SEP 21

USEPA
290 BROADWAY
NY, NY

NOTIFICATION OF DEMOLITION AND RENOVATION
PAL JOB # 21-1109

Operator Project #	**Postmark**	**Date Received**	**Notification #**

TYPE OF NOTIFICATION (O-Original, R-Received, C-Cancelled): **R – Add Material, Waste Hauler & Landfill**		
FACILITY INFORMATION (Identify Owner, Removal Contractor and Other Operator):		
OWNER NAME: American Airlines		
Address: JFK Airport		
City: Jamaica	State: NY	Zip: 11430
Contact Name: David Richards		Telephone: 718-487-6726
REMOVAL CONTRACTOR: PAL Environmental Safety Corp. d/b/a PAL Environmental Services		
Address: 11-02 Queens Plaza South		
City: Long Island City	State: NY	Zip: 11101
Contact Name: Aric Domozick		Telephone: 718-349-0900
OTHER CONTRACTOR:		
Address:		
City:	State:	Zip:
Contact Name:	Telephone:	
TYPE OF OPERATION (D-Demo, O-Ordered Demo, R-Renovation, E-Emergency Renovation: R		
IS ASBESTOS PRESENT? (YES NO) YES		
FACILITY DESCRIPTION (Include Building Name, Number and Floor or Room Number)		
Building Name: JFK Airport		
Address: American Airlines Terminal 8		
City: Jamaica	State: NY	Zip: 11430
Site Location: Terminal 8		
Building Size: F	# of Floors:	Age in Years:
Present Use: Airport	Prior Use: Airport	
Procedure, Including Analytical Method, If Appropriate, Used to Detect the Presence of Asbestos Material: PLM – Polarized Light Microscopy		

Approximate amount of asbestos , Including 1. Regulated ACM to be removed 2. Category I ACM not removed 3. Category II ACM not removed	R. ACM to be removed	Non-Friable Asbestos Material not to be removed		Indicate Unit of Measurement Below	
		CAT I	CAT II	UNIT	
Surface Area: Pipe Insulation	48			Linear Feet: X	Ln M:
Surface Area: Tar Wrap	460 **Add 300 (760)**			Square Feet: **X**	Square Meter:
Volume RACM off Facility Component				Cu Ft:	Cu M:
Scheduled Dates Asbestos Removal (mm/dd./yy)		Start: 09/13/2021		Complete: 09/01/2022	
Scheduled Dates Demo/Renovation (mm/dd./yy)		Start:		Complete:	

DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD (S) TO BE USED:		
DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: HEPA Vacs, Micro Traps (Negative Air Pressure) and amended water will be utilized for emissions control.		
WASTE TRANSPORTER #1		
Name: Rizzo Environmental Services Corp.		
Address: 5700 47th Street		
City: Maspeth	**State: NY**	**Zip: 11378**
Contact Name: Carol M. Rizzo		**Telephone: 516-825-7227**
WASTE TRANSPORTER #2		
Name: P.A.L. Environmental Safety Corp. d/b/a PAL Environmental Services		
Address: 11-02 Queens Plaza South		
City: Long Island	State: NY	Zip: 11101
Contact Name: Aric Domozick		Telephone: 718-349-0900
WASTE TRANSPORTER #3		
Name:		
Location:		
City:	State:	Zip:
Telephone:		
Disposal Facility		
Name: 110 Sand Clean Fill Disposal Site		
Location: 136 Bethpage-Spagnoli Road		
City: Melville	**State: NY**	**Zip: 11747**
FOR EMERGENCY RENOVATIONS		
Date and Hour of Emergency (mm/dd./yy)		
Description of the Sudden, Unexpected Event:		
Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:		
DESCRIPTION OF PROCEDURE TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED OR REDUCED TO POWDER. Any ACM, which is discovered unexpectedly, or non-friable ACM, which becomes crumbled, will be immediately wet with amended water and cleaned up with HEPA Vacs, to be put in 6 mil poly bags for proper disposal.		
I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGUALTION (40 CFT PART 61, SUBPART M), WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS (required 1 year after promulgation) Signature of Owner/Operator — **02/01/2022** Date		
I certify that the above information is correct Signature of Owner/Operator — **02/01/2022** Date		