



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: 1810450**

2. Premise No. 170 Street Name East 61st Street Borough Manhattan Zip 10065

3. AKA _____ Type of Facility Commercial BIN 1041932 Block 01395 Lot 0041

4. Building Owner Vincent Lamanna Realty LLC Address 170 East 61st Street

5. City New York State NY Zip 10065 Contact Person Jane D'Agostino

6. Tel. # (212) 758-1828 Fax # _____ Email _____

7. Work Type Other (Facade repair)

Description of the Entire Scope of Work

Facade repair at the roof level consisting of installation of new coping covers installed over existing coping; application of stucco coating at stair bulkhead; Install railing at mechanical bulkhead roof; no roofing, flashing, tar/waterproofing to be disturbed.

8. I, JEAN RENSINK, have conducted an asbestos investigation on _____ in accordance
Name of Certified Asbestos Investigator
01/07/2021 10:00AM-10:30AM 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. the premises or the portion(s) of the premises, included in the scope of renovations was/were determined that there was no asbestos-containing materials (ACM) present
- ☒ 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: 1742 sq. ft 0 linear ft.
- ☐ d. entire building is free of asbestos containing material (ACM).

9. RESULTS OF ASBESTOS BUILDING SURVEY:

Floor	Section of Floor(s) Surveyed	Material Assumed to Contain ACM and/or Sampled	Number of Samples Analyzed	Asbestos Present	Assumed ACM	Square Feet	Linear Feet	Abated	Scope of Work Applied
Roof	Main roof	Green caulk	2	No					

I have advised the Owner / owner's representative / client that the minor project amounts of the confirmed or presumed ACMs shall need to be abated by a NYS DOL Licensed Asbestos Abatement Contractor, and disposed of as asbestos-containing wastes, prior to conducting this renovation project.

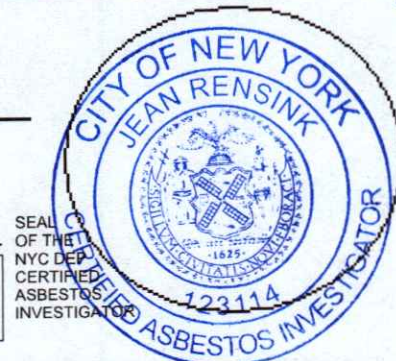
I hereby declare the information provided herein is true and complete

JEAN RENSINK 1/25/2021 123114 7/31/2022
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

Tel. # (845) 637-4178 Fax # _____

Email jeanrensink@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.



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





NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Flushing, NY 11373

ASBESTOS ASSESSMENT REPORT



Roof	Main roof	Caulk at metal coping	2	No					
Roof	Main roof	White caulk	2	No					
Roof	Main roof	Caulk at wall joint	2	No					
Roof	Main roof	Tar/coating @ stone coping	1	Yes	Yes	174		No	c
Roof	Main roof	Stucco at parapet walls	3	No					
Roof	Main roof	Roofing, flashing, tar, waterproofing	0	Yes	Yes	1568		No	c
Roof	Main roof	Roofing, flashing, tar, waterproofing	0	Yes	Yes	10		Yes	b

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
Ameri-sci	11480	1/8/2021

11. NYS DOL Asbestos Handling license # 28946 Company Name AA Services, LLC

12. Comment

I have advised the Owner / owner's representative / client that the minor project amounts of the confirmed or presumed ACMs shall need to be abated by a NYS DOL Licensed Asbestos Abatement Contractor, and disposed of as asbestos-containing wastes, prior to conducting this renovation project.

I hereby declare the information provided herein is true and complete

JEAN RENSINK 1/25/2021 123114 7/31/2022
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date
Tel. # (845) 637-4178 Fax #
Email jeanrensink@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.

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

25839963