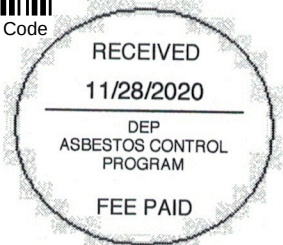




NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

ASBESTOS ASSESSMENT REPORT



1. NYC DOB Job # (if applicable) _____

Control Number: 1794573

2. Premise No. 440 Street Name St. Nicholas Ave Borough Manhattan Zip 10027

3. AKA _____ Type of Facility Residence BIN 1059435 Block 01958 Lot 0049

4. Building Owner PGLB 1 LLC Address 118 W 137 St

5. City NY State NY Zip 10030 Contact Person Hagai Barlev

6. Tel. # (917) 686-2684 Fax # _____ Email _____

7. Work Type PL Plumbing, MH Mech/ HVAC, General Construction

Description of the Entire Scope of Work

Renovation of Apt. 5A & 5D, including removing & construction non-bearing partitions & finishes.
Additional filing under DOB NOW for structural to accommodate the extension of existing fire escape & DOB NOW for plumbing & mechanical work.

8. I, VICTOR KHANIN, have conducted an asbestos investigation on
Name of Certified Asbestos Investigator

09/18/2020 1:30PM-2:45PM 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. 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: 800 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
Building Floors-5 to 5	Apt. 5A, 5D (no window work)	wall plaster(6)	6	No	No				

I hereby declare the information provided herein is true and complete

VICTOR KHANIN 11/28/2020 118661 8/3/2022
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

Tel. # (917) 407-9540 Fax # _____

Email 123orel@gmail.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.

SEAL OF THE
NYC DEP
CERTIFIED
ASBESTOS
INVESTIGATOR



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



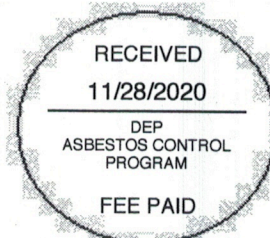
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**NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION**

Asbestos Control Program

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

ASBESTOS ASSESSMENT REPORT

Building Floors-5 to 5	Apt.5A, 5D (no window work)	ceiling plaster(4)	4	No	No				
Building Floors-5 to 5	Apt.5A, 5D (no window work)	wall sheetrock(3)	3	No	No				
Building Floors-5 to 5	Apt.5A, 5D (no window work)	floor tiles (3)	3	No	No				
Building Floors-5 to 5	Apt.5A, 5D (no window work)	floor mastic under wood floor(0)	0	No	Yes	800		No	c

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
Asbestos Analytical Lab	11938	9/18/2020

11. NYS DOL Asbestos Handling license # 43312 Company Name VAK Environmental Inc.**12. Comment**no window work, assume mastic underneath wood floor in both apts.**I hereby declare the information provided herein is true and complete**VICTOR KHANIN11/28/20201186618/3/2022

DEP Certified Asbestos Investigator's Signature

Date

Certificate Number

Expiration Date

Tel. # (917) 407-9540

Fax #

Email 123orel@gmail.com

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SEAL
OF THE
NYC DEP
CERTIFIED
ASBESTOS
INVESTIGATORIs it a Build-It-Back project? ☐ Yes, App ID # _____ ☒ No

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