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**NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION**  
**Asbestos Control Program**  
 59-17 Junction Boulevard, 8<sup>th</sup> Floor, Corona, NY 11368-5

**NOT AN ASBESTOS PROJECT**



When submitting this form at the NYC Department of Buildings, the original form and three (3) copies with original signature and seal are required. Submittal at the NYCDEP requires one copy of the form with original signature and seal.

2. Facility Address 4918 8th Avenue Borough Brooklyn Zip 11220  
 AKA \_\_\_\_\_ 3. Block 786 4. Lot 44  
 5. Building Owner Yat Wa Yim Tel. # (917) 667-9722  
 6. Address 4918 8th Avenue, Brooklyn State NY Zip 11220  
 7. Contact Person Kelly Chen 8. Tel. # (718) 853-9605

9. Description of the Entire Scope of Work

Renovation of existing restaurant, minor partition, counter, wall and floor finishes, plumbing fixtures and kitchen exhaust hood system to be installed, no change in use, occupancy or egress under this application.

10. Est. Start Date \_\_\_\_\_ ☒ As soon as permit approved Est. Completion Date \_\_\_\_\_ of the Entire Scope of Work.

11. I, Ding Yeu Chen, have conducted an asbestos investigation on 7/6/09 in accordance with  
Name of Certified Asbestos Investigator Date

Sections 1-16 and 1-27 of the NYC DEP Asbestos Control Program Rules and declare that at said facility address, the

- ☐ a. premise to be demolished is free of any asbestos containing material (ACM).  
☐ b. premise to be demolished contains 10 square feet or less or 25 linear feet or less of ACM.  
☒ c. cumulative surfaces of structure(s) affected by the work are free of ACM.  
☐ d. cumulative surfaces of structure(s) affected by the work contain 10 square feet or less or 25 linear feet or less of ACM  
☐ e. normally non-friable ACM shall be disturbed/removed. Specify amount: \_\_\_\_\_ square feet  
☐ f. ACM will not be disturbed during the scope of work. Specify amount of ACM present: \_\_\_\_\_ square feet \_\_\_\_\_ linear feet

**All ACM specified in "b", "d", or "e" must be removed in accordance with the DEP Asbestos Rules or NYS DOL ICR56.\***

12. RESULTS OF BUILDING SURVEY AND HAZARD ASSESSMENT:

| FLOOR<br>(including<br>cellar and<br>basement) | DESCRIBE SECTION<br>OF FLOOR<br>(e.g. entire, east wing, room #, boiler room, lobby, etc.) | ALL MATERIALS<br>ASSUMED TO CONTAIN ACM<br>AND/OR SAMPLED | NUMBER OF<br>SAMPLES<br>ANALYZED | ASBESTOS<br>PRESENT |                                     | ASSUMED<br>ACM |
|------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------|---------------------|-------------------------------------|----------------|
|                                                |                                                                                            |                                                           |                                  | YES                 | NO                                  |                |
| 1st floor                                      | Dinning area partition/plaster wall                                                        | None                                                      | 2                                |                     | <input checked="" type="checkbox"/> |                |
| 1st floor                                      | Dinning area floor/ceramic tile floor                                                      | None                                                      | 0                                |                     | <input checked="" type="checkbox"/> |                |
| 1st floor                                      | Kitchen floor/vinyl tile floor (Homo)                                                      | None                                                      | 1                                |                     | <input checked="" type="checkbox"/> |                |
|                                                |                                                                                            |                                                           |                                  |                     |                                     |                |
|                                                |                                                                                            |                                                           |                                  |                     |                                     |                |
|                                                |                                                                                            |                                                           |                                  |                     |                                     |                |
|                                                |                                                                                            |                                                           |                                  |                     |                                     |                |

13. Analytical Laboratory New York environmental and Lab.

14. ELAP # 11510 15. Date(s) Samples Analyzed 7/9/09

NYS DOH CERTIFICATION

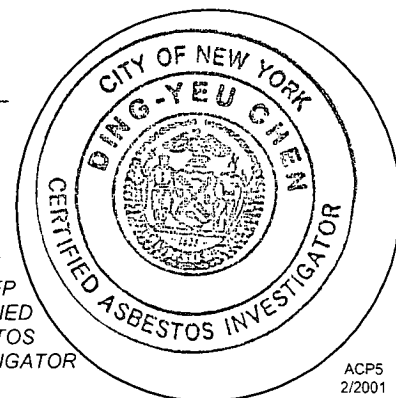
16. I hereby declare the information provided herein is true and complete.

Ding Yeu Chen 111240 7/10/09 (718) 539-8675  
NYC DEP Certified Asbestos Investigator's Signature Certificate Number Date Daytime Telephone Number

Any modification or deviation from information provided on this form must be reported immediately in writing directly to the NYCDEP. 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.

\* In-plant operations, as defined in §56-3.1 of ICR56, are not permitted in New York City.

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INVESTIGATOR



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