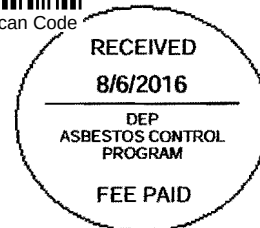




NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

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



1. NYC DOB Job # (if applicable) _____

Control Number: 4256227

2. Premise No. 58-44 Street Name 211th St Borough Queens Zip 113643. AKA _____ Type of Facility Residence BIN 4160674 Block 07461 Lot 00844. Building Owner Roopalekha Shenoy Address 58-44 211th St5. City Queens State NY Zip 11364 Contact Person Roopalekha Shenoy6. Tel. # (917) 873-2286 Fax # _____ Email _____

7. Description of the Entire Scope of Work

INSTALLATION OF MOUNTING MATERIALS FOR SOLAR PHOTO VOLTAIC ARRAY (1/4" pilot holes per roof mount, qty to vary but never more than 90 (for the largest jobs)). Drilling of 1 1/8" Hole through siding/wall near electric service meter /electrical panel to interconnect to customer's electrical service. NO other penetrations will occur on This jobs.

8. I, MARK NAKHUMOVICH, have conducted an asbestos investigation on

Name of Certified Asbestos Investigator

08/06/2016 9:00AM-9:15AM 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. 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: 3000 sq. ft linear ft.
Specify locations (attach additional documents as necessary):
Roofing Materials & siding/wall assumed as ACM
- ☐ 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	Roof	Roofing Materials & siding/wall assumed as ACM	0	No	Yes

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
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I hereby declare the information provided herein is true and complete

Mark Nakhumovich

Digitally signed by Mark Nakhumovich
DN: cn=Mark Nakhumovich, o=NYC DEP, email=mark.nakhumovich@nyc.gov
MARK NAKHUMOVICH8/6/20161156269/4/2017

DEP Certified Asbestos Investigator's Signature

Date

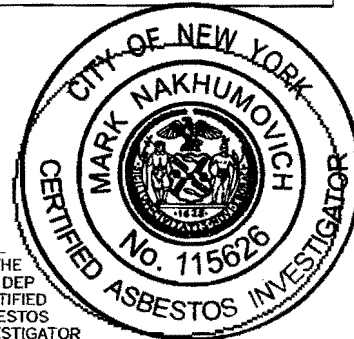
Certificate Number

Expiration Date

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

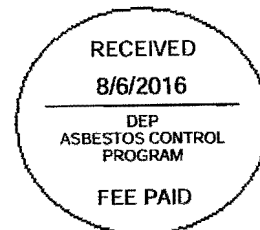
SEAL
OF THE
NYC DEP
CERTIFIED
ASBESTOS
INVESTIGATOR

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

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NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION
Asbestos Control Program
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ASBESTOS ASSESSMENT REPORT



11. NYS DOL Asbestos Handling license # 54835 Company Name Alamo Environmental Consulting Inc.

I hereby declare the information provided herein is true and complete

Mark Nakhumovich

Digitally signed by Mark Nakhumovich
DN: cn=Mark Nakhumovich, o=Alamo EC, ou=NYC,
email=mark@alamonys.com, c=US
Date: 2016.08.06 14:51:44 -0400

<u>MARK NAKHUMOVICH</u>	<u>8/6/2016</u>	<u>115626</u>	<u>9/4/2017</u>
DEP Certified Asbestos Investigator's Signature	Date	Certificate Number	Expiration Date

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

Email mark@alamonys.com

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



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