



**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: 3099776**

2. Premise No. 229 Street Name Brighton Beach Ave Borough Brooklyn Zip 11235

3. AKA Rental property Type of Facility Commercial BIN 3244609 Block 08670 Lot 0042

4. Building Owner Edward Abramzon Address 34 Oceanside Avenue

5. City Staten Island State NY Zip 10305 Contact Person Edward Abramzon

6. Tel. # (917) 968-0727 Fax # \_\_\_\_\_ Email \_\_\_\_\_

**7. Description of the Entire Scope of Work**

Interior partition changes to existing apartment.

8. I, EDWARD LENZO, have conducted an asbestos investigation on  
 Name of Certified Asbestos Investigator

10/29/2013 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: 436 sq. ft \_\_\_\_\_ linear ft.  
 Specify locations (attach additional documents as necessary):  
436sq ft of 12x12 vinyl peel and stick floor tiles.
- ☐ 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 |
|--------------------|---------------------------|-----------------------------------------------------|----------------------------|------------------|-------------|
| 2nd floor interior | Walls and ceilings.       | Sheet rock and skim coating.                        | 5                          | No               | No          |
| 2nd floor interior | Floors.                   | 436sq ft of 12x12 vinyl peel and stick floor tiles. | 0                          | No               | Yes         |

**10. ANALYTICAL LABORATORY:**

| NAME              | ELAP # (NYS DOH CERTIFICATION) | DATE(S) SAMPLES ANALYZED |
|-------------------|--------------------------------|--------------------------|
| Amerisci New York | 11480                          | 11/4/2013                |

I hereby declare the information provided herein is true and complete

EDWARD LENZO 11/4/2013 119354 9/1/2014  
 DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

Tel. # (917) 916-7670 Fax # (718) 984-5495 Email elasbestos202@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



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11. NYS DOL Asbestos Handling license # 55043 Company Name E.L. Asbestos Inspections

 I hereby declare the information provided herein is true and complete

|                                                                                 |                  |                    |                 |
|---------------------------------------------------------------------------------|------------------|--------------------|-----------------|
| <u>EDWARD LENZO</u>                                                             | <u>11/4/2013</u> | <u>119354</u>      | <u>9/1/2014</u> |
| DEP Certified Asbestos Investigator's Signature                                 | Date             | Certificate Number | Expiration Date |
| Tel. # (917) 916-7670 Fax # (718) 984-5495 Email <u>elasbestos202@gmail.com</u> |                  |                    |                 |

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