NYC 9/11 Public Portal Document

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 48714

EMERGENCY RESPONSE TELEPHONE
#1-800-272-3867

FB# 6024

ASBESTOS DISPOSAL & DOCUMENTATION FORM

Job Number FIBER CONTROL INC. P.O. # _____
Contractor 3010 BURNS AVENUE
Address WANTAGH NY 11793
City _____ (516)781-3000 State _____ Zip _____
Telephone Number 05/23/02 06/20/02
Date Container Del. _____ Date of Pickup _____
Type of Container 100 YARD 1/16
VOLUME _____ CY Friable ☒ Non-Friable ☐
Bag ☒ Drum ☐ Wrapped ☐ Other ☐

ASBESTOS, 0.1% 2.0% FOAM

GENERATOR/BUILDING OWNER
27 PARK PLACE ASSOCIATES INC
Address 9210 4TH AVENUE
City BROOKLYN, NY 11209 State Zip
Phone Number

GENERATING LOCATION
Address 27 PARK PLACE
City NEW YORK, NY Zip
Phone Number

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 P. Hanlon

Transporter 1: FIBER CONTROL INC. (Name) 3010 BURNS AVENUE WANTAGH, NY 11793 (Address) 516-781-3000 (Telephone #)
Driver: Anthony Costa (Signature) Registration #: NY / 451 859 AL (State / #) Date: 06/19/02
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: _____ (Signature) Registration # 0930154nc (State / #) Date: 6/20/02
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 N/A Address Telephone #
Driver: _____ (Signature) Registration #: _____ (State / #) Date: _____
Acknowledgement of receipt of materials.

Landfill Name: [illegible] Phone No: 8144792537
Location: [illegible] Permit # 10051 / 4008 / 960216 / 0845
Approximate Volume of Asbestos Received: 1/16 CY
Discrepancy If Any: _____
Received by: Richard Marr Date: 6-21-02
Certification of receipt of materials covered by this manifest.

COPY 1 - GENERATOR

NYC-WTC_000126522