

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

INVOICE

12/06/02

F1238

Date:

Inv. No.: 1

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 SITE: 189 Broadway
 AKA 1-3 Dey Street
 New York, NY 10007**

REFERENCE

TEL: 718-595-3671

TERMS

Upon Completion

YOUR #

CONTRACT ROF-REM1

OUR #

F1238

SALES REP

PG

DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	EXTENDED PRICE
REFERENCE	MEASURE		ITEM DISCOUNT	

clean asphalt roof	1800 sq. ft @	1.48	2,664.00
clean façade (Dey Street)	3675 sq. ft @	2.50	9,187.50
clean façade (Broadway)	1575 sq. ft @	2.50	3,937.50
clean additional façade	1500 sq. ft @	2.50	3,750.00
			<u>19,539.00</u>

R. Roshan
Sent to Denise
1-17-03

WWW.ACTIONHAZMAT.COM

SUB TOTAL	
TAX	\$ 19,539.00
TOTAL	0.00
	\$ 19,539.00
NET TO PAY	

E233WTC



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

TRU1947MND2
FOR OFFICIAL USE ONLY

ONLY
TYPEWRITTEN
FORMS WILL BE
ACCEPTED

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

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 189 BROADWAY Borough N.Y Zip 10007
AKA 1-3 DEY STREET 3. Block 63 4. Lot 13
5. Type of Facility _____ 6. Name of Building _____

II. BUILDING OWNER

7. Name DAVID BALDWIN 8. Contact Person _____
9. Tel. # _____ Fax # _____
10. Address 113 Cedar St City N.Y State N.Y Zip 10006

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 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 NY Zip 10017
22. Sample Analysis Laboratory SCIENTIFIC LABORATORIES INC 23. NYS DOH ELAP # 11480

VI. PROJECT INFORMATION

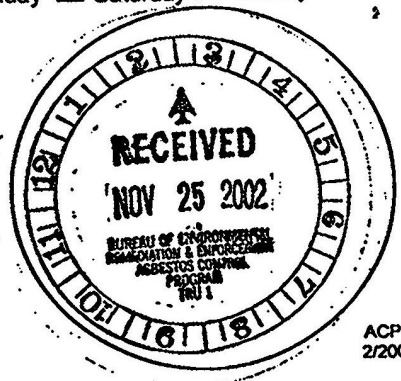
24. Starting date for this portion of work 11/25/02 Projected completion date 11/30/02

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

7050 Square Feet, and/or _____ Linear Feet



ACP
2/200

BUREAU OF ENVIRONMENTAL
REMEDIATION & ENFORCEMENT
ASBESTOS CONTROL
PROGRAM
TRU 1

ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler _____ NYS DEC Permit # _____ Tel.# _____

Disposal Site(s) _____

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		DESCRIPTION OF WORK BEING PERFORMED (e.g. running cable, installing fire sprinklers, removing and replacing boilers, etc.)
			SQUARE FEET	LINEAR FEET	
Roof	(Asphalt)		1800		
Facade	(Bay st		3675		
Facade	(Broadway)		1575		

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>DW ERHARDT</u> Print Name of Air Monitor <u>[Signature]</u> Signature <u>11-23-02</u> Date	<u>ANTHONY J. COSTA</u> Print Name of Asbestos Contractor <u>[Signature]</u> Signature <u>11-22-02</u> Date	<u>ANTHONY J. COSTA</u> Print Name of Applicant (If other than Owner) <u>[Signature]</u> Signature <u>11-22-02</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.

ALPHONSO PLUMPTRE [Signature] 11/25/02
 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.

NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program

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

TRU1947MND2

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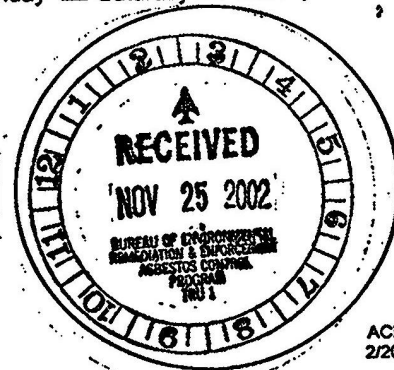
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If other,
specify _____

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7050 Square Feet, and/or _____ Linear Feet

ACP
2/200

ASBESTOS INSPECTION REPORT (continued)

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			SQUARE FEET	LINEAR FEET	
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Print Name of Owner Signature Date

A STAMPED COPY OF THIS FORM INCLUDING AMENDMENTS MUST BE AVAILABLE AT THE WORK SITE.

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ACP7
2/2001

Asbestos Inspection Report

Premise No. 189 BROADWAY					Inspection Date: 11-26-02	
Floor ROOF & FACADE	Zip 10048	Borough 1	Block	Lot	Squad # N/A	Badge # A020
Inspector Dennis Antzoulatos		Building Type COMMERCIAL		Basis of Inspection WTC Survey		Photos Taken Yes ☒ No ☐
Contractor's Name ACTION REMEDIATION INC./FIBER CONTROL				Sample Number N/A		
Address City 3010 BURNS AVENUE WANTAGH				Sample Number N/A		
State Zip Phone NY 11793 (516) 781-3000				Sample Number N/A		
Laboratory Name Warren & Panzer Engineers Inc.				Owner's Name		
Address City 228 East 45 Street New York				Address City		
State Zip Phone NY 10017 (212) 922-0077				State Zip Phone		
Contact Person				Time of Inspection from: 0600 PM - 1200 MID		
TUESDAY NOVEMBER 26 2002 THE CLEAN UP OF THE ROOF AREA BENEATH THE A/C UNITS AND THE REMAINING PORTION OF THE NORTH FACADE WAS CONDUCTED. THE CLEAN UP OF THE EAST FACADE AND A PORTION OF THE NORTH FACADE HAD BEEN PERFORMED YESTERDAY. A PLASTIC DYKE WAS CONSTRUCTED TO COLLECT WATER RUN OFF. PLASTIC SHEETING WAS ALSO INSTALLED BEHIND THE METAL ROLL DOWN GATE OF THE "STYLZ" CLOTHING STORE. A GAP EXISTS BETWEEN THE FACADE SIGN AND THE ROLL DOWN GATE. AIR SAMPLING FOR THIS PORTION OF THE CLEAN UP PROJECT WAS PERFORMED BY JOHN BURGESS (CERTIFICATE # P11 EXP 09/03) OF WARREN & PANZER ENGINEERS. AIR SAMPLING EQUIPMENT WAS SET UP ON THE STREET AND SIDEWALK JUST BEYOND THE PLASTIC DYKE. ALL FACADE SURFACES WERE THOROUGHLY HEPA-VACUUMED AND THEN POWER WASHED WITH A LOW PRESSURE SPRAY. AT THE CONCLUSION OF CLEAN UP ACTIVITIES, I CONDUCTED A VISUAL INSPECTION OF THE CLEANED FACADE SURFACES AND I OBSERVED NO VISIBLE WTC DEBRIS. THE CONTRACTOR WILL BE ON SITE EARLY IN THE MORNING TO REMOVE THE PLASTIC SHEETING INSTALLED BEHIND THE METAL ROLL DOWN GATE AND TO PERFORM ANY MINOR CLEANING OF STORE FRONT WINDOWS THAT MAY HAVE RESIDUAL DEBRIS FROM WATER SEEPAGE.						
WEDNESDAY NOVEMBER 27 2002 THE PLASTIC SHEETING INSTALLED BEHIND THE METAL ROLL DOWN GATE OF THE "STYLZ" CLOTHING STORE IS REMOVED. MINOR RECLEANING OF THE INSIDE PORTION (BACK) OF THE GATE IS PERFORMED. THE CLEAN UP PROJECT AT THE PREMISE IS NOW COMPLETE.						

A

12/02/2002 08:53 FAX

**ATHENICA**

ENVIRONMENTAL SERVICES INC.

Tel. (718) 764-7490

Fax. (718) 764-4085

CLIENT: Waiten & Panzer Engineers, P.C.

LABORATORY ID #: T02-11-117

ANALYT. METHODOLOGY: AHERA

FILTER TYPE: M.C.E.

AVERAGE G.O. AREA (mm²): 0.013433

PROJECT: NYC DEP, 189 Broadway Street

DATE OF REPORT: 11/27/02

DATE OF ANALYSIS: 11/27/02

EFFECTIVE FILTER AREA (mm²): 385**LABORATORY RESULTS**

CLIENT #	LAB. ID #	LOCATION	VOLUME (ft ³)	G.O. ANALYZED	AREA ANALYZED (mm ²)	ANALYT. SENSITIVITY (ft ³ /mm ²)	TOTAL ASBESTOS AIR CONC. (ft ³ /mm ²)	TOTAL ASBESTOS FILTER CONC. (ft ³ /mm ²)	AIR CONC. FOR STRUCT. 0.55<3µm	AIR CONC. FOR STRUCT. S>5.0µm	ASBEST. TYPE CHRYS.	AMPHIB. ASBEST. TYPE SPECIFY
01	T02-11-117-4299	10' from Stock Exchange	1800	4	0.0537	0.0040	<0.0040	<18.61	NA	NA	NA	NA
02	T02-11-117-4300	10' from Photo Lab	1800	4	0.0537	0.0040	<0.0040	<18.61	NA	NA	NA	NA
03	T02-11-117-4301	Corner of Broadway/Dey	1800	4	0.0537	0.0040	<0.0040	<18.61	NA	NA	NA	NA
04	T02-11-117-4302	10' from train station	1800	4	0.0537	0.0040	<0.0040	<18.61	NA	NA	NA	NA
05	T02-11-117-4303	10' from Cellular Store	1800	4	0.0537	0.0040	<0.0040	<18.61	NA	NA	NA	NA

ANALYST
E. Sioukri

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 exercises will be stored for sixty (60) days. AES Inc., should be notified within this time frame for a re-evaluation analysis.
- If AES Inc., did not conduct the sampling, the reported airborne concentrations were derived based on information provided by the client. Under these circumstances, the air concentration data is supplied solely for the convenience of the client.
- This report must not be used to claim product endorsements 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.
- with respect to the services charged, shall in no event exceed the amount of the invoice.

WARREN & PANZER ENGINEERS, P. C.

AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

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

W&P FILE #. 1079.01.02

LABORATORY:

LABORATORY:	ANALYSIS METHOD:	PCM	TEM	TEM
	circle one	7400	ANALY	EPAL

ANALYSIS METHOD!
circle one

TECHNICIAN: EDWIN B. ELLIS III

CONTACT:

PAGE _____ OF _____

P.O.

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE START STOP	TIME ON OFF	TOTAL TIME	VOLUME (liters)	CONCENTR. (lb./cc.)
01	10' FROM STOCK EXCHANGE	3		5 5	1030 0430	360	1800	
02	10' FROM PHOTO LABS	3		5 5	1031 0431	360	1800	
03	CORNER OF BYWAY/DEY	3		5 5	1032 0432	360	1800	
04	10' FROM TRAIN STATION	3		5 5	1033 0433	360	1800	
05	10' FROM CELLULAR STORE	3		5 5	1034 0434	360	1800	
06	SEALED FIELD BLANK							
07	FIELD BLANK							
08	FIELD BLANK							

COMMENTS:

DATE: 11/25/82

7-11-17

SAMPLE BY: E. ELDS JR
SIGNATURE: E. ELDS JR

RELEASED BY: _____ DATE: _____

SIGNATURE: _____

RECEIVED BY: A. CAVALGAL DATE: 11/27/02

SIGNATURE: [Signature]

SAMPLE TYPE CODES

1 - Blank	5 - Final Clearance (inside)

2 - Pre-Abatement

3 - During Abatement

4 - During Glove Bag Removal

SEE REVERSE SIDE FOR ANALYSIS INFORMATION

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 AMENDMENT FORM
FOR FORM ACP 7

FOR OFFICIAL USE ONLY

Fee (if any) \$ _____

Amendment 2002A-2826Information 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# 1947MN02 Facility Address 189 BROADWAY Borough N.Y. Zip 10007

Date ACP7 was filed 11/25/02 Variance # (if any) _____

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

Original Start Date 12/25/02 Original Completion Date 12/28/02 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 TONY COSTA
14. Federal Employer ID. # P11 15. Tel. # (516) 781-3000 Fax # (516) 781-3085
16. Address 3010 BURNS AVENUE City WANTAGH State N.Y. Zip 11793

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VI. PROJECT INFORMATION

24. Starting date for this portion of work 12/25/02 Projected completion date 12/28/02

☐ Project Cancelled

☐ Project Postponed

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

Shift from: 6 ☐ am ☒ pm to 2 ☒ am ☐ pm If other, specify _____

25. Additional asbestos-containing material to be disturbed during this work Additional Facade 1,500 Square Feet, and/or _____ Linear Feet

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

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 STOREFRONT FACADE
(For each floor list ACM quantity and type)

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

Name of Company (if any) _____ Fax # _____

Address _____ City _____ State _____ Zip _____

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

Signature of Applicant / Owner

Date

ACP 8
2/2001

DEP
BUREAU OF ENVIRONMENTAL
REGENERATION & INFRASTRUCTURE
ASBESTOS CONTROL
PROGRAM
TRU

