

### NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program

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

# **ASBESTOS PROJECT NOTIFICATION (Form ACP7)**

This form must be submitted to the DEP not less than one week in advance of the start of abatement activities.	
I. FACILITY	
1. Premise No. 59-17 Street Name Junction Blvd Borough Queens Zip 11373	
2. AKA <u>OIT Test Facility</u> Type of Facility BIN <u>4047310</u> Block <u>01918</u> Lot <u>000</u>	1
3. Is the abatement activity not associated with a building / structure (ie., a street activity job)?	
4. If yes, specify location, on between and	
5. Is this building a one-or-two family residence? 🗌 Yes 🖾 No 🛛 Is the building height more than 75 feet? 🗌 Yes 🗵	No
6. Is the abatement activity conducted in a Government owned building? Yes X No	
6a. Is it a Build-It-Back project? Yes X No App ID #	
II. BUILDING OWNER	
7. Name DEP Testor Address 59-17 Junction Blvd	
8. City Flushing State NY Zip 11373 Contact Person Ann Chen	
9. Tel. # (718) 595-3000 Fax # Email ychen@dep.nyc.gov	
III. APPLICANT	
10. Applicant's Affliation Owner 🖾 Asbestos contractor Third Party Air Monitor Other	
11. Name Ann Chen   Address 59-17 Junction Blvd.	
12. City Flushing State NY Zip 11373 Contact Person Ann Chen	
13. Tel. #        Email       ychen@dep.nyc.gov	
IV. ASBESTOS ABATEMENT CONTRACTOR	
14. Name     YU & Associates, Inc.     DOL Lic. # 29700     Address     59-17 Junction Blvd.       45. Oit:     Elughing     Tin 11272     Centert Derson Jun Chon	
15. City       Flushing       State       NY       Zip       11373       Contact Person       Ann       Chen         16. Tel. # (718)       595-3029       Fax #       Email       ychen@dep.nyc.gov	
V. THIRD PARTY AIR MONITOR	
17. Name       YU & Associates, Inc.       DOL Lic. # 29700       Address       59-17 Junction Blvd.	
18. City Flushing State NY Zip 11373 Contact Person Ann Chen	
19. Tel. # 7185953029       Fax #Email acpefilecontractor@outlook.co	m
20. Sample Analysis Laboratory TestLab NYS DOH ELAP # 1234	
VI. PROJECT INFORMATION	
21. Start date 5/1/2017 Projected completion date 12/29/2017	
22. Asbestos work schedule Monday 8:00AM - 12:00PM, Monday10:00PM - 2:00AM, Tuesday 8:00AM - 5:00 Thursday 8:00AM - 5:00PM	PM,
Access to inspect the premises must be provided during the work schedule indicated above.	

TRU #	ACP7 Fee	EN #
TRU5003QN17	\$400.00	

23. Total amount of asbestos-containing material150 Square Feet, and/orLinear F	eet
24. Is the area under containment on any single floor equal to or more than a. 15,000 sq.ft Yes XNo b. 7,500 sq.ft	. Yes 🛛 No
25. TYPE OF ABATEMENT: Enclosure, Removal, Repair	
26. ABATEMENT PROCEDURE: Full Containment, Interior Foam	
VII. PROJECT DETAILS	
27. DOES THE ASBESTOS PROJECT INVOLVE (Checking "Yes" to any of the following subsections will require notice to FDNY as per Section 901.7 NYC Fire Code, Local Law 26 of 2008)	
A. Disengagement or obstruction of any component of exit signage or exit lighting system?	Yes XNo
B. Disengagement of any fire alarm system component including any fire alarm-initiating device?	Yes XNo
C. Shut-off of the sprinkler system water supply?	Yes X No
D. Shut-off of any part of a standpipe system or standpipe system components, including valves or fire pumps?	Yes XNo
28. DOES THE ASBESTOS PROJECT INVOLVE	
(If you answer "Yes" to any of the following, you must submit a complete Work Place Safety Plan and obtain an Asbe Abatement permit from DEP before commencing abatement activities. Please see section 1-26 of the DEP Asbestos the instructions for this form)	
A. Obstruction of an exit door leading to an exit stair or the exterior of the building?	Yes X No
B. Obstruction of an exterior fire escape or access to that fire escape?	Yes X No
C. Obstruction of a fire-rated corridor leading to an exit door?	Yes X No
D. Removal of handrails in an exit stair or ramp within the work area*?	Yes X No
E. Removal or dismantling of any fire alarm system component including any fire alarm-initiating device (e.g. smoke detectors and manual pull stations) within the work area*?	Yes X No
F. Removal or dismantling of any exit sign, including directional signs, or any component of the exit lighting system, including photoluminescent exit path marking within the work area*?	Yes X No
G. Removal or dismantling of any part of a sprinkler system including piping or sprinkler head within the work area*?	Yes XNo
H. Removal or dismantling of any part of a standpipe system, including valves or fire pumps within the work area*?	Yes XNo
I. Obstruction of an interior stairway leading to an exit or exit passageway of a building?	Yes X No
J. Is abatement activity being performed within a work area located in a confined space?	Yes X No
29. DOES THE ASBESTOS PROJECT INVOLVE	
(If you answer "Yes" to any of the following, you must obtain an Asbestos Abatement Permit from DEP before comma abatement activities. Please see section 1-26 of the DEP Asbestos Rules and the instruction form that will be generat you submit this application)	encing ed once
A. Removal of any fire-resistance rated portions of a wall, ceiling, floor, door, corridor, partition, or structural element enclosure including spray on fire-resistance rated materials within the work area*?	Yes XNo
<ul> <li>B. Removal of any fire dampers, smoke dampers, fire stopping materials, fireblocking or draft stopping within fire-resistance rated assemblies or within concealed spaces?</li> <li>C. Removal of any non-load bearing / non-fire-resistance rated wall (greater than 45 sq.ft or 50% of a given wall) within the work area*?</li> </ul>	Yes X No
D. Any plumbing work other than the repair or replacement of plumbing fixtures within the work area*?	Yes X No
* (ie the designated rooms, spaces where asbestos activities take place)	

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TRU5003QN17	\$400.00	

## VIII. ASBESTOS HAULER

### IX. LOCATION OF ABATEMENT

Total amount of asbestos-containing material		150 Square Feet, and/or			Linear Feet			
					Amount	of ACM		
Floor	Entire Floor	Section of Floor	Type Of Abatement	Abatement Procedure	Type of Asbestos Containing Material	Square Feet	Linear Feet	A-TRU Review/ Approval/Permit Required
1st	No	Lobby	Enclosure	Interior Foam	Wall plaster	50		No
1st	No	Lobby	Removal	Interior Foam	Ceiling	50		No
Cella				Full	Pipe			
r	No	Boiler room	Repair	Containment	insulation	50		No
					TOTAL ACM	150		

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#### X. ACKNOWLEDGEMENT

31. I hereby declare that the information provided herein is true and complete to the best of my knowledge. I am familiar with Federal, State and NYC laws and regulations applicable to asbestos-related work.

YU & Associates, Inc.	YU & Associates, Inc.	Ann Chen
Print Name of Air Monitor	Print Name of Asbestos Contractor	Print Name of Applicant
4/11/2017	4/11/2017	4/11/2017
Date Acknowledged	Date Acknowledged	Date Acknowledged

32. I understand that as the owner of a building where asbestos abatement activity occurs, I am responsible for the performance of the asbestos abatement activities in accordance with the Asbestos Control Program Rules. I have contracted the third party air monitor who is completely independent of all parties involved in the asbestos project. I hereby declare that I have authorized the filing of this notification for the work specified herein.

DEP Testor N/A

Print Name of Owner

Date Acknowledged

#### Please note:

- 1. The requirements of the Asbestos Control Program Rules may not be lawfully avoided or lessened through the performance of work in incremental or piecemeal fashion
- 2. Any modification of information provided on this form must be reported immediately in writing directly to the NYC DEP Asbestos Control Program

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