



DEPARTMENT OF ENVIRONMENTAL PROTECTION

EXECUTIVE OFFICE

89-17 JUNCTION BLVD., 19TH FLOOR, CORONA, NEW YORK 11368-5107

JOEL A. MUELLER, SR., P.E., COMMISSIONER

NYC DEP (BANH) ASBESTOS & LEAD CONTROL PROGRAM
OVERRIDE AUTHORIZATION FORM

Bureau/Unit: BANH

Location: 89-17 JUNCTION BLVD

Distribution #: 5000

Week Ending: 9-24-01

Weekly Attendance						
S	M	T	W	TH	F	S
11						
NORMAL WORK WEEK: <u>35</u> HOURS						

EMPLOYEE NAME: SAM NEBCUM CIVIL SERVICE TITLE: IH 4 SOCIAL SECURITY #: P11

Total overtime previous 12 months: hours 5% annual salary in hours: has employee exceeded 5% in O.T.? (yes / no): retirement eligibility month: year:

Date(s)	Location(s)	Reason(s)	TIME ALLOCATION					PAY BY	
			str.	prem.	comp str.	comp pre.	bol.	pay	comp
9-23-01	W.T.C.	E/R	5	6					

Report Totals 5 6

Explanation: Specify in the space below the reason why this employee was permitted to earn in excess of 5% of his/her salary

Authorized & Approval Signature(s): [Signature]

Supervisor

Bureau Chief/Commissioner's Designee

☐ Approved ☐ Disapproved

Date: 9/24/01
Date:



DEPARTMENT OF ENVIRONMENTAL PROTECTION

ENVIRONMENTAL OFFICE

89-17 JUNCTION BLVD., 19TH FLOOR, CORONA, NEW YORK 11364-1107

JOEL A. MELL, JR., P.E., COMMISSIONER

NYC DEP (HANNON) ASBESTOS & LEAD CONTROL PROGRAM
OVERRIDE AUTHORIZATION FORM

Bureau/Unit: BAHM

Location: 59-17 JUNCTION BLVD

Distribution #: 5000

Week Ending: 9-23-01

Weekly Attendance						
S	M	T	W	TH	F	S
8						
NORMAL WORK WEEK <u>35</u> HOURS						

EMPLOYEE NAME: <u>SAM NEBCUM</u>			CIVIL SERVICE TITLE: <u>I.H. II</u>		SOCIAL SECURITY #: <u>P11</u>	
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Total overtime previous 12 months hours		8% annual salary in hours		Has employee exceeded 8% in O.T.? (yes / no)		Retirement eligibility month year	
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Date(s)	Location(s)	Reason(s)	TIME ALLOCATION					net hr	
			str.	perm.	comp. str.	comp. per.	bol.	pay	comp
9-16-01	59-17 JUNCTION BLVD	W.T.C.	5	3					

Report Totals 5 3

Explanation: Specify in the space below the reason why this employee was permitted to work in excess of 8% of his/her salary

Authorized & Approval Signature(s)
[Signature]
 Supervisor
[Signature]
 Bureau Chief/Commissioner's Designee

Date: 9/24/01
 Date: _____

☐ Approved ☐ Disapproved

[Signature]



DEPARTMENT OF ENVIRONMENTAL PROTECTION

DEPUTY OFFICE

89-17 JUNCTION BLVD., 19TH FLOOR, CORONA, NEW YORK 11368-5107

JOEL A. MUELE, SR., P.E., COMMISSIONER

NYC DEP (RANDOM) ASBESTOS & LEAD CONTROL PROGRAM OVERRIDE AUTHORIZATION FORM

Bureau/Unit: BAHM

Location: 59-17 JUNCTION BLVD

Distribution #: 5000

Week Ending: 9-16-01

Weekly Attendance						
S	M	T	W	TH	F	S
						7
NORMAL WORK WEEK <u>35</u> HOURS						

W.T.C.

EMPLOYEE NAME: <u>SAM NGBEBUM</u>		CIVIL SERVICE TITLE: <u>IH II</u>	SOCIAL SECURITY #: <u>PII</u>
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TOTAL OVERTIME PREVIOUS 12 MONTHS HOURS	5% ANNUAL SALARY IN HOURS	HAS EMPLOYEE EXCEEDED 5% IN O.T.? (yes / no)	RETIREMENT ELIGIBILITY MONTH YEAR
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Date(s)	Location(s)	Reason(s)	TIME ALLOCATION					nd by	
			str.	prem.	comp str.	comp pre.	hol.	pay	comp
9-15-01	59-17 JUNCTION BLVD	W.T.C.							
	Maintenance	E/R	5	2					
	137-30 91st AVENUE								

Report Totals 5 2

Explanation: Specify in the space below the reason why this employee was permitted to earn in excess of 5% of his/her salary

Authorized & Approval Signature(s)

Supervisor

Bureau Chief/Commissioner's Designee

☒ Approved ☐ Disapproved

9/17/01
Date 9/17/01

Date