



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Flushing, NY 11375
ASBESTOS ASSESSMENT REPORT



1. NYC Buildings Dept. Application # _____
2. Premise No. 734 Street Name 51 Street Borough Brooklyn Zip 11220
3. AKA N/A Type of Facility Residence BIN 3013744 Block 00802 Lot 0020
4. Building Owner Ying Xiong Address 734 51 Street
5. City Brooklyn State NY Zip 11220 Contact Person Yun Zhou
6. Tel. # (718) 309-5678 Fax # (718) 591-5463 Email expediterservice@gmail.com

7. Description of the Entire Scope of Work

Interior renovation with minor non-bearing partition work at 3rd floor rear apartment.

8. I, JOHN CHEN, have conducted an asbestos investigation on 8/10/2010 in accordance
Name of Certified Asbestos Investigator Date

with Sections 1-16 and 1-28 of the NYC DEP Asbestos Control Program Rules and declare that at said facility address, the

- ☒ a. premise (or portions thereof) 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 _____ linear ft.
Specify locations (attach additional documents as necessary): _____

9. RESULTS OF ASBESTOS BUILDING SURVEY:

FLOOR	DESCRIPTION SECTION OF FLOOR	ALL MATERIALS ASSUMED TO CONTAIN ACM AND/OR SAMPLED	NUMBER OF SAMPLES ANALYZED	ASBESTOS PRESENT	ASSUMED ACM
3rd floor	entire rear apartment	partition plaster	3	No	

10. Analytical Laboratory Kam Consultants

11. ELAP # 11273 Date(s) Samples Analyzed 8/11/2010
NYS DOH CERTIFICATION

I hereby declare the information provided herein is true and complete

John Chen
DEP Certified Asbestos Investigator's Signature

8/15/2010
Date

114087
Certificate Number

6/28/2011
Expiration Date

Tel. # (917) 593-2704 Fax # (718) 261-1315 Email jjchen1203@yahoo.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



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