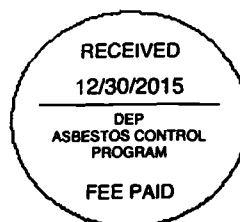




NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Asbestos Control Program  
59-17 Junction Boulevard, 8th Floor, Flushing, NY 11373  
**ASBESTOS ASSESSMENT REPORT**



1. NYC DOB Job # (if applicable) \_\_\_\_\_ **Control Number: 3220745**  
2. Premise No. 186 Street Name Ross Str. Borough Brooklyn Zip 11211  
3. AKA \_\_\_\_\_ Type of Facility Other BIN 3060079 Block 02188 Lot 0011  
4. Building Owner Congregation Tzemach Tzadik Address 186 Ross Street  
5. City Brooklyn State NY Zip 11211 Contact Person Yoel Wertzberger (member)  
6. Tel. # (718) 812-0021 Fax # \_\_\_\_\_ Email yoelyw@gmail.com

7. Description of the Entire Scope of Work

MINOR INTERIOR RENOVATION OF THE LOFT AREA ON THE SECOND FLOOR.

8. I, SVETLANA SILBERMAN, have conducted an asbestos i  
Name of Certified Asbestos Investigator

12/24/2015 11:00AM-12:00PM

Date(s)

DEPT. BLDGS. 321245586 Job Number

SC140905007 Scan Code

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: 1172 sq. ft. \_\_\_\_\_ linear ft.  
Specify locations (attach additional documents as necessary):  
Vinyl Flooring is Assumed ACM and will not be disturbed. New finishing will be put on top. Estimated 1172 SF.  
☐ 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 |
|-------|---------------------------|--------------------------------------------------------------------------------------------|----------------------------|------------------|-------------|
| 2     | Loft Area.                | Sheetrock.                                                                                 | 2                          | No               | No          |
| 2     | Loft Area.                | Wall Insulation.                                                                           | 4                          | No               | No          |
| 2     | Masonry wall.             | Mortar.                                                                                    | 2                          | No               | No          |
| 2     | Loft Area.                | Vinyl Flooring is Assumed ACM and will not be disturbed. New finishing will be put on top. | 0                          | Yes              | Yes         |

I hereby declare the information provided herein is true and complete

Svetlana Silbermann  
SVETLANA SILBERMAN

DEP Certified Asbestos Investigator's Signature

12/30/2015

Date

125141

Certificate Number

10/25/2016

Expiration Date

Tel. # (718) 887-4992 Fax # (718) 799-5314

Email lana.inspectionsservices@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

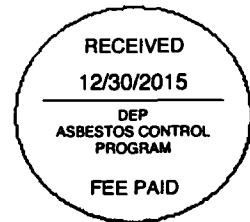


Is it a Build-It-Back project? ☐ Yes, App ID # \_\_\_\_\_ ☒ No





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10. ANALYTICAL LABORATORY:

| NAME | ELAP # (NYS DOH CERTIFICATION) | DATE(S) SAMPLES ANALYZED |
|------|--------------------------------|--------------------------|
| EMSL | 11506                          | 12/30/2015               |

11. NYS DOL Asbestos Handling license # 42875 Company Name Inspection Services, LLC

I hereby declare the information provided herein is true and complete

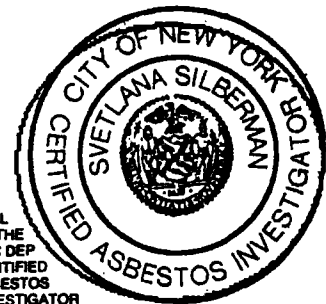
Svetlana Silberman 12/30/2015 125141 10/25/2016  
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

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

