

7624206030

## NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

## Asbestos Control Program

59-17 Junction Boulevard, 8th Floor, Flushing, NY 11373-5108

ONLY  
TYPEWRITTEN  
FORMS WILL BE  
ACCEPTED



# 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 NYC DEP 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.

1. See fee schedule

## I. FACILITY

2. Address 2125 Amsterdam Avenue Borough Manhattan Zip 10032  
Premise # Prefix Street Name

AKA n/a 3. Block 2111 4. Lot 47

5. Type of Facility Residential Units 6. Name of Building n/a

## II. BUILDING OWNER

7. Name New York City Housing Preservation & Devp't 8. Contact Person Timothy Joseph

9. Tel. # (212) 863-7625 Fax #

10. Address 100 Gold Street, Room #7-01 City New York State NY Zip 10038

## III. GENERAL CONTRACTOR

11. Name To be notified. Tel. #

## IV. ASBESTOS ABATEMENT CONTRACTOR

12. Name To be notified. 13. Contact Person

14. Federal Employer ID. # 15. Tel. # Fax #

16. Address City State Zip

## V. THIRD PARTY AIR MONITOR

17. Name To be notified. 18. Contact Person

19. Federal Employer ID. # 20. Tel. # Fax #

21. Address City State Zip

22. Sample Analysis Laboratory 23. NYS DOH ELAP #

## VI. PROJECT INFORMATION

24. Starting date for this portion of work Projected completion date

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

Shift From: 8:00 ☒ am ☐ pm to 5:00 ☐ am ☒ pm

If other, specify Work start & completion dates are to be notified

Access to inspect the premises must be provided during the work schedule indicated in this item.

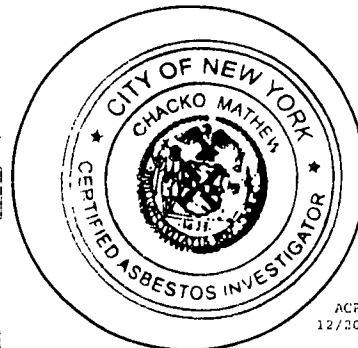
25. Total amount of asbestos-containing material to be abated during this work

90,370 Square Feet, and/or 0 Linear Feet

## PROFESSIONAL CERTIFICATION



DEPARTMENT OF BUILDINGS  
STAMP NUMBER 16 OF 22



**ASBESTOS INSPECTION REPORT (continued)**26. Asbestos Hauler To be notified. NYS DEC Permit # \_\_\_\_\_ Tel.# \_\_\_\_\_

Disposal Site(s) \_\_\_\_\_

27. This asbestos abatement is part of a (Item a through e requires filing of this form with the 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)

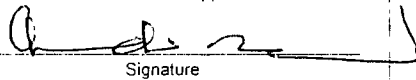
- ☒ Full Containment      ☐ Glovebag      ☐ Tent      ☐ DEP Variance Application

**30. LOCATIONS OF ABATEMENT**

| Floor(s) | SECTION OF FLOOR<br>(e.g. entire, east wing, room #,<br>boiler room, lobby, etc.) | AFFECTED SURFACES<br>CONTAINING ACM<br>(e.g. Pipe lagging, ceiling, plenum<br>ducts, storage tanks, decking, etc.) | AMOUNT OF ACM  |                | DESCRIPTION OF WORK BEING<br>PERFORMED<br>(e.g. running cable, installing fire sprinklers<br>removing and replacing boilers, etc.) |
|----------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------|----------------|------------------------------------------------------------------------------------------------------------------------------------|
|          |                                                                                   |                                                                                                                    | SQUARE<br>FEET | LINEAR<br>FEET |                                                                                                                                    |
| Cellar   | Entire.                                                                           | Ceiling plaster                                                                                                    | 3,325          | 0              | Renovation/Alteration                                                                                                              |
| 1st Fl   | Entire.                                                                           | Walls & ceiling)                                                                                                   |                |                |                                                                                                                                    |
|          |                                                                                   | Plaster )                                                                                                          | 9,640          | 0              | Renovation/Alteration                                                                                                              |
| 2nd Fl   | Entire.                                                                           | - " - - " -                                                                                                        | 15,050         | 0              | - " - - " -                                                                                                                        |
| 3rd Fl   | Entire.                                                                           | - " - - " -                                                                                                        | 15,050         | 0              | - " - - " -                                                                                                                        |
| 4th Fl   | Entire.                                                                           | - " - - " -                                                                                                        | 15,050         | 0              | - " - - " -                                                                                                                        |
| 5th Fl   | Entire                                                                            | - " - - " -                                                                                                        | 15,050         | 0              | - " - - " -                                                                                                                        |
| 6th Fl   | Entire & Bulkhead                                                                 | - " - - " -                                                                                                        | 15,640         | 0              | - " - - " -                                                                                                                        |
| Roof     | Entire.                                                                           | Non-friable tar)                                                                                                   |                |                |                                                                                                                                    |
|          |                                                                                   | flashing )                                                                                                         | 1,565          | 0              | Renovation/Alteration                                                                                                              |

Additional pages attached ☐

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.

|                                    |                                            |                                                                                                    |
|------------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------------------|
| _____<br>Print Name of Air Monitor | _____<br>Print Name of Asbestos Contractor | New York City - HPD<br>_____<br>Print Name of Applicant                                            |
| _____<br>Signature                 | _____<br>Signature                         | <br>Signature |
| _____<br>Date                      | _____<br>Date                              | 10/3/07<br>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\_\_\_\_\_  
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.