



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



1. NYC DOB Job # (if applicable) _____ **Control Number: 1379295**

2. Premise No. 201 Street Name West 145th Street Borough Manhattan Zip 10039

3. AKA _____ Type of Facility Commercial BIN 1060482 Block 02031 Lot 0029

4. Building Owner Meilech Weiss Address 3611 14th Avenue

5. City Brooklyn State NY Zip 11218 Contact Person Meilech Weiss

6. Tel. # (718) 686-6262 Fax # _____ Email _____

7. Description of the Entire Scope of Work
Interior Renovation of the retail areas.

8. I, LON RIGG, have conducted an asbestos investigation on
Name of Certified Asbestos Investigator
01/12/2018 3:30PM-4:15PM in accordance

Date(s)

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: _____ sq. ft 24 linear ft.
Specify locations (attach additional documents as necessary):
1st floor - retail area 3 (ceiling tile - 500 SF & 12x12 Floor tile/mastic - 500 SF). Retail area 2 & 1 (12x12 floor tile/mastic & linoleum (1000 SF), All retail areas 1,2,3,4 (pipe insulation inside the wall - 24 LF)
- ☐ d. entire building is free of asbestos containing material (ACM).

9. RESULTS OF ASBESTOS BUILDING SURVEY:

LOCATION	FLOOR NUMBER	DESCRIBE SECTION OF FLOOR	ALL MATERIALS ASSUMED TO CONTAIN ACM AND/OR SAMPLED	NUMBER OF SAMPLES ANALYZED	ASBESTOS PRESENT	ASSUMED ACM
Building Floors	1	1st floor - Retail Area 1,2,3,4	ceiling tile, 12x12 floor tile/Mastic, linoleum & pipe insulation inside the Walls	0	Yes	Yes
Building Floors	1	Retail Area 1,2,3,4	Plaster	9	No	No
Building Floors	1	Retail Area 1 & 2	Drywall	2	No	No

I hereby declare the information provided herein is true and complete

LON RIGG 1/22/2018 117148 11/28/2019
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

Tel. # (917) 771-8076 Fax # _____

Email lrigg60@aol.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, 40 CFR 763.80, 40 CFR 763.85.

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





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Building Floors	1	Retail Area 1 & 2 (bathroom & kitchen)	Grout	2	No	No
Building Floors	1	Retail Area 1 & 3 (kitchen)	Floor grout	2	No	No
Building Floors	1	Retail Area 4	Mortar	2	No	No

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
Metro Analytical Laboratories	12003	1/16/2018

11. NYS DOL Asbestos Handling license # 56080 Company Name Avi Jay, Inc.

I hereby declare the information provided herein is true and complete

LON RIGG 1/22/2018 117148 11/28/2019
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date
Tel. # (917) 771-8976 Fax # _____
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