



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: 3193590**

2. Premise No. 9221 Street Name Ditmas Avenue Borough Brooklyn Zip 11236

3. AKA _____ Type of Facility Commercial BIN _____ Block 8110 Lot 1

4. Building Owner Edith Fried Address P.O. Box 190-147

5. City Brooklyn State NY Zip 11219 Contact Person David

6. Tel. # (917) 560-6008 Fax # _____ Email _____

7. Description of the Entire Scope of Work
Installation of a boiler in a trailer.

8. I, ANTHONY OROZCO, have conducted an asbestos investigation on
07/10/2015 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. 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: _____ sq. ft _____ linear ft.
 Specify locations (attach additional documents as necessary): _____

☐ 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
Ground Floor	Left trailer (West)	Inside trailer is metal and wood.	0	No	No

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
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11. NYS DOL Asbestos Handling license # 60195 Company Name North East Bronx Environmental, Incorporated

I hereby declare the information provided herein is true and complete

ANTHONY OROZCO 7/12/2015 122748 6/23/2017
 DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date
 Tel. # (347) 284-5697 Fax # _____ Email nebenvironmentalinc@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.



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