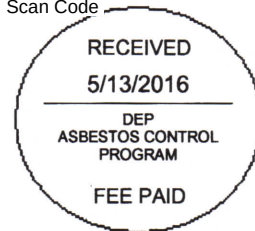




NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Flushing, NY 11373
ASBESTOS ASSESSMENT REPORT



1. NYC DOB Job # (if applicable) _____ **Control Number: 4242012**

2. Premise No. 62-38 Street Name 136th Street Borough Queens Zip 11367

3. AKA _____ Type of Facility Residence BIN _____ Block 6390 Lot 14

4. Building Owner Miriam & Abel Cepeda Address 62-38 136th Street

5. City Queens State NY Zip 11367 Contact Person Mike Sorrentino

6. Tel. # (516) 644-7053 Fax # (718) 343-0793 Email msorrentino@pauldavis.com

7. Description of the Entire Scope of Work
Full interior gut renovation and roof replacement due to significant fire damage. No change in use or egress.

8. I, LANCE TUCKRUSKYE, have conducted an asbestos investigation on _____
Name of Certified Asbestos Investigator
05/06/2016 9:00AM-1:00PM 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
Roof	Entire	roofing, tar paper	8	No	No
Basement	Entire	Ceramic tile, sheetrock	3	No	No
1st floor	Entire	Plaster, sheetrock, ceramic tile	13	No	No
2nd floor	Entire	ceramic tile, grout, sheetrock, plaster	7	No	No

I hereby declare the information provided herein is true and complete

LANCE TUCKRUSKYE 5/13/2016 116655 10/10/2017
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

Tel. # (516) 546-2640 Fax # (516) 546-8811

Email lance@cleanairtesting.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.



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



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Scan Code ESHS1545813



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program
59-17 Junction Boulevard, 8th Floor, Flushing, NY 11373

ASBESTOS ASSESSMENT REPORT

RECEIVED

5/13/2016

DEP
ASBESTOS CONTROL
PROGRAM

FEE PAID

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
Clean Air Testing Labs, Inc	11242	5/7/2016
Amerisci NY	11480	5/12/2016

11. NYS DOL Asbestos Handling license # 28658 Company Name Clean Air Testing Labs, Inc.

I hereby declare the information provided herein is true and complete

LANCE TUCKRUSKYE

5/13/2016

116655

10/10/2017

DEP Certified Asbestos Investigator's Signature

Date

Certificate Number

Expiration Date

Tel. # (516) 546-2640 Fax # (516) 546-8811

Email lance@cleanairtesting.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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