WTC Visual Survey Form

1001197

Premise Address: 15 DUTCH STREET

Block: 78 **Lot:** 7504	Residential ☐ Commercial ☐ Mix Use ☒ Other ☐ _____	**Name of Building:**
# of Stories:	**AKA's:**	

Building Owner/Management: Telephone Number: ( )
Name: FAX: ( )
Address:

On Site Contact:
Name: Telephone Number: ( )

Building Owner Management Activities

Interior Survey Performed ☐ Yes ☐ No
Exterior Survey Performed ☐ Yes ☐ No
General Clean Up ☐ Yes ☐ No Locations: _____
ACM Clean Up ☐ Yes ☐ No Locations: _____
Air Monitoring ☐ Yes ☐ No Locations: _____
Copies of All Reports and Data Requested ☐ Yes

Visual Inspection Results:

Facade:

		Inspected	Debris		
North	☒ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
South	☒ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
East	☐ N/A	☒ Yes ☐ No	☐ No Visible/Fine Layer	☒ ½ to 1"	☐ > 1"
West	☐ N/A	☒ Yes ☐ No	☐ No Visible/Fine Layer	☒ ½ to 1"	☐ > 1"

Facade Description:
DEBRIS SEEN ON WINDOWS / WINDOW LEDGES

Roof

Debris: ☐ No Visible /Fine Layer ☒ ½ to 1" ☐ > 1"
Description: BULK HEAD ROOFS CONTAIN DEBRIS
ALSO LIGHT COAT OF DEBRIS BELOW THE A/C UNIT

Setbacks N/A ☐

Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"

Comments

Date: 06 / 05 /2002 Inspection Team: Name: DA Agency: DEP
Name: _____ Agency: _____

WTC Visual Survey Form

Premise Address: 15 Dutch St		
Block: **Lot:**	**Residential** ☐ **Commercial** ☐ **Mix Use** ☐ **Other** ☐ _____	**Name of Building:**
# of Stories:	**AKA's:**	
Building Owner/Management Name:		**Telephone Number:** ( ) **FAX:** ( )
Address:		
On Site Contact Name:		**Telephone Number:** ( )

Building Owner Management Activities

- **Interior Survey Performed** ☐ Yes ☐ No
- **Exterior Survey Performed** ☐ Yes ☐ No
- **General Clean Up** ☐ Yes ☐ No **Locations:** _____
- **ACM Clean Up** ☐ Yes ☐ No **Locations:** _____
- **Air Monitoring** ☐ Yes ☐ No **Locations:** _____

Copies of All Reports and Data Requested ☐ Yes

Visual Inspection Results:

Facade:

		Inspected	Debris		
North	☐ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
South	☐ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
East	☐ N/A	☒ Yes ☐ No	☐ No Visible/Fine Layer	☒ ½ to 1"	☐ > 1"
West	☐ N/A	☐ Yes ☐ No	☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"

Facade Description: Debris Seen on Window Ledges @ 1st Fl.

Roof

Debris: ☐ No Visible /Fine Layer ☐ ½ to 1" ☐ > 1"

Description: _____

Setbacks N/A ☐

Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"
Floor: ____	Debris: ☐ No Visible/Fine Layer	☐ ½ to 1"	☐ > 1"

Comments

Date: 9/11/2002 **Inspection Team: Name:** _____ **Agency:** _____

Name: _____ **Agency:** _____

ENTERED