

THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR, NOISE & HAZARDOUS MATERIALS

DAY FRIDAYSECTION ASBESTOS & LEAD CONTROL PROGRAMDATE JANUARY 12, 2001DIST. # 5000

This undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00 SHIFT							
		9 & 1 OFF PAY FRIDAY					
B. DAVIDOVITZ	8 ⁰⁰	B.D.	12	1	3 ⁰⁰	B.D.	2 hrs AL

Supervisor's initials
required for other than
scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor R. Radin



THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR, NOISE & HAZARDOUS MATERIALS

DAY THURSDAY

SECTION ASBESTOS & LEAD CONTROL PROGRAM

DATE JANUARY 11, 2001

DIST. # 5000

This undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00 SHIFT							
		9 & 1 OFF PAY FRIDAY					
B. DAVIDOVITZ	8 ¹⁰	<i>B.D.</i>	12	1	5 ⁰⁰	<i>R.R.</i>	

Supervisor's initials
required for other than
scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor *R. Rabin*

AH

THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR, NOISE & HAZARDOUS MATERIALS

DAY WEDNESDAY

SECTION ASBESTOS & LEAD CONTROL PROGRAM

DATE JANUARY 10, 2001

DIST. # 5000

This undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00 SHIFT							
		9 & 1 OFF PAY FRIDAY					
B. DAVIDOVITZ	8 ⁰⁰	<i>B.D.</i>	12	1	5 ⁰⁰	<i>B.D.</i>	

Supervisor's initials
required for other than
scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor *R. Rabin*

By

THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR, NOISE & HAZARDOUS MATERIALS

DAY TUESDAYSECTION ASBESTOS & LEAD CONTROL PROGRAMDATE JANUARY 9, 2001DIST. # 5000

This undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00 SHIFT							
		9 & 1 OFF PAY FRIDAY					
B. DAVIDOVITZ	<i>800</i>	<i>B.D.</i>	<i>12</i>	<i>1</i>	<i>500</i>	<i>B.D.</i>	

Supervisor's initials
required for other than
scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor *R. Raehn*


THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR, NOISE & HAZARDOUS MATERIALS

DAY MONDAY

SECTION ASBESTOS & LEAD CONTROL PROGRAM

DATE JANUARY 8, 2001

DIST. # 5000

This undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00 SHIFT							
		9 & 1 OFF PAY FRIDAY					
B. DAVIDOVITZ							SL

Supervisor's initials
required for other than
scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor R. Radu

Handwritten initials