



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: 3780305**
 2. Premise No. 41 Street Name EUCLID AVENUE Borough Brooklyn Zip 11208
 3. AKA _____ Type of Facility Residence BIN 3090922 Block 04105 Lot 0018
 4. Building Owner LEAL VALENCIA, FRANCISCO Address 41 EUCLID AVENUE
 5. City Brooklyn State NY Zip 11208 Contact Person LEAL VALENCIA, FRANCISCO
 6. Tel. # (347) 489-3684 Fax # _____ Email _____
 7. Work Type _____

Description of the Entire Scope of Work

Solar panels installation on the roof using ballast systems weighted down by concrete blocks if they are rubber / flat roofs or secured to aluminum roofs without penetrations, by using set screws. Only penetration will be with 1 or 2 conduits of 2-3" in diameter entering the building's main electrical room.

8. I, MARK NAKHUMOVICH, have conducted an asbestos investigation on
10/20/2020 11:00AM-11:15AM 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. the premises or the portion(s) of the premises, included in the scope of renovations was/were determined that there was no asbestos-containing materials (ACM) present
- ☒ 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: 1100 sq. ft 0 linear ft.
- ☐ d. entire building is free of asbestos containing material (ACM).

9. RESULTS OF ASBESTOS BUILDING SURVEY:

Floor	Section of Floor(s) Surveyed	Material Assumed to Contain ACM and/or Sampled	Number of Samples Analyzed	Asbestos Present	Assumed ACM	Square Feet	Linear Feet	Abated	Scope of Work Applied
Roof	Roof/Electrical Room	Roofing Asphalt, Tar	0	Yes	Yes	850		No	c

I have advised the Owner / owner's representative / client that the minor project amounts of the confirmed or presumed ACMs shall need to be abated by a NYS DOL Licensed Asbestos Abatement Contractor, and disposed of as asbestos-containing wastes, prior to conducting this renovation project.

I hereby declare the information provided herein is true and complete

MARK NAKHUMOVICH

DEP Certified Asbestos Investigator's Signature

10/22/2020

Date

115626

Certificate Number

9/4/2021

Expiration Date

Tel. # (917) 623-9274 Fax # (718) 247-9781

Email mark@alamonys.com

SEAL OF THE
NYC DEP
CERTIFIED
ASBESTOS
INVESTIGATOR



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.

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



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Roof	Roof/Electrical Room	Siding/Walls	0	Yes	Yes	250	No	c
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10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
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11. NYS DOL Asbestos Handling license # 54835 Company Name Alamo Environmental Consulting Inc.

12. Comment

Warning: If during demolition/construction, a suspect asbestos containing material (ACM) (e.g. insulation, waterproofing or other) is observed in a hidden spaces, immediately stop any activity around it and call NYC Asbestos Investigator 917-623-9274

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MARK NAKHUMOVICH 10/22/2020 115626 9/4/2021
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

Tel. # (917) 623-9274 Fax # (718) 247-9781Email mark@alamonys.com

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