



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: 4674968**
2. Premise No. 196-14 Street Name POMPEII AVENUE Borough Queens Zip 11423
3. AKA Building B Type of Facility Residence BIN 4460576 Block 10524 Lot 0001
4. Building Owner Marita Joseph Address On Site Manager Holliswood Owner Crp, 196-04 Pompeii Ave
5. City Queens State NY Zip 11432 Contact Person Sajad Akbar
6. Tel. # (718) 726-0244 Fax # _____ Email _____
7. Work Type General Construction

Description of the Entire Scope of Work

REMOVE UNSTABLE BRICK MATERIALS, SECURE EXISTING EXPOSURE FRAME WALL AND INSTALL TEMPORARY WATERPROOFING TO COMPLY WITH VIOLATION #322348 ISSUED BY THE DOB FORENSIC ENGINEERING UNIT.

8. I, KARTIK CHANDA, have conducted an asbestos investigation on _____
Name of Certified Asbestos Investigator
02/15/2020 9:30AM-10:00AM Date(s) _____ in accordance

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: _____ sq. ft _____ linear ft.
☐ d. entire building is free of asbestos containing material (ACM).

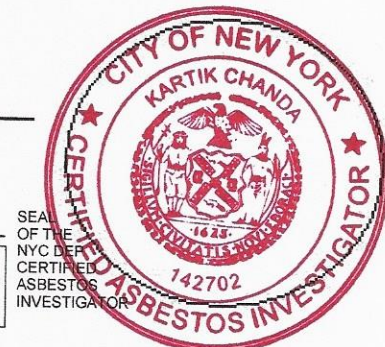
9. RESULTS OF ASBESTOS BUILDING SURVEY:

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
Facade-1 to 2	Building #B: Rear side exterior brick wall	Brick	7	No	No				

I hereby declare the information provided herein is true and complete

KARTIK CHANDA 2/23/2020 142702 9/1/2020
DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date
Tel. # (347) 249-6256 Fax # _____
Email kartikchanda@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.



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





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Facade-1 to 2	Building #B: Rear side exterior brick wall	Brick Joint Mortar	7	No	No				
Facade-1 to 2	Building #B: Rear side exterior brick wall	Sheetrock between brick and wood wall	5	No	No				
Facade-1 to 2	Building #B: Rear side exterior brick wall	Water proofing paper behind brick wall	2	No	No				
Facade-1 to 2	Building #B: Rear side exterior brick wall	window sill	3	No	No				
Facade-1 to 2	Building #B: Rear side exterior brick wall	Stone band	3	No	No				
Facade-1 to 2	Building #B: Rear side exterior brick wall	No suspect insulation in exterior wall	0	No	No				

10. ANALYTICAL LABORATORY:

NAME	ELAP # (NYS DOH CERTIFICATION)	DATE(S) SAMPLES ANALYZED
KAM CONSULTANTS	11273	2/18/2020

11. NYS DOL Asbestos Handling license # 97718 Company Name Chanda Engineering Consultant, P.C.

12. Comment

Interior floor area (wall, ceiling and floor) and roofing material will not be disturbed during construction activity. If any suspect asbestos containing material not indicated in this form area(s), all work should be stopped, the material should be tested and treated as asbestos containing material until confirmed via analytical results.

I hereby declare the information provided herein is true and complete

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DEP Certified Asbestos Investigator's Signature Date Certificate Number Expiration Date

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SEAL
OF THE
NYC DEP
CERTIFIED
ASBESTOS
INVESTIGATOR



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



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2/23/2020 6:44:38 AM

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