIS OF INSPECT. TRIM 8.94 mod 2 E027 WTC				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 Century Realty Inc
ADDRESS 328 E. 45TH ST CITY N.Y	ADDRESS 140 Fulton St CITY NYC
STATE N.Y ZIP 10017 PHONE (212) 922-0077	STATE N.Y ZIP PHONE
CONTACT PERSON:	TIME OF INSPECTION FROM: 10 am/pm TO: 2:30 am/pm
INSPECTION DISCLOSED:	

The Cleanup of the rear facade was completed on 8/15/02 and Visual inspection was done after the Cleanup. No visible debris observed after the Cleanup.

NOV #	INFRACTIONS	RESULT CODE
		5
NOV #		SUPERVISORS INITIALS
		rl

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