



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Flushing, NY 11355
ASBESTOS ASSESSMENT REPORT



1. NYC DOB Job # (if applicable) _____ **Control Number: 3017050**
2. Premise No. 185 Street Name COLUMBIA STREET Borough Brooklyn Zip 11231
3. AKA _____ Type of Facility Commercial BIN 3003560 Block 00319 Lot 0001
4. Building Owner YICK TAK CHEUNG Address 7 MORNROE STREET, APARTMENT 6
5. City NEW YORK State NY Zip 10002 Contact Person YICK TAK CHEUNG
6. Tel. # (917) 885-8526 Fax # _____ Email _____
7. Description of the Entire Scope of Work
DEMOLITION OF THE STRUCTURE

8. I, LI TSANG, have conducted an asbestos investigation on
03/26/2012 in accordance
Name of Certified Asbestos Investigator 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: 30 sq. ft linear ft.
Specify locations (attach additional documents as necessary):
FLASHING MATERIAL ON SOUTH WALL OF 183 COLUMBIA ST

☐ d. entire building is free of asbestos containing material (ACM).

9. RESULTS OF ASBESTOS BUILDING SURVEY:

FLOOR	DESCRIBE SECTION OF FLOOR	ALL MATERIALS ASSUMED TO CONTAIN ACM AND/OR SAMPLED	NUMBER OF SAMPLES ANALYZED	ASBESTOS PRESENT	ASSUMED ACM
CELLAR	FOUNDATION WALLS	MORTAR	6	No	
GROUND FL	EXTERIOR WALLS	PLASTER AND MORTAR	12	No	
GROUND	SOUTH WALL OF 183 COLUMBIA ST	ROOFING AND FLASHING MATERIALS	4	Yes	

I hereby declare the information provided herein is true and complete

LI TSANG 3/28/2012 114594 4/1/2013
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date
Tel. # (516) 944-9500 Fax # _____ Email tsang@nyenvironmental.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



2518150



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10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
NY ENVIRONMENTAL & ANALYTICAL LABS, INC.	11510	3/27/2012

11. NYS DOL Asbestos Handling license # 28656 Company Name NY Environmental & Analytical Labs, Inc.

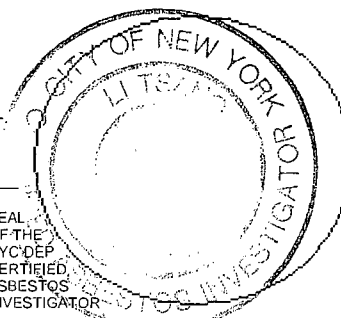
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