

**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 OIT Test Facility Type of Facility _____ BIN 4047310 Block 01918 Lot 0001
3. Is the abatement activity not associated with a building / structure (ie., a street activity job)? ☐ Yes ☒ No
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 ☒ No
- 6a. Is it a Build-It-Back project? ☐ Yes ☒ 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 Affiliation ☐ 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. # 7185953029 Fax # _____ Email ychen@dep.nyc.gov

IV. ASBESTOS ABATEMENT CONTRACTOR

14. Name YU & Associates, Inc. DOL Lic. # 29700 Address 59-17 Junction Blvd.
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.com
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, Monday 10:00PM - 2:00AM, Tuesday 8:00AM - 5:00PM, Thursday 8:00AM - 5:00PM

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 material 150 Square Feet, and/or _____ Linear Feet

24. Is the area under containment on any single floor equal to or more than a. 15,000 sq.ft. ☐ Yes ☒ No 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 ☒ No
- B. Disengagement of any fire alarm system component including any fire alarm-initiating device? ☐ Yes ☒ No
- C. Shut-off of the sprinkler system water supply? ☐ Yes ☒ No
- D. Shut-off of any part of a standpipe system or standpipe system components, including valves or fire pumps? ☐ Yes ☒ No

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 Asbestos Abatement permit from DEP before commencing abatement activities. Please see section 1-26 of the DEP Asbestos Rules and the instructions for this form)

- A. Obstruction of an exit door leading to an exit stair or the exterior of the building? ☐ Yes ☒ No
- B. Obstruction of an exterior fire escape or access to that fire escape? ☐ Yes ☒ No
- C. Obstruction of a fire-rated corridor leading to an exit door? ☐ Yes ☒ No
- D. Removal of handrails in an exit stair or ramp within the work area*? ☐ Yes ☒ 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 ☒ 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 ☒ No
- G. Removal or dismantling of any part of a sprinkler system including piping or sprinkler head within the work area*? ☐ Yes ☒ No
- H. Removal or dismantling of any part of a standpipe system, including valves or fire pumps within the work area*? ☐ Yes ☒ No
- I. Obstruction of an interior stairway leading to an exit or exit passageway of a building? ☐ Yes ☒ No
- J. Is abatement activity being performed within a work area located in a confined space? ☐ Yes ☒ 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 commencing abatement activities. Please see section 1-26 of the DEP Asbestos Rules and the instruction form that will be generated once you submit this application)

- 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 ☒ No
- B. Removal of any fire dampers, smoke dampers, fire stopping materials, fireblocking or draft stopping within fire-resistance rated assemblies or within concealed spaces? ☐ Yes ☒ No
- 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*? ☐ Yes ☒ No
- D. Any plumbing work other than the repair or replacement of plumbing fixtures within the work area*? ☐ Yes ☒ No

* (ie the designated rooms, spaces where asbestos activities take place)

TRU #	ACP7 Fee	EN #
TRU5003QN17	\$400.00	

VIII. ASBESTOS HAULER

30. Asbestos Hauler Haulaway NYS DEC Permit # 12345 TEL.# (718) 111-1111
 Disposal Site(s) Junkyard 123 Test Drive Allentown PA 12345

IX. LOCATION OF ABATEMENT

Total amount of asbestos-containing material 150 Square Feet, and/or _____ Linear Feet

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

TRU #	ACP7 Fee	EN #
TRU5003QN17	\$400.00	

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.

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

<u>DEP Testor</u>	<u>N/A</u>
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

TRU #	ACP7 Fee	EN #
TRU5003QN17	\$400.00	