

**BENJAMIN KURZBAN
& SON CONTROL, INC.**1248 Ralph Ave.
BROOKLYN, N.Y. 11236**(718) 531-2900**

TO Dept of Environmental Protection

59-17 Junction Blvd

Corona, NY 11368

INVOICE**1177**

DATE 8/23/02	ORDER NO.
SHIP TO Contract ROF-REM2	

SALESPERSON	DATE SHIPPED	SHIPPED VIA	F.O.B. POINT	TERMS			
QUANTITY	DESCRIPTION			UNIT PRICE		TOTAL	
>	Registration # CT 82620020015280						
	Pin# 82602WTCROOF2						
	For work completed at 198 Broadway						
	2488 SF @ 2/SF						
	Total Amount due this Invoice					\$ 4976.00	

ORIGINAL

Thank You!

E123WTC



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
 59-17 Junction Boulevard, 8th Floor, Corona, NY 11365-5107

39

1. NYC DEP
 (See fee schedule)

ASBESTOS PROJECT NOTIFICATION
(ASBESTOS INSPECTION REPORT)

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 198 BROADWAY Borough MN Zip _____
 AKA _____ 3. Block 79 4. Lot 18
 5. Type of Facility COMMERCIAL 6. Name of Building _____

II. BUILDING OWNER

7. Name COLLEGIATE CHURCH CORP. 8. Contact Person _____
 9. Tel. # (212) 233-1960 Fax # _____
 10. Address 45 JOHN STREET City NEW YORK State NY Zip 10038

III. GENERAL CONTRACTOR

11. Name _____ Tel. # _____

IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name BENJAMIN KURZBAN & SON CONTROL INC 13. Contact Person LOUIE IANNICO
 14. Federal Employer ID. # PII 15. Tel. # (718) 531-2900 Fax # (718) 209-1808
 16. Address 1248 RALPH AVENUE City BROOKLYN State NY Zip 11236

V. THIRD PARTY AIR MONITOR

17. Name WARREN & PANZER ENGINEERS INC. 18. Contact Person MICHAEL NOLAN
 19. Federal Employer ID. # PII 20. Tel. # (212) 922-0677 Fax # (212) 922-0630
 21. Address 228 EAST 45TH STREET City NEW YORK State NY Zip 10017
 22. Sample Analysis Laboratory _____ 23. NYS DOH ELAP # _____

VI. PROJECT INFORMATION

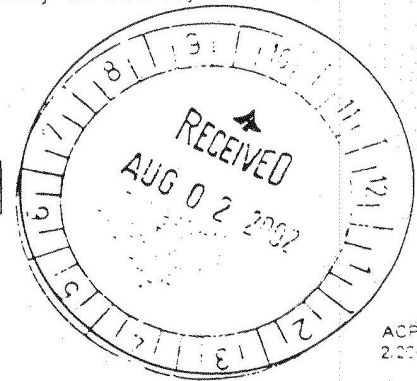
24. Starting date for this portion of work 8/5/02 Projected completion date 9/5/02

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

Shift from: 8⁰⁰ ☒ am ☐ pm to 8⁰⁰ ☐ 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
2488 Square Feet, and/or 0 Linear Feet



ASBESTOS INSPECTION REPORT (continued)

26. Asbestos Hauler IESI, NY NYS DEC Permit # NJ-462 718-638-322-2263
 Disposal Site(s) BLUE RIDGE LANDFILL PO BOX 399 SCOTSDALE PA 17254

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 **ROOF SURFACE: ROOF MEMBRANE (TAR)**

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	PARTIAL ROOF	ROOF SURFACE	2088		MIDDLE SECTION OF ROOF
		METAL SUPPORTS	400		

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>WARREN & PANZER ENGINEERS</u> Print Name of Air Monitor <u>Festy Demegio</u> Signature <u>07-12-02</u> Date	<u>B. KURZBAN & SON CONTR</u> Print Name of Asbestos Contractor <u>[Signature]</u> Signature <u>07-12-02</u> Date	_____ Print Name of Applicant (If other than Owner) _____ Signature _____ 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] NYC DEP
 Signature
07-12-02
 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.

8/8

198 Broadway

48

8/9

1991

BREAK

2. 7 e

PII

PII

Progress Report

8/8

скал.р.

San - Safety Meeting For Workers.

Topic: Ext Ladder use
Workers Suit up & set up
For CLEAN up & POWER WASH.

10AM - Workers ARE picking and Bagging heavy Debris Also Hepa Vacuuming

(49)

198 Broadway 8/9 Progress Report

- 1pm - Workers Shower out TAKE BREAK
- 2pm - Back From BREAK Workers suit up.
Heavy Debris has been picked up.
Start to powerwash. Everything ok
- 4pm - Powerwashing in progress.
Water Collected and Filtered to Drain
- 6pm - Roof is completed Start Breakdown
All Equipment being Moved to
Next BID. & Locked up.
- 7pm - AREA Secured. End of Sh. Ft

PII

SciLab Job #: 202083067

Client Name: Benjamin Kurzban & Son Control Inc.

Phase Contrast Microscopy (PCM) Fiber Results

198 Broadway

SciLab Sample #	Client Sample # / Location	Date Collected	Flow Rate (liters/min.)	Duration (min.)	Air Filtered (liters)	Fields	Fibers	Fiber Density ² (Fibers/mm ²)	Fibers Conc. (Fibers/cc)	TWA
01	1 Jan Baroujan 081-44-9989	08/09/2002	2.5	30	75	100	2	2.55	<0.036	
02	2 Jan Baroujan 081-44-9989	08/09/2002	2.5	480	1200	100	3	3.82	<0.002	

Reporting Notes:Analyzed by: Devin M. Abney D. Abney Date Analyzed: 08/16/2002

Samples analyzed by NIOSH 7400(A) Method, Issue #2, 8/1/99: Limit of Detection= 5.5 fibers per 100 fields or 7 fibers/tram2. This report relates ONLY to the sample analysis expressed as fibers/cc mm of filter area: ND=No fibers observed; NA= Not Analyzed; Walton-Beckett graticule field area = 0.00785 mm2; TWA = 8 Hr. TWA calculation assumes zero exposure for remainder of 8 hr period not sampled; Upper 95% Confidence Limit (Employers Compliance Test)- Calculated as a one sided UCL to determine 95% certainty of compliance with the 0.01 fiber/cc standard. Estimated relative standard deviation: Intralab S=0.405, Interlab S=0.45, New York samples (NYSDOH ELAP Lab # 11480); National Institute of Standards and Technology Accreditation requirements mandate that this report must not be reproduced except in full without the approval of the laboratory. AIHA # 102843.

IESI NY CORPORATION

110 5th Street • Brooklyn, NY 11215

Phone: 718-522-2263 • Fax: 718-522-2697

MANIFEST

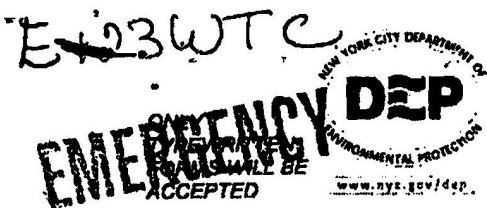
11786

DATE

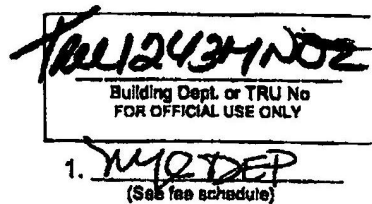
8/13/02

G E N E R A T O R	1. Job Site Address 198 Broadway New York, N.Y.		Owner's name Dept Of Enviro Protection	Wait and Load Time In _____ Time Out _____
	2. Contractor's name and address Benjamin Kurzban & Son 1248 Ralph Avenue Brooklyn, NY 11236			Drop Date
	3. Waste disposal site (WDS) name, mailing address and physical site location IESI Pa Blue Ridge Landfill Corporation P.O. Box 399 Scotland, Pa. 17254			WDS phone number Permit # 100934
	4. Name and address responsible agency (Local, District or EPA Office where notification was sent) US EPA 290 Broadway, New York 10007			
	5. Description of materials (RQ) WASTE ASBESTOS 9, NA2212, III	6. VEH. LIC. # 29696 PA TYPE CLCSEB SIZE 40	7. TOTAL QUANTITY 2 CUBIC YARDS	
	8. Generator Certification Box 4624	IEC 11479		
	9. CONTRACTOR CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international government regulations.			
	Printed/Typed Name _____ Title _____ Signature _____		Date (M/D/Y) 8/13/02	
	10. Transporter #1 (Acknowledgement of receipt of materials) IESI NY CORPORATION • 110 5th Street, Brooklyn, NY 11215		DEC Permit No. NY 462 NI 462	
	Printed/Typed Name Chicor Carvot Title DRIVER Signature _____		Date (M/D/Y) 8/13/02	
11. Transporter #2 (Acknowledgement of receipt of materials) IESI		DEC PERMIT # NI 462		
Printed/Typed Name JESUS Title DR Signature _____		Date (M/D/Y) 8/15/02		
12. Discrepancy indication space				
13. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item #12				
Printed/Typed Name Katrina K. Kirk Title Director Signature KKK		Date (M/D/Y) 8/16/02		

WHITE:LANDFILL • GREEN:IESI • PINK:GENERATOR • YELLOW:CONTRACTOR • GOLD:JOB SITE



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
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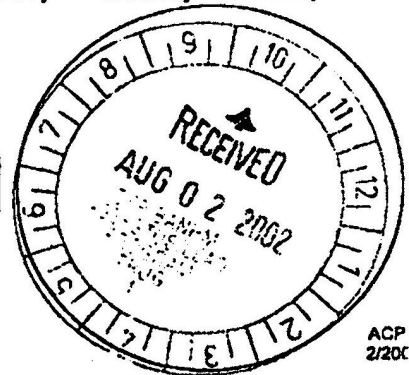
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TRAIL 1243 MND

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07-12-02
Date

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AIRBORNE ASBESTOS ANALYSIS BY TRANSMISSION ELECTRON MICROSCOPY**ATHENICA**

ENVIRONMENTAL SERVICES INC.

Tel. (718) 784-7490

Fax. (718) 784-4085

CLIENT: Warren & Parvett Engineers, P. C.

LABORATORY ID #: T02-08-037

ANALYT. METHODOLOGY: AHERA

FILTER TYPE: M.C.E.

AVERAGE G.O. AREA (mm²): 0.012422

PROJECT: NYC DEP, 198 Broadway

DATE OF REPORT: 08/09/02

DATE OF ANALYSIS: 08/09/02

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

CLIENT #	LAB. ID #	LOCATION	VOLUME (ft)	G.O.'s ANALYZED	AREA ANALYZED (mm ²)	ANALYT. SENSITV. (struct./cm ²)	TOTAL ASBESTOS AIR CONC. (struct./cm ²)	TOTAL ASBESTOS FILTER CONC. (gr./mm ²)	AIR CONC. FOR STRUCT. 0.5<S<5µm	AIR CONC. FOR STRUCT. S≥5µm	ASBEST. TYPE CHNYS.	AMPHIB. ASBEST. TYPE SPECIFY
01	T02-08-037-1388	Exit from roof	1650	4	0.0497	0.0047	<0.0047	<20.13	NA	NA	NA	NA
02	T02-08-037-1389	East side of roof	1650	4	0.0497	0.0047	<0.0047	<20.13	NA	NA	NA	NA
03	T02-08-037-1390	West side of roof	1650	4	0.0497	0.0047	<0.0047	<20.13	NA	NA	NA	NA
04	T02-08-037-1391	South side of roof	1650	4	0.0497	0.0047	<0.0047	<20.13	NA	NA	NA	NA
05	T02-08-037-1392	North side of roof	1650	4	0.0497	0.0047	<0.0047	<20.13	NA	NA	NA	NA

ANALYST
E. DimitrakasLABORATORY DIRECTOR
Spiro Domagalis**LABORATORY CERTIFICATION NUMBERS: NVLAP 101958, ELAP 10955**

- ANALYST AND LABORATORY MUST BE AWARE THAT THE (AHERA) TRANSMISSION ELECTRON MICROSCOPY (TEM) METHOD IS A SCREENING METHOD AND NOT A TRUE DUPLICATE ANALYSIS.
- Air sampling cassettes will be stored for sixty (60) days. AHS Inc., should be notified within this time frame for a true duplicate analysis.
- If AHS 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 AHS Inc.
- The liability of Athena Environmental Services Inc. with respect to the services charged, shall in no event exceed the amount of the invoice.

PAGE ____ OF ____

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}

P.O. _____

 228 East 45th Street
 New York, NY 10017
 (212) 922-0877
 Fax (212) 922-0630

W&P FILE #:

1079-01-02

CONTACT: _____

LABORATORY: _____

CLIENT: NYC DEP

ANALYSIS METHOD: PCM

TEM

EPA LEVEL II

circle one

ACB

ACB

TECHNICIAN: FESLY OSEWELER

 PROJECT: ROOF
 LOCATION: 198 BROADWAY

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP #	FLOWRATE		TIME		TOTAL TIME	VOLUME (liters)	CONCENTR. (lb./cc.)
				START	STOP	ON	OFF			
01	SOUTH FRONT ROOF	3		5	5	1230	1800	330	1650	
02	EAST SIDE OF ROOF	3		5	5	1232	1802	330	1650	
03	WEST " " "	3		5	5	1234	1804	330	1650	
04	SOUTH " " "	3		5	5	1236	1806	330	1650	
05	NORTH " " "	3		5	5	1238	1808	330	1650	
06	BLANK									
07	" "									
08	" "									

702-08-037

 SAMPLE BY: FESLY OSEWELER DATE: 08-08-07
 SIGNATURE: _____
 RELEASED BY: F. Fesly DATE: 08-08-07
 SIGNATURE: _____
 RECEIVED BY: E. Siatkin DATE: 8/9/07
 SIGNATURE: _____

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

RFP REVERSE SIDE FOR ANALYSIS INFORMATION

AUG-14-2002 13:31

BANHM LABORATORY UNIT

P. 12

06/12/2002 09:38 FAX 718 784 4065

010

**ATHENICA**

ENVIRONMENTAL SERVICES INC.

Tel. (718) 784-7400
Fax. (718) 784-4065

CLIENT: Varco & Panzer Engineers, P. C.
LABORATORY ID #: T02-08-041
ANALYT. METHODOLOGY: AHERA
FILTER TYPE: M.C.E.
AVERAGE G.O. AREA (mm²): 0.012422

PROJECT: NYC DEP, 198 Broadway
DATE OF REPORT: 06/10/02
DATE OF ANALYSIS: 06/10/02
EFFECTIVE FILTER AREA (mm²): 385

LABORATORY RESULTS

CLIENT #	LAB. ID #	LOCATION	VOLUME (m ³)	G.O.'s ANAL. YZBD	AREA ANAL. YZBD (mm ²)	ANAL. FT. SENSITV. (micro/cm ²)	TOTAL ASBESTOS AIR CONC. (micro/cm ³)	TOTAL ASBESTOS FILTER CONC. (micro/cm ²)	AIR CONC. FOR STRUCT. (micro/cm ³)	AIR CONC. FOR STRUCT. (micro/cm ²)	ASBEST. TYPE CHRG.	AMPLIB. ASBEST. TYPE SPECIFY
01	T02-08-041-1408	Exit from roof	1710	4	0.0497	0.0045	<0.0045	<20.13	NA	NA	NA	NA
02	T02-08-041-1409	East side of roof	1710	4	0.0497	0.0045	<0.0045	<20.13	NA	NA	NA	NA
03	T02-08-041-1410	West side of roof	1710	4	0.0497	0.0045	<0.0045	<20.13	NA	NA	NA	NA
04	T02-08-041-1411	South side of roof	1710	4	0.0497	0.0045	<0.0045	<20.13	NA	NA	NA	NA
05	T02-08-041-1412	North side of roof	1710	4	0.0497	0.0045	<0.0045	<20.13	NA	NA	NA	NA

ANALYST
E. SiorkinLABORATORY DIRECTOR
Spino Douglas**LABORATORY CERTIFICATION NUMBERS: NVLAP 101958, SLAP 10955**

- Athenica Environmental Services Inc. (AES) is responsible only for information pertaining to samples taken by its employees.
- All sampling certificates will be stored for sixty (60) days. AES Inc. should be notified within this time frame for a true 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.
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- The liability of Athenica Environmental Services Inc. with respect to the services charged, shall in no event exceed the amount of the invoice.

220 East 45th St.
New York, NY 10017
(212) 822-6077
Fax (212) 922-6516

WARREN & PANZAR ENGINEERS, P.C.
AIR MONITORING LOG SHEET/CHAIN-OF-CUSTODY FORM

24hr 7/a 12 hr 7/a 6 hr 7/a 3 hr 7/a Immediate 7/a

W&P FILE #: 1079-01-02

CLIENT: NYC DEP
PROJECT: ROOF
LOCATION: 198 BROADWAY

LABORATORY:
ANALYSIS METHOD: PCM 7400 TEM AHERA EPA LEVEL II
circle one
TECHNICIAN: F. OSEMWITZ

CONTACT:

SAMPLE NUMBER	SAMPLE DESCRIPTION/LOCATION	SAMPLE TYPE	PUMP	FIELD START	FIELD STOP	TIME	TIME	TIME	CONCENTR
01	EXH. ROOM ROOF	3		3	3	0800	1730	570	1710
02	EAST SIDE OF ROOF	3		3	3	0802	1732	570	1710
03	WEST " "	3		3	3	0804	1734	570	1710
04	SOUTH " "	3		3	3	0806	1736	570	1710
05	NORTH " "	3		3	3	0808	1738	570	1710
06	BLANK	1							
07	" "								
08	" "								

102-08-043

SAMPLE BY: F. OSEMWITZ DATE: 08-07-02

SIGNATURE: [Signature]

RELEASED BY: F. OSEMWITZ DATE: 08-07-02

SIGNATURE: [Signature]

RECEIVED BY: C. Sullivan DATE: 8/14/02

SIGNATURE: [Signature]

SAMPLE TYPE CODES

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