Request for Quote

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
ONE CAPITOL HILL
PROVIDENCE RI 02908

CREATION DATE : 01-NOV-07
BID NUMBER: 7044781
TITLE: Demolition Services-Providence-DOT

BID CLOSING DATE AND TIME:04-DEC-2007 01:45:00

BUYER: Ohara 2nd, John F
PHONE #: 401-574-8125

BILL TO
DOT ACCOUNTS PAYABLE
TWO CAPITOL HILL, RM 243
SMITH ST
PROVIDENCE, RI 02903
US

SHIP TO
DOT ACCOUNTS PAYABLE
TWO CAPITOL HILL, RM 243
SMITH ST
PROVIDENCE, RI 02903
US

Requistion Number: 1063416

Line	Description	Quantity	Unit	Unit Price	Total
	Contact Person: Joseph Anzelone 401-222-2411 ext 4532 Pre-bid conference to be held on 11/21/07 at 10:00 AM at: Meet at the Former Shooters Building, 25 India Street, Providence, RI 02906.				
1	TOTAL COST FOR DEMOLITION & ASBESTOS REMOVAL SERVICES @ FORMER SHOOTERS BUILDING, 25 INDIA ST, PROVIDENCE, RI. TOTAL COST, RAZE STRUCTURE ONLY TO THE FOUNDATION LEAVING FOUNDATION INTACT. DEMOLITION & ASBESTOS REMOVAL SERVICES TO BE COMPLETED WITHIN 30 DAYS OF NOTIFICATION OF AWARD THREE 3-STORY COMMERICIAL STRUCTURE AND ANY/ALL OUTBUILDINGS. LOCATION: FORMER SHOOTERS BUILDING, 25 INDIA ST., PROVIDENCE, RI 02906 RI - AP 18/AL 344 PROVIDE ALL LABOR, MATERIALS AND EQUIPMENT FOR DEMOLITION AND REMOVAL OF ANY/ALL STRUCTURES, CONTENTS, FUEL TANKS, SEPTIC SYSTEMS, SHEDS, AND DRIVEWAYS. REMOVE ALL DEBRIS AND BACKFILL WITH CLEAN FILL TO EXISTING TERRAIN ALL WATER AND SEWER SERVICE MUST BE SHUT OFF AND SEVERED AT THE MAIN & CEMENTED BEFORE CAVITIES ARE BACKFILLED & INSPECTED CONTRACTOR WILL OBTAIN "BUILDING CODE PERMIT" FROM STATE BUILDING COMMISSION AT ONE CAPITOL HILL, PROVIDENCE, RI 02908 ALL ASBESTOS MATERIAL DISCOVERED DURING THE DEMOLITION STAGE SHALL BECOME PART AND PARCEL OF THE	1.00	Each		

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer

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Line	Description	Quantity	Unit	Unit Price	Total
	CONTRACT AND WILL BE LEGALLY REMOVED AND DISPOSED OF AT NO ADDITIONAL COST TO THE OWNER AN ASBESTOS ABATEMENT PLAN HAS BEEN COMPLETED AND APPROVED BY THE DEPARTMENT OF HEALTH. THE ABATEMENT PLAN SPECIFICATION OF QUANTITIES TO BE REMOVED IS ATTACHED. THE FULL PLAN WILL BE AVAILABLE WHEN CONTRACT IS AWARDED.				

Delivery: _____

Terms of Payment: _____

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ATTACHMENT

Item 1.

The owner intends to demolish the structure that is the former Shooters Nightclub Building.

An inspection for visible, suspect/apparent Asbestos Containing Building Materials (ACBM) was conducted by personnel of Northeast Environmental Testing Laboratory, Inc. on Monday, August 1, 2005. Samples were collected and sent to AmeriSci Boston, Inc. for analysis.

This Abatement Plan addresses the removal of all presently known ACBM from the structure prior to demolition.

If during the abatement/renovation project additional suspect or apparent ACM is found, proper methods in accordance with all Federal and Rhode Island regulations shall be utilized to remove and dispose of the material. In addition, the Department of Health shall be notified of the type, location, and quantities of material to be removed and an amendment of the original plan prepared and submitted, with fee, to the Department of Health.

Item 2. – Roof Area

There is approximately 120 linear feet of roof flashing (lexonite) material along a small roof area and parapet wall outside the building. The material contains approximately 10% Chrysotile Asbestos and is in good condition.

See copy of Analysis Report on Page 2, Sample #05-8008-21.

ATTACHMENT

Item 4A. The owners are aware of the presence of the Asbestos Containing Materials (ACM) on the structure. No demolition or other work shall be allowed until all the asbestos material is removed.

No further O & M is necessary at this time.

Item 4C. 1.) A waiver of all air sampling (Pre-Abatement - Form ASB-16, Item 14, In-Process Air Sampling - Form ASB-16, Item 17; and Clearance Air Sampling – Section B.8.2.p. and Form ASB-16, Item 17) is hereby requested, as the structure will not be reoccupied but shall be demolished when the abatement work is completed.

In lieu of the above, Personnel Air Sampling shall be conducted during all Phases of the project. These samples shall be done on a continuous basis during all removal operations. Copies of the laboratory analysis reports shall be submitted by the Abatement Contractor to The Department of Health at the conclusion of the project for their permanent records.

2.) During the removal of the exterior roof flashing, a waiver is additionally requested for Sections B.8.8.a. (Asphalt Roofing Products).

Asbestos Abatement Plan

for

State of Rhode Island
Department of Transportation
Two Capitol Hill – Room 317
Providence, Rhode Island 02908

at

former Shooters Building
25 India Street
Providence, Rhode Island 02906

Prepared by:

NORTHEAST ENVIRONMENTAL TESTING LABORATORY, INC.
472 Smith Street
Providence, Rhode Island 02908
(401) 454-3400

COPY

August, 2005

RHODE ISLAND DEPARTMENT OF HEALTH

NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN

Facility: **Shooters Building (former)**

Address: **25 India Street**

City/Town: **Providence** Zip: **02906** Amendment Phase No: _____

Abatement Plan Written By: **Raymond A. Spinella** Certification No: **AAC-227PD**

Summary of specific waivers/variances being requested: **All Air Sampling; B.8.2.p. and Form ASB-16, Items 14 and 17; Section B.8.2.a. – See Attachment, Page 6, Item 4C.**

Type of Asbestos Abatement ( ) Removal ( ) Enclosure ( ) Encapsulation
(X) Demolition ( ) Glovebag (X) Asphalt Roofing
( ) Other (specify) _____

Is this plan being submitted in response to a Notice of Violation and/or a Notice of Requirement to Submit an Asbestos Abatement Plan? ( ) Yes (X) No

If yes, Indicate Notice/Building Evaluation No(s): _____

Contractor: **To Be Selected** License No: LAC-

Estimated Starting Date: **ASAP**

Pre-Abatement Sampling Information

Bulk Samples Collected By: **Raymond A. Spinella** Certification No: **AAC-227IS**

Bulk Samples Analyzed By: **AmeriSci Boston, Inc.** Certification No: **AAL-095T3**

Air Samples Analyzed By: **Northeast Environmental Testing Laboratory, Inc.** Certification No: **AAL-012A1**

Clearance Air Sampling Information

Air Samples to be Collected By: **NA**

Air Samples to be Analyzed By: **NA** Certification No: AAL-

CERTIFICATION

I certify that: this asbestos abatement plan is prepared and submitted under the provisions of Section 23-24.5-6 of the RI Asbestos Control Act and Parts A and C of the RI Rules and Regulations for Asbestos Control; all abatement/management activities performed in conjunction with this plan must be in compliance with the specifications prescribed in this plan (when approved) and the most current revision of all applicable federal and state regulations; and the asbestos abatement/management activities described in this plan must be performed by a RI licensed asbestos abatement contractor.

Certified by: _____ Title: Prin. Real Estate Specialist
(Signature of Building Owner or Agent)

Joseph Panzione Date: 8-22-05
(Typed/Printed Name of Certifier)

Subscribed and sworn before me this 22nd day of August, 2005

_____ My Commission Expires: 10-31-05
(Notary Public)

ID # 33371

AFFIX NOTARY SEAL HERE

FORM ASB-16B (11/2003) REPLACES FORM ASB-16B (3/92) WHICH IS OBSOLETE

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Office of Occupational & Radiological Health

APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN

1. Building Owner's Name:

State of Rhode Island
Department of Transportation

2. Application Prepared By:

Raymond A. Spinella

RI certification No: **AAC-227PD**

Telephone No: **(401) 454-3400**
(Area code, No., Ext.)

3. Building Owner's Mailing Address and Telephone Number:

Street: **Two Capitol Hill**

City/Town: **Providence**

Zip: **02908**

Telephone No.: **(401) 222-2411 Ext. 4532**
(Area Code, No., Ext.)

4. Person to be contacted regarding this application:

Name: **Joseph A. Anzelone**

Telephone No: **(401) 222-2411 Ext. 4532**
(Area Code, No., Ext.)

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5. Location where abatement work will be performed:

Name (if applicable): **Shooters Building (former)**

Street: **25 India Street**

City/Town: **Providence** Zip: **02906**

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6. Is this application being submitted in response to a "Notice of Requirement to Submit an Asbestos Abatement plan"? ( ) Yes (X) No

If Yes, what is the due date for submittal of Abatement plan? _____
(Mo) (Day) (Yr.)

Evaluation Number on the Notice: _____

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7. Contractor who will be performing abatement work (if selected):

Name: **To Be Selected** R.I. License No.: _____

8. Estimated Starting Date of Abatement Work: **ASAP**
(Month) (Day) (Year)

9. Estimated Completion Date of Abatement Work: **1 Day**
(Month) (Day) (Year)

10. Type of Asbestos Abatement: **(Check all that apply)**

(X) Removal
( ) Encapsulation
( ) Operations and Maintenance Only
( ) Other (Specify) _____
( ) Enclosure
(X) Demolition

11. Type of Building:

( ) School
( ) Privately Owned Building
(X) Publicly Owned Building
( ) Residence
( ) Other (Specify) _____

12. Building Access:

( ) Public Access (≥ 25% of Building Area)
( ) Limited Public Access (< 25% of Building Area)
(X) No Public Access-Vacant

13. Bulk Sample Collection and Analysis:

A). Person collecting bulk samples:

Name: **Raymond A. Spinella** RI Certification No.: **AAC-227IS**

B). Sampling Methodology:

( ) EPA AHERA Sampling requirements [40 CFR 763.86].

(X) EPA's Asbestos Containing Material in School Buildings: A Guidance Document (EPA-405/2-78-014) or Guidance for Controlling Asbestos Containing Materials – 1985 Edition (EPA-560-5-85-024)

( ) Other (Specify) _____

C). Laboratory performing the analysis of the bulk samples

Name: **AmeriSci Boston, Inc.** RI Certification No.: **AAL-095T3**

D). Analytical Methodology:

(X) EPA Interim Method for the Determination of Asbestos in Bulk Insulation Samples [PLM method only].

( ) Other (Specify) _____

14. Pre-Abatement Air Sample Collection and Analysis: **Waiver Requested**
See Attachment, Page 10, Item 4C

A). Person collecting pre-abatement air samples:

Name: **NA** Affiliation: _____

B). Laboratory performing analysis of pre-abatement air samples.
Name: _____ RI Certification No.: AAL-_____

C). Methodology used in the collection and analysis of pre-abatement samples:

( ) NIOSH Method 7400 [Most Current Revision]

( ) OSHA 29 CFR 1926.1101 – Appendix A & B

( ) Other (Specify) _____

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15. A. Indicate how the regulated asbestos containing material (RACM) will be removed from the abatement site. If a hauler or broker will be used to transport the RACM to a disposal site, they must also be identified.

To be determined by contractor.

B. Provide the name and location of the authorized asbestos waste facility to which the removed material will be transferred for disposal (if known).

To be determined by contractor.

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16. Person designated as compliance monitor for abatement work. **[NOT REQUIRED]**

Name: **Northeast Environmental Testing Laboratory, Inc. personnel**

Affiliation: **Northeast Environmental Testing Laboratory, Inc.**

17. In-Process & Clearance Air Sampling: **Waiver Requested**
See Attachment, Page 10, Item 4C

A. Describe on an attachment the type, number and location of air samples that will be collected outside the work area during the abatement project.

B. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fibers per cubic centimeter) is exceeded outside the work area during the abatement project.

C. Describe on an attachment the type, number and location of air samples that will be collected as part of the final clearance testing.

D. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fiber per cubic centimeter) is exceed during final clearance testing.

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18. A separate and fully completed Form ASB-16A must be submitted for each area to be abated. List below the entry in Item 1 from each attached ASB-16A.
Exterior Roof Flashing, See Attachment

19. I certify that this plan was prepared by me and I am responsible for its content.

Signature: Raymond A. Spinelli Date 8-15-05
(Month) (Day) (Year)

Affiliation: **Northeast Environmental Testing Laboratory, Inc.**

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20 ASBESTOS ABATEMENT PLAN APPLICATION FEE:

( ) Operation & Maintenance Only	$ 75
(X) Up to One (1) NESHAP Unit	~~$ 75~~ **Waiver**
( ) Between One (1) & Ten (10) NESHAP Units	$ 300
( ) Between Ten (10) & Fifty (50) NESHAP Units	$ 600
( ) Over Fifty (50) NASHAP Units	$ 900

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Office of Occupational & Radiological Health

APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN

SUPPLEMENTAL INFORMATION: AREA DESCRIPTION AND PROPOSED REMEDY

BUILDING LOCATION: **25 India Street, Providence**

INSTRUCTIONS: All items on this form must be addressed. All references to attachments must be clearly identified. All attachments must be marked with the specific item numbers on this form to which they pertain.

(1) Area Location/Identification (Room Name/No., Evaluation Number, etc.):

Roof Flashing/Parapet, See Attachment, Page 1, Item 1

(2) Attach a description of each type (e.g. pipe, ceiling, etc.) of regulated asbestos containing material (RACM) in this area, including condition, location, quantity and asbestos content. Attach a copy of the laboratory report(s) for all samples. (NOTE: All laboratory reports must include the name of the building(s) and the location(s) of the sample(s).
See Attachment, Page 1, Item 1

(3) Attach a current scale drawing of this area, showing direction of North and East, which has been clearly annotated to show the type, location and quantity of all RACM in this area. This drawing must include a legend, which acts as a guide to the scale, symbols and nomenclature used in the drawing. If a master plan or multiple drawings are provided, indicate the specific location(s) and drawing number(s), which depict this area. The location of the decontamination chamber must also be so indicated on the appropriate drawing(s).
See Attachment, Page 9, Item 3

(4) PROPOSED REMEDIES:

A). Attach a description of the interim Operations and Maintenance Plan that will be implemented in accordance with C.1.2 (b).

See Attachment, Page 10, Item 4A

(4) PROPOSED REMEDIES (cont.):

B). Will any portion of this area be abated by use of B.8 work procedures?

(X) Yes ( ) No

If Yes, indicate below which RACM in this area will be abated by use of the following B.8 work procedures:

B.8.2 & B.8.3	[REMOVAL]	_____
B.8.2 & B.8.4	[ENCAPSULATION]	_____
B.8.2 & B.8.5	[ENCLOSURE]	_____
B.8.6	[DEMOLITION]	_____
B.8.7	[GLOVEBAG]	_____
B.8.8	[ASPHALT ROOFING]	XXXX

C). Are you requesting any waivers to the above selected B.8 procedure for any of the abatement activities in this area?

(X) Yes ( ) No

If yes, attach a detailed description of the waivers requested you are proposing to utilize. All items must be keyed to the specific section(s) of the regulations for which waivers are requested.

See Attachment, Page 10, Item 4C

D). Are you proposing alternative procedures under B.11 for any of the abatement activities in this area?

( ) Yes (X) No

If yes, attach a detailed description of the alternate procedures requested you are proposing to utilize. Alternate procedures must include a justification for not following specific section(s) of the regulations and be as protective of public health.

E). Will any RACM remain in this area after abatement?

( ) Yes (X) No ( ) Beyond scope of inspection

If Yes, attach a description of the RACM that will remain and the details of the on-going Operations and Maintenance Plan that will be implemented in accordance with C.1.2(b).

AGENCY USE ONLY

Northeast Environmental
Testing Laboratory, Inc.
472 Smith Street Providence, Rhode Island 02908 (401) 454-3400

Certificate of Analysis

State of Rhode Island
Department of Transportation
Two Capitol Hill – Room 317
Providence, RI 02908
ATTN: Joseph A. Anzelone

Invoice #: 05-8008
P.O. #:
Date Received: 8-01-05
Date Reported: 8-04-05

Sample Description: 22 bulk samples collected.

Sample Location: Shooters Building – 25 India Street, Providence, RI

As requested, the above samples have been analyzed with the following results:

SAMPLE #	SAMPLE LOCATIONS	IDENTIFICATIONS	RESULTS
05-8008-1	Ground Level Left Entrance	Ceiling Tile (2 x 4)	No Asbestos Detected
05-8008-2	Ground Level Left Entrance	Spray-on Ceiling Material	No Asbestos Detected
05-8008-3	Ground Level Middle Left	Spray-on Ceiling Material	No Asbestos Detected
05-8008-4	Ground Level Middle Right	Spray-on Ceiling Material	No Asbestos Detected
05-8008-5	Ground Level Right Side Entrance - Back	Spray-on Ceiling Material	No Asbestos Detected
05-8008-6	Ground Level Right Side Entrance - Front	Spray-on Ceiling Material	No Asbestos Detected
05-8008-7	Ground Level Middle Right	Pipe Wrap Covering	No Asbestos Detected
05-8008-8	Ground Level Right Side Entrance	Wallboard	No Asbestos Detected
05-8008-9	Ground Level Office	Ceiling Tile (2 x 4)	No Asbestos Detected

SAMPLE #	SAMPLE LOCATIONS	IDENTIFICATIONS	RESULTS
05-8008-10	Ground Level Outside Bathroom	Wallboard	No Asbestos Detected
05-8008-11	Ground Level Outside Bathroom	Ceiling Tile (2 x 4)	No Asbestos Detected
05-8008-12	Ground Level Outside - Near Bar	Green Canvas Tent Covering	No Asbestos Detected
05-8008-13	Ground Level Outside Deck	Guard Rail Straping	No Asbestos Detected
05-8008-14	Ground Level Outside – Near Pool	Green Canvas Tent Covering	No Asbestos Detected
05-8008-15	Ground Level Outside – Near Pool	White Canvas Tent Covering	No Asbestos Detected
05-8008-16	Ground Level Front Entrance	Ceiling Tile (2 x 2)	No Asbestos Detected
05-8008-17	1st Floor Stairwell Entrance	Ceiling Tile (2 x 4)	No Asbestos Detected
05-8008-18	1st Floor Bar Stairs	Floor Tile (12 x 12)	No Asbestos Detected
05-8008-19	2nd Floor Dance Floor - Center	Floor Tile (12 x 12)	No Asbestos Detected
05-8008-20	2nd Floor Dance Floor – Center	Plasterboard Tape	No Asbestos Detected
05-8008-21	Roof – Outside	Roof Flashing	**10% Chrysotile Asbestos**
05-8008-22	Ground Level Outside	Exterior Building Covering Material	No Asbestos Detected

Please see attached AmeriSci Asbestos report.

Raymond A. Spinella
President/Co-Director

Joseph J. Spinella
Co-Director

clf

AmeriSci Boston
8 SCHOOL STREET
WEYMOUTH, MA 02189
TEL: (781) 337-9334 • FAX: (781) 337-7642

PLM Bulk Asbestos Report

Northeast Environmental Testing Laboratory
Attn: Raymond Spinella
472 Smith Street
Providence, RI 02908

Date Received 08/02/05
Date Examined 08/03/05

AmeriSci Job No.505081015
P.O. # 1925
Page 1 **of** 5

RE 05-8008; Shooters (Former); 25 India St., Prov., RI

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
S-1	505081015-01	*No*	NAD
	Location: Ground Level - Left Entrance		
	Description: Brown/Off-White, Homogeneous, Fibrous, 2'x4' Ceiling Tile		
	Asbestos Types:		
	Other Material: *Cellulose 25. %, Non-fibrous 75. %*		
S-2	505081015-02	*No*	NAD
	Location: Ground Level - Left Entrance		
	Description: Brown/White, Homogeneous, Fibrous, Spray-On Ceiling Material		
	Asbestos Types:		
	Other Material: Mineral Wool 85. %, Non-fibrous 15. %		
S-3	505081015-03	*No*	NAD
	Location: Ground Level - Middle Left		
	Description: Brown/White, Homogeneous, Fibrous, Spray-On Ceiling Material		
	Asbestos Types:		
	Other Material: Mineral Wool 85. %, Non-fibrous 15. %		
S-4	505081015-04	*No*	NAD
	Location: Ground Level - Middle Right		
	Description: Brown/White, Homogeneous, Fibrous, Spray-On Ceiling Material		
	Asbestos Types:		
	Other Material: Mineral Wool 85. %, Non-fibrous 15. %		
S-5	505081015-05	*No*	NAD
	Location: Ground Level - Right Side Entr. - Back		
	Description: Brown/White, Homogeneous, Fibrous, Spray-On Ceiling Material		
	Asbestos Types:		
	Other Material: Mineral Wool 85. %, Non-fibrous 15. %		

AmeriSci Boston
8 SCHOOL STREET
WEYMOUTH, MA 02189
TEL: (781) 337-9334 • FAX: (781) 337-7642

PLM Bulk Asbestos Report

Northeast Environmental Testing Laboratory
Attn: Raymond Spinella
472 Smith Street
Providence, RI 02908

Date Received 08/02/05
Date Examined 08/03/05

AmeriSci Job No.505081015
P.O. # 1925
Page 2 **of** 5

RE 05-8008; Shooters (Former); 25 India St., Prov., RI

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
S-6	505081015-06 **Location:** Ground Level - Right Side Entr. - Front **Description:** Brown/White, Homogeneous, Fibrous, Spray-On Ceiling Material **Asbestos Types:** **Other Material:** Cellulose 2. %, Mineral Wool 85. %, Non-fibrous 13. %	*No*	NAD
S-7	505081015-07 **Location:** Ground Level - Middle Right **Description:** Silver/Yellow, Homogeneous, Fibrous, Pipe Wrap Covering **Asbestos Types:** **Other Material:** Cellulose 15. %, Mineral Wool 60. %, Non-fibrous 25. %	*No*	NAD
S-8	505081015-08.1 **Location:** Ground Level - Right Side Entrance **Description:** Brown/Off-White, Homogeneous, Fibrous, Wallboard **Asbestos Types:** **Other Material:** Cellulose 25. %, Fibrous glass 10. %, Non-fibrous 65. %	*No*	NAD
S-8	505081015-08.2 **Location:** Ground Level - Right Side Entrance **Description:** Off-White, Homogeneous, Fibrous, Cementitious, Wallboard **Asbestos Types:** **Other Material:** Non-fibrous 100. %	*No*	NAD
S-9	505081015-09 **Location:** Ground Level - Office **Description:** Grey/Off-White, Homogeneous, Fibrous, 2'x4' Ceiling Tile **Asbestos Types:** **Other Material:** Cellulose 30. %, Mineral Wool 50. %, Non-fibrous 20. %	*No*	NAD

AmeriSci Boston
8 SCHOOL STREET
WEYMOUTH, MA 02189
TEL: (781) 337-9334 • FAX: (781) 337-7642

PLM Bulk Asbestos Report

Northeast Environmental Testing Laboratory
Attn: Raymond Spinella
472 Smith Street
Providence, RI 02908

Date Received 08/02/05
Date Examined 08/03/05

AmeriSci Job No.505081015
P.O. # 1925
Page 3 **of** 5

RE 05-8008; Shooters (Former); 25 India St., Prov., RI

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
S-10	505081015-10	*No*	NAD
	Location: Ground Level - Outside Bathroom		
	Description: Brown/Off-White, Homogeneous, Fibrous, Wallboard		
	Asbestos Types:		
	Other Material: Cellulose 25. %, Non-fibrous 75. %		
S-11	505081015-11	*No*	NAD
	Location: Ground Level - Outside Bathroom		
	Description: Brown/Off-White, Homogeneous, Fibrous, 2'x4' Ceiling Tile		
	Asbestos Types:		
	Other Material: Cellulose 25. %, Fibrous glass 10. %, Non-fibrous 65. %		
S-12	505081015-12	*No*	NAD
	Location: Ground Level - Outside Near Bar		
	Description: Green, Homogeneous, Fibrous, Canvas Tent Covering (Green)		
	Asbestos Types:		
	Other Material: Synthetic fibers 80. %, Non-fibrous 20. %		
S-13	505081015-13	*No*	NAD
	Location: Ground Level - Outside Deck		
	Description: Brown, Homogeneous, Fibrous, Guard Rail Strapping		
	Asbestos Types:		
	Other Material: Synthetic fibers 80. %, Non-fibrous 20. %		
S-14	505081015-14	*No*	NAD
	Location: Ground Level - Outside, Near Pool		
	Description: Green, Homogeneous, Fibrous, Canvas Tent Covering (Green)		
	Asbestos Types:		
	Other Material: Synthetic fibers 80. %, Non-fibrous 20. %		

AmeriSci Boston
8 SCHOOL STREET
WEYMOUTH, MA 02189
TEL: (781) 337-9334 • FAX: (781) 337-7642

PLM Bulk Asbestos Report

Northeast Environmental Testing Laboratory
Attn: Raymond Spinella
472 Smith Street
Providence, RI 02908

Date Received 08/02/05
Date Examined 08/03/05

AmeriSci Job No.505081015
P.O. # 1925
Page 4 **of** 5

RE 05-8008; Shooters (Former); 25 India St., Prov., RI

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
S-15	505081015-15	*No*	NAD

Location: Ground Level - Outside, Near Pool

Description: Off-White, Homogeneous, Fibrous, Canvas Tent Covering (White)
Asbestos Types:
Other Material: Synthetic fibers 90. %, Non-fibrous 10. %

S-16	505081015-16	*No*	NAD

Location: Ground Level - Front Entrance

Description: Grey, Homogeneous, Fibrous, 2'x2' Ceiling Tile
Asbestos Types:
Other Material: Mineral Wool 60. %, Non-fibrous 40. %

S-17	505081015-17	*No*	NAD

Location: 1st Floor Stairwell Entr.

Description: Grey, Homogeneous, Fibrous, 2'x4' Ceiling Tile
Asbestos Types:
Other Material: Mineral Wool 60. %, Non-fibrous 40. %

S-18	505081015-18	*No*	NAD

Location: 1st Floor Bar Stairs

Description: Blue, Homogeneous, Non-Fibrous, 12"x12" Floor Tile
Asbestos Types:
Other Material: Non-fibrous 100. %

S-19	505081015-19	*No*	NAD

Location: 2nd Floro Dance Floor - Center

Description: Blue, Homogeneous, Non-Fibrous, 12"x12" Floor Tile
Asbestos Types:
Other Material: Non-fibrous 100. %

AmeriSci

AmeriSci Boston
8 SCHOOL STREET
WEYMOUTH, MA 02189
TEL: (781) 337-9334 • FAX: (781) 337-7642

PLM Bulk Asbestos Report

Northeast Environmental Testing Laboratory
Attn: Raymond Spinella
472 Smith Street
Providence, RI 02908

Date Received 08/02/05
Date Examined 08/03/05

AmeriSci Job No. 505081015
P.O. # 1925
Page 5 **of** 5

RE 05-8008; Shooters (Former); 25 India St., Prov., RI

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
S-20	505081015-20	*No*	NAD
Location: 2nd Floor Dance Floor - Center			
Description: Brown/Off-White, Homogeneous, Fibrous, Cementitious, Plasterboard Tape			
Asbestos Types:			
Other Material: Cellulose 20. %, Non-fibrous 80. %			
S-21	505081015-21	*Yes*	10 % [1]
Location: Roof - Outside			
Description: Black, Homogeneous, Fibrous, Roof Flashing			
Asbestos Types: Chrysotile 10. %			
Other Material: Non-fibrous 90. %			
S-22	505081015-22	*No*	NAD
Location: Ground Level - Outside			
Description: Grey, Heterogeneous, Fibrous, Ext. Bldg. Covering Material			
Asbestos Types:			
Other Material: Fibrous glass 20. %, Non-fibrous 80. %			

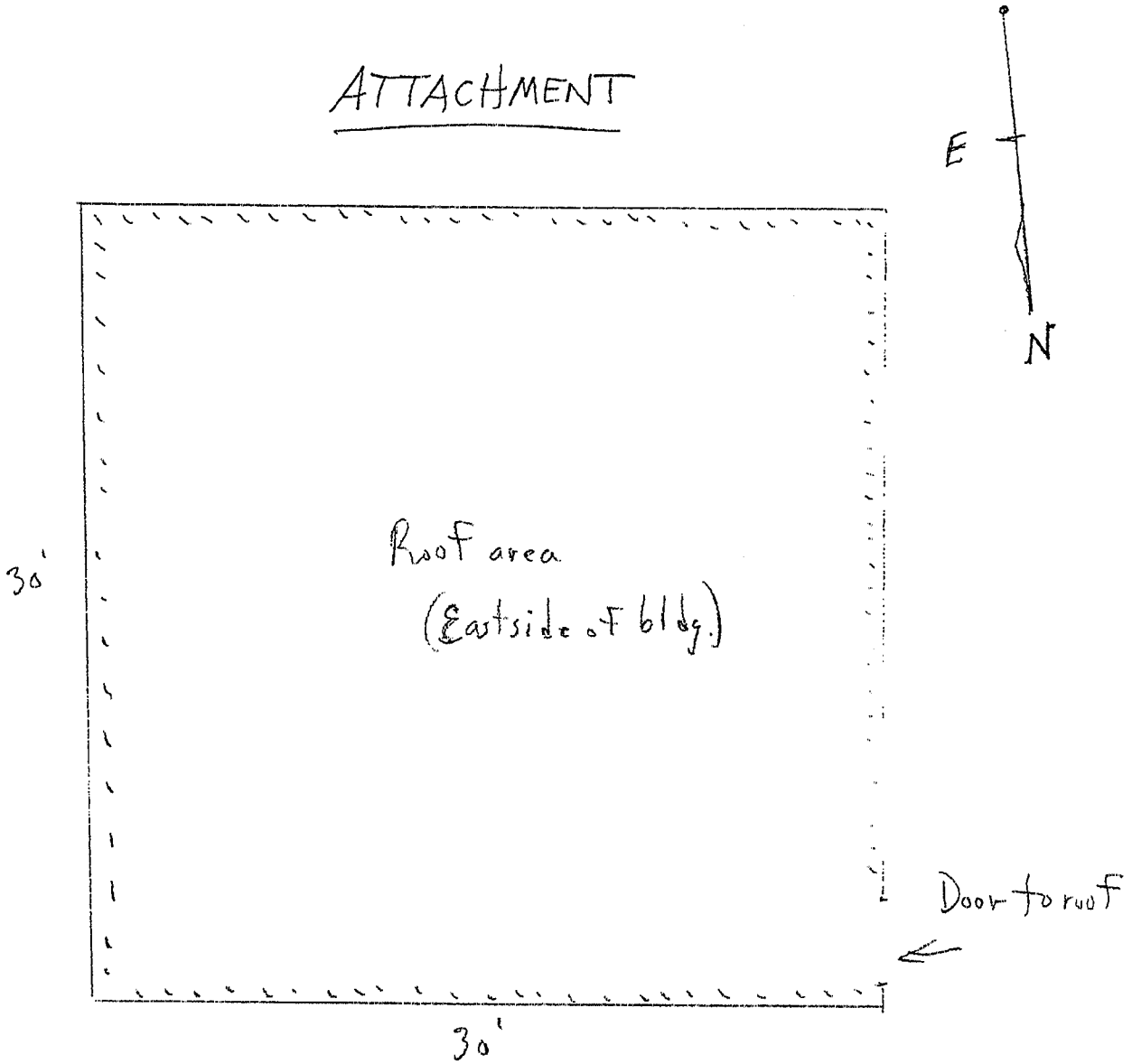
Reporting Notes:
(1) *Result is for one layer of a multi-layer sample.*

Analyzed by: Brian D. Shea for Brian Shea Date Analyzed: 8/3/05

*NAD/NSD = *no asbestos detected*; NVA = no visible asbestos; NA = not analyzed; NA/PS = not analyzed / positive stop; PLM Bulk Asbestos Analysis by EPA 600/M4-82-020 per 40 CFR 763 (NVLAP Lab #102079-0); Note: PLM is not consistently reliable in detecting asbestos in floor coverings and similar non-friable organically bound materials. TEM is currently the only method that can be used to determine if this material can be considered or treated as non-asbestos-containing in New York State (also see EPA Advisory for floor tile, FR 59, 146, 38970, 8/1/94). *National Institute of Standards and Technology Accreditation requirements mandate that this report must not be reproduced except in full without the approval of the laboratory. This PLM report relates ONLY to the items tested.*

Reviewed By:_____

ATTACHMENT



Total ACM to be abated is 120 linear feet

Roof flashing material located around the perimeter of the roof parapet.

RTE 195

Contract Terms and Conditions

Table of Contents

Terms and Conditions.....II
BID STANDARD TERMS AND CONDITIONS II
TERMS AND CONDITIONS FOR THIS BID II
RIVIP INFO - BID SUBMISSION REQUIREMENTS II
SURETY REQUIREMENTS II
WAGE REQUIREMENTS II
INSPECTION REQUIREMENTS II
INSURANCE REQUIREMENTS II
LICENSE REQUIREMENTS III
START DATE III

Terms and Conditions

BID STANDARD TERMS AND CONDITIONS

TERMS AND CONDITIONS FOR THIS BID

RIVIP INFO - BID SUBMISSION REQUIREMENTS

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

SURETY REQUIREMENTS

BIDDER IS REQUIRED TO PROVIDE A BID SURETY IN THE FORM OF A BID BOND, OR A CERTIFIED CHECK PAYABLE TO THE STATE OF RHODE ISLAND, IN THE AMOUNT OF A SUM NOT LESS THAN FIVE PERCENT (5%) OF THE BID PRICE. BID SURETY MUST BE ATTACHED TO THE BID FORM. THE SUCCESSFUL BIDDER WILL ALSO BE REQUIRED TO FURNISH PERFORMANCE AND LABOR AND PAYMENT BONDS AT TIME OF TENTATIVE CONTRACT AWARD.

WAGE REQUIREMENTS

BIDDERS ARE ADVISED THAT ALL PROVISIONS OF TITLE 37 CHAPTER 13 OF THE GENERAL LAWS OF RHODE ISLAND APPLY TO THE WORK COVERED BY THIS REQUEST, AND THAT PAYMENT OF THE GENERAL PREVAILING RATE OF PER DIEM WAGES AND THE GENERAL PREVAILING RATE FOR REGULAR, OVERTIME, AND OTHER WORKING CONDITIONS EXISTING IN THE LOCALITY FOR EACH CRAFT, MECHANIC, TEAMSTER, OR TYPE OF WORKMAN NEEDED TO EXECUTE THIS WORK IS A REQUIREMENT FOR BOTH CONTRACTORS AND SUBCONTRACTORS. THE PREVAILING WAGE TABLE MAY BE OBTAINED AT THE RI DIVISION OF PURCHASES HOME PAGE BY INTERNET at www.purchasing.state.ri.us. SELECT "INFORMATION" AND THEN SELECT "PREVAILING WAGE TABLE". THE STATE OF RHODE ISLAND USES THE GENERAL DECISION NUMBER RI20070001. PRINTING THE ENTIRE DOCUMENT AVERAGES APPROXIMATELY ONE MINUTE PER PAGE - YOU MAY WANT TO PRINT ONLY THE PAGES APPLICABLE TO YOUR BID. BIDDERS NOTE: IN THE EVENT THIS BID SPECIFIES PRICE OFFERS ON A TIME-AND-MATERIALS BASIS, i.e., AN HOURLY RATE, ANY OR ALL BIDS SUBMITTED IN AN AMOUNT LESS THAN THE PREVAILING RATE IN EFFECT FOR THE WORK COVERED BY THIS REQUEST AS OF THE DATE OF BID ISSUANCE SHALL BE REJECTED BY THE DIVISION OF PURCHASES.

INSPECTION REQUIREMENTS

BIDDERS ARE RESPONSIBLE FOR INSPECTION OF EQUIPMENT AND/OR LOCATION, TAKING MEASUREMENTS* WHEN REQUIRED, AND MAKING THEMSELVES AWARE OF THE TOTAL REQUIREMENT BEFORE SUBMITTING A BID. *MEASUREMENTS PROVIDED WITH ANY BID ARE FOR REFERENCE PURPOSES AND ARE NOT GUARANTEED TO BE COMPLETELY ACCURATE.

INSURANCE REQUIREMENTS

AN INSURANCE CERTIFICATE IN COMPLIANCE WITH PROVISIONS OF ITEM 31 (INSURANCE) OF THE GENERAL CONDITIONS OF PURCHASE IS REQUIRED FOR COMPREHENSIVE GENERAL LIABILITY, AUTOMOBILE LIABILITY, AND WORKERS' COMPENSATION AND MUST BE SUBMITTED BY THE SUCCESSFUL BIDDER(S) TO THE DIVISION OF PURCHASES PRIOR TO AWARD. THE INSURANCE CERTIFICATE MUST NAME THE STATE OF RHODE ISLAND AS CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED. FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN REJECTION OF THE OFFEROR'S BID. ANNUAL RENEWAL CERTIFICATES MUST BE SUBMITTED TO THE AGENCY IDENTIFIED ON THE PURCHASE ORDER. FAILURE TO DO SO MAY BE GROUNDS FOR CANCELLATION OF CONTRACT.

NOTE: IF THIS BID COVERS CONSTRUCTION, SCHOOL BUSING, HAZARDOUS WASTE, OR VESSEL OPERATION, APPLICABLE COVERAGES FROM THE FOLLOWING LIST MUST ALSO BE SUBMITTED TO THE DIVISION OF PURCHASES PRIOR TO AWARD: * PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS) - $1 MILLION OR 5% OF ESTIMATED PROJECT COST, WHICHEVER IS GREATER. * BUILDER'S RISK INSURANCE - COVERAGE EQUAL TO FACE AMOUNT OF CONTRACT FOR CONSTRUCTION. * SCHOOL BUSING - AUTO LIABILITY COVERAGE IN THE AMOUNT OF $5 MILLION. * ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL) - $1 MILLION OR 5% OF FACE AMOUNT OF CONTRACT, WHICHEVER IS GREATER. * VESSEL OPERATION - (MARINE OR AIRCRAFT) - PROTECTION & INDEMNITY COVERAGE REQUIRED IN THE AMOUNT OF $1 MILLION.

LICENSE REQUIREMENTS

VENDOR (OWNER OF COMPANY) IS RESPONSIBLE TO COMPLY WITH ALL LICENSING OR STATE PERMITS REQUIRED FOR THIS TYPE OF SERVICE. A COPY OF LICENSE/PERMIT SHOULD BE SUBMITTED WITH THIS BID. IN ADDITION TO THESE LICENSE REQUIREMENTS, BIDDER, BY SUBMISSION OF THIS BID, CERTIFIES THAT ANY/ALL WORK RELATED TO THIS BID, AND ANY SUBSEQUENT AWARD WHICH REQUIRES A RHODE ISLAND LICENSE(S), SHALL BE PERFORMED BY AN INDIVIDUAL(S) HOLDING A VALID RHODE ISLAND LICENSE.

START DATE

STARTING DATE _____ NO. OF WORKING DAYS REQUIRED FOR COMPLETION _____