



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
 59-17 Junction Boulevard, 8th Floor, Flushing, NY 11373
ASBESTOS ASSESSMENT REPORT



Control Number: 1233186

1. NYC DOB Job # (if applicable) _____
2. Premise No. 1504 Street Name Amsterdam Avenue Borough Manhattan Zip 10031
 Bldg #3 - at _____
3. AKA Manhattanville Rehab Houses Type of Facility Residence BIN 1059765 Block 01988 Lot 0031
4. Building Owner New York City Housing Authority (NYCHA) Address 90 Church Street, 11th Floor
5. City New York State NY Zip 10007 Contact Person Richard Morrison
6. Tel. # (212) 306-3154 Fax # (212) 306-5151 Email richard.morrison@nycha.nyc.gov
7. Description of the Entire Scope of Work
Exterior pipe scaffold / shed installation Note: Any materials not in this ACP-5 should be treated as ACM until tested.

8. I, ANTON MANOUILOVITCH, have conducted an asbestos investigation on
03/11/2016 8:00AM-4:30PM in accordance
 with Sections 1-16 and 1-28 of the NYC DEP Asbestos Control Program Rules and declare that at said facility address, the
- ☐ a. portion(s) of the premises affected by the work is free of asbestos containing material (ACM).
- ☒ b. premise (or portions thereof) affected by the work contains 10 square feet or less or 25 linear feet or less of ACM.
 Specify locations in section 9: Note: This material must be abated as a minor project in accordance with relevant provisions of the DEP Asbestos Rules.
- ☒ c. asbestos is present and will not be disturbed during construction activity. Specify the quantity and area where asbestos is present. Specify amount: 800 sq. ft linear ft.
 Specify locations (attach additional documents as necessary):
Roof, Bulkhead; Roof, Parapet; Roof, Main Roof
- ☐ d. entire building is free of asbestos containing material (ACM).

9. RESULTS OF ASBESTOS BUILDING SURVEY:

FLOOR	DESCRIBE SECTION OF FLOOR	ALL MATERIALS ASSUMED TO CONTAIN ACM AND/OR SAMPLED	NUMBER OF SAMPLES ANALYZED	ASBESTOS PRESENT	ASSUMED ACM
1st Floor	Exterior Façade	Wall Brick Mortar, Grey	3	No	No
1st Floor	Exterior Façade	Cinderblock Mortar, Grey	3	No	No
1st Floor	Exterior Façade	Decorative Panel, Grey	3	No	No
1st Floor	Exterior Façade	Decorative Panel Caulking	3	No	No

I hereby declare the information provided herein is true and complete

ANTON MANOUILOVITCH 3/23/2016 128339 5/2/2017
 DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

Tel. # (212) 675-5544 Fax # _____

Email anton.manouilovitch@alcenvironmental.com



The investigator shall assume that some or all of the areas investigated contain ACM, and for each area that is not assumed to contain ACM, collect and submit for analysis bulk samples in accordance with §§ 1-36, 1-37, and 1-44 of the DEP Asbestos Rules and EPA publications 560/5-85-024 and 560/5-85-030a and 40 CFR 763.86.

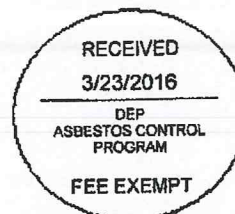
Is it a Build-It-Back project? ☐ Yes, App ID # _____ ☒ No



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2nd Floor	Exterior Façade	Window Concealed Caulking	3	No	No
2nd Floor	Exterior Façade	Window Caulking, Grey	3	No	No
2nd Floor	Exterior Façade	Window Sill	3	No	No
Roof	Bulkhead	Brick Mortar, Grey	2	No	No
Roof	Bulkhead	Door Lintel Mortar, Grey	2	No	No
Roof	Bulkhead	Stucco, Grey	2	No	No
Roof	Bulkhead	Flashing, Black	2	Yes	No
Roof	Bulkhead	Flashing Metal Cap Caulking	2	Yes	No
Roof	Parapet	Brick Mortar, Grey	2	No	No
Roof	Parapet	Coping Stone Mortar, Grey	2	No	No
Roof	Parapet	Stucco, Grey	2	Yes	Yes
Roof	Parapet	Wall Mastic, Black	2	Yes	No
Roof	Parapet	Flashing, Black	2	Yes	No
Roof	Main Roof	Fence Rail Pitch Pocket, Black	2	Yes	No
Roof	Main Roof	Vent Pipe Pitch Pocket, Black	2	No	No
Roof	Chimney	Brick, Red	2	No	No
Roof	Chimney	Brick Mortar, Grey	2	No	No
Roof	Chimney	Stucco, Grey	2	No	No

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
Metro Analytical Laboratories	12003	3/11/2016
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11. NYS DOL Asbestos Handling license # 54123 Company Name The ALC Group LLC dba ALC Environmental

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