



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration
DIVISION OF PURCHASES
One Capitol Hill
Providence, RI 02908-5855

Tel: (401) 574-8100
Fax: (401) 574-8387
Website: www.purchasing.ri.gov

February 23, 2015

ADDENDUM NUMBER TWO

RFQ # 7549307

TITLE: HVAC Upgrades Project, Roberts Hall, RIC

Closing Date and Time: 3/12/15 at 2:00 PM

Per the issuance of this ADDENDUM # (26) pages, including this cover sheet)

Specification Change /Addition / Clarifications

As a result from the pre-bid conference held today it has been determined to extend the Bid Closing Date and Time to allow vendors sufficient time to complete their bid response.

Please be advised the Bid Closing Date and Time has been extended:

From: 3/5/15 at 2:00 PM

To: 3/12/15 at 2:00 PM

A site visit has been scheduled for Friday, February 27, 2017 at 9:00 AM.

Meet at the Roberts Hall Lobby

Rhode Island College Campus

No questions will be entertained, this is only a walkthrough.



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Website: www.purchasing.ri.gov

Also the vendors may submit their questions in writing to doa.purconstruction@purchasing.ri.gov no later than Friday, February 27, 2015 at 5:00 PM.

Attached is the Asbestos Abatement Plan (23 pages) for this project along with a copy of the sign-in sheet from the pre-bid conference.

RHODE ISLAND DEPARTMENT OF HEALTH

NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN

Facility: **Roberts Hall (Rhode Island College)**

Address: **600 Mt. Pleasant Ave.**

City/Town: **Providence**

Zip: **02908**

Amendment Phase No:

Abatement Plan Written By: **Joseph M. Lepore**

Certification No: **AAC-661-PD**

Summary of specific waivers/variances being requested: **see attachment #4** _____

Type of Asbestos Abatement Removal Enclosure Encapsulation
 Demolition Glovebag 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 No

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

Contractor: **To be determined**

License No:

Estimated Starting Date: **12/12/2014**

Pre-Abatement Sampling Information

Bulk Samples Collected By: **Joseph M. Lepore**

Certification No: **AAC-0661IS**

Bulk Samples Analyzed By: **RI Analytical Laboratories**

Certification No: **AAL-0661IS**

Air Samples Analyzed By: **RI Analytical Laboratories**

Certification No: **AAL-008C3**

Clearance Air Sampling Information

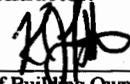
Air Samples to be Collected By: **RIAL Personnel**

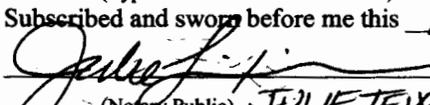
Air Samples to be Analyzed By: **RIAL**

Certification No: **AAL-008C3**

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: Director of Capital Projects
(Signature of Building Owner or Agent) Date: 11/10/14
KEVIN F. FITA
(Typed/Printed Name of Certifier)

Subscribed and sworn before me this 18th day of November, 2014
 My Commission Expires: 3/12/2016
(Notary Public) JULIETEIXEIRA
AFFIX NOTARY SEAL HERE

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:
Rhode Island College

2. Application Prepared By:
Joseph Lepore

RI certification No: **AAC-661-PD**

Telephone No: **401-737-8500 ext 106**
(Area code, No., Ext.)

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

Street: **600 Mt. Pleasant Ave**

City/Town: **Providence**

Zip: **02908**

Telephone No.: **401-456-8000**

(Area Code, No., Ext.)

4. Person to be contacted regarding this application:

Name: **John Paras**

Physical Plant Administration

Telephone No: **401-456-8262**

(Area Code, No., Ext.)

5. Location where abatement work will be performed:

Name (if applicable): **Roberts Hall Mechanical Space and Catwalk**

Street: **600 Mt. Pleasant Ave.**

City/Town: **Providence**

Zip: **02908**

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: _____

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

Name: **To Be Determined**

R.I. License No.:

14. Pre-Abatement Air Sample Collection and Analysis:

A). Person collecting pre-abatement air samples:

Name: **RIAL Personnel** Affiliation: **RIAL**

B). Laboratory performing analysis of pre-abatement air samples.

Name: **RIAL** RI Certification No.: **AAL-008C3**

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) _____

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 _____

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 _____

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

Name: _____ **RI Analytical Personnel** _____

Affiliation: _____ **RIAL** _____

17. In-Process & Clearance Air Sampling: **See Attachment #1**

- 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.

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.

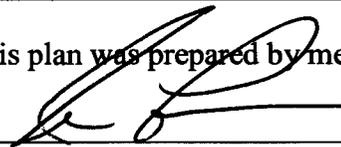
Area 1 – Catwalk

Area 2 – Mezzanine Mechanical Space, Hallway, and Adjacent Rooms

Area 3 - Exterior

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

Signature: _____



Date _____

11/17/14
(Month) (Day) (Year)

Affiliation: **RI Analytical Laboratories, Inc**

20. ASBESTOS ABATEMENT PLAN APPLICATION FEE:

- () Operation & Maintenance Only \$ 75
- () Up to One (1) NESHAP Unit \$ 75
- () Between One (1) & Ten (10) NESHAP Units \$ 300
- () Between Ten (10) & Fifty (50) NESHAP Units \$ 600
- () Over Fifty (50) NESHAP Units \$ 900
- (X) RI State Agency Waived Application Fee

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: Roberts Auditorium, RIC Campus

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.):

Area 1 – Catwalk

(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).

Refer to Attachment #2

(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).

Refer to Attached Building Drawing

(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).

Refer to Attachment #3

(4) PROPOSED REMEDIES (cont.):

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

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]	HVAC Tape, Debris
B.8.2 & B.8.4	[ENCAPSULATION]	
B.8.2 & B.8.5	[ENCLOSURE]	
B.8.6	[DEMOLITION]	
B.8.7	[GLOVEBAG]	TSI
B.8.8	[ASPHALT ROOFING]	

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

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.

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

Yes 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 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). **See Attachment 4**

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: Roberts Auditorium, RIC Campus

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.

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

Area 2 – Mezzanine Mechanical Space, Hallway, and Adjacent Rooms

(6) 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).

Refer to Attachment #2

(7) 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).

Refer to Attached Building Drawing

(8) PROPOSED REMEDIES:

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

Refer to Attachment #3

(4) PROPOSED REMEDIES (cont.):

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

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]	HVAC Tape, Popcorn Ceiling, Steam Header
B.8.2 & B.8.4	[ENCAPSULATION]	
B.8.2 & B.8.5	[ENCLOSURE]	
B.8.6	[DEMOLITION]	
B.8.7	[GLOVEBAG]	TSI, Fittings
B.8.8	[ASPHALT ROOFING]	

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

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.

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

Yes 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.

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

Yes 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). **See Attachment 4**

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: Roberts Auditorium, RIC Campus

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.

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

Area 3 - Exterior

(10) 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).

Refer to Attachment #2

(11) 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).

Refer to Attached Building Drawing

(12) PROPOSED REMEDIES:

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

Refer to Attachment #3

(4) PROPOSED REMEDIES (cont.):

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

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] **Roof Flashing**

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

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.

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

Yes 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.

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

Yes 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). **See Attachment 4**

ATTACHMENT #1

ASB-16-17A-D

In Process and Clearance Air Sampling

- A. RI Analytical will collect at a minimum, one compliance air sample outside each containment area daily for the duration of asbestos removal operations inside this building. The sample will be collected outside the decontamination unit.
- B. Any deviation in proper procedures on the part of the contractor shall be reported to the building owner. This includes inadequate paperwork on site, disagreement and/or any deviation from previously outlined work procedures, or if compliance samples in the work area vicinity exceed 0.01 f/cc. The contractor's work shall then be stopped, without repercussion to the building owner or the project-monitoring firm until any conflicts and/or problems have been resolved.
- C. After the areas have passed the consultant's visual inspection he or his authorized representative on site shall collect the following clearance air samples;

Area 1 & 2 – A minimum of 2 PCM air samples within each contained space up to 2,000 sf. The consultant shall collect 1 additional PCM clearance air sample for each 1,000 sf of contained space thereafter.

Area 3 – Clearance air samples will not be collected as all removal is exterior. It is the responsibility of the asbestos contractor to collect personnel air samples in compliance with OSHA 29 CFR 1926.1101 (f). These samples must be submitted to the RI DOH upon completion of the abatement area. A visual inspection will be conducted by a qualified individual to confirm that all identified materials have been removed from Area 3.
- D. If clearance monitoring after clean-up results in fiber concentrations in excess of the RI rules and regulation clearance air requirements, the project area shall be wet-cleaned, misted with water, and encapsulated with a liquid encapsulant. A period of no less than 24 hours shall elapse before the next set of clearance air samples can be collected. The sampling process shall be repeated until a satisfactory clearance air level is attained.

The asbestos contractor is held responsible for any costs associated with the re-cleaning and re-sampling of an area should clearance air samples exceed 0.01 f/cc.

ATTACHMENT #2

ASB-16A-2

Description of Asbestos Containing Material

Roberts Hall WO#1411-24652

Description	Location	Quantity	% Asbestos
Tape on HVAC	Mechanical Space and Catwalks	~1500 sf	30-40% Chrysotile
Pipe Fittings	Mechanical Space	~75 Fittings	60-80% Chrysotile
Steam Line and Header	Mechanical Space	~380 lf	5% Chrysotile
Popcorn Ceiling Acoustical Plaster	Mechanical Rooms and Hallway in Mezzanine	~600 sf	Assumed
Roof Flashing	Roofing Around Penetrations and Edges	~20 sf	Assumed
Debris	Catwalk Area	~400 sf	Assumed

Popcorn ceiling acoustical plaster is assumed positive based on prior sampling data.

Debris in catwalk area is of the HVAC tape and assumed positive based on the HVAC tape testing positive. Debris should be removed during pre-cleaning of the space.

Building owner is willing to assume that roof flashing is positive in lieu of testing.

ATTACHMENT #2 (Cont.)

Laboratory Analysis Reports:

1. Pre Abatement Air Sampling Results
2. Bulk sample results

CERTIFICATE OF ANALYSIS

R.I. Analytical (EAM Division)
Attn: Mr. Joseph Lepore
41 Illinois Avenue
Warwick, RI 02888

Date Received: 11/5/14
Date Reported: 11/6/14
Work Order #: 1411-24853

PROJECT #140851 RIC - ROBERTS HALL - PRE AIRS - PROV. RI

Dear: Mr. Joseph Lepore

Attached please find the results of sample(s) analyzed for fiber concentration in fibers/cc.

METHODOLOGY: Phase contrast Microscopy, utilizing NIOSH Manual of Analytical Methods,
U.S. Department of Health and Human Services 3rd, as revised May 15, 1989.

QUANTIFICATION LIMIT: The sensitivity of this method is based on 10 fibers per graticule field.
The graticule field area is 0.00777 square millimeters.

If you have any questions regarding this report, or if we may be of further assistance, please contact us.

Approved by:



Data Reporting

R.I. Analytical Laboratories, Inc.
CERTIFICATE OF ANALYSIS

R.I. Analytical (EAM Division)

Sample collected by RIAL personnel on 11/03/2014

Work Order #: 1411-24853

Site Location: PROJECT #140851 RIC - ROBERTS HALL - PRE AIRS - PROV. RI

<u>SAMPLE #</u>	<u>IDENTIFICATION:</u>	<u>REPORTED VOLUME (L)</u>	<u>FIBER DENSITY FIBER/SQUARE MM</u>	<u>Q.L. F/CC</u>	<u>CONC. F/CC</u>
001	1A - PRE AIR ROBERTS 1ST FLOOR	1100	<12.9	0.005	<0.005
002	1B - PRE AIR ROBERTS MEZZ	1000	<12.9	0.005	<0.005
003	BLANK		<12.9		
004	BLANK		<12.9		

Project #140851

RIC

Roberts Hall Pre Airs

Providence, RI

Laboratory blank samples fall within acceptable limits of method.



CERTIFICATE OF ANALYSIS

R.I. Analytical (EAM Division)
Attn: Mr. Joseph Lepore
41 Illinois Avenue
Warwick, RI 02888

Date Received: 11/3/2014
Date Reported: 11/5/2014
Work Order #: 1411-24652

Site Location:PROJECT #140838 RIC - ROBERTS HALL - MECH RM & CATWALK

Enclosed please find your sample(s) analysis results for asbestos content. The six asbestos types include amosite, chrysotile, crocidolite, anthophyllite, tremolite, and actinolite.

METHODOLOGY: Polarized Light Microscopy (PLM) as suggested by EPA 600/R-93/116, July 1993 edition and EPA 600/M4-82-020, December 1982.

If the samples are found to be inhomogeneous, individual components will be analyzed separately. If individual components cannot be separated, the samples will be homogenized and a single result will be provided for the entire sample.

Sample results pertain only to items tested. The report must not be reproduced except in full with permission of R.I. Analytical. Samples submitted for analysis will be retained for three months for your future reference.

Our laboratory maintains NVLAP accreditation for bulk asbestos fiber analysis NVLAP lab code 101440-0.

This report must not be used to claim product certification, approval, or endorsement by NVLAP, NIST or any agency of the federal government.

If you have any questions regarding this report, or if we may be of further assistance, please contact us.

Approved by:

Data Reporting

R.I. Analytical Laboratories, Inc.
CERTIFICATE OF ANALYSIS

R.I. Analytical (EAM Division)

Date Received: 11/3/2014

Work Order #: 1411-24652

Site Location: PROJECT #140838 RIC - ROBERTS HALL - MECH RM & CATWALK

METHOD: EPA 600/R-93/116

SAMPLE NO.	SAMPLE DESCRIPTION	PARAMETER	SAMPLE RESULTS / UNITS	DATE ANALYZED	ANALYST
001	TAPE ON DUCT WORK	PLM Fiber Analysis			
		Asbestos	Detected	11/5/2014	EVH
		Chrysotile	30-40 %	11/5/2014	EVH
		Cellulose	30-40 %	11/5/2014	EVH
		Non-fibrous	20-40 %	11/5/2014	EVH
		Sample Color	Gray	11/5/2014	EVH
002	FITTING 1A ON FG LINE	PLM Fiber Analysis			
		Asbestos	Detected	11/5/2014	EVH
		Chrysotile	60-80 %	11/5/2014	EVH
		Glass Fiber	5-15 %	11/5/2014	EVH
		Non-fibrous	5-35 %	11/5/2014	EVH
		Sample Color	Gray	11/5/2014	EVH
003	FITTING 1B ON FG LINE	PLM Fiber Analysis			
		Asbestos	Not Detected	11/5/2014	EVH
		Glass Fiber	15-25 %	11/5/2014	EVH
		Non-fibrous	75-85 %	11/5/2014	EVH
		Sample Color	Gray	11/5/2014	EVH
004	WALL IN MECH ROOM	PLM Fiber Analysis			
		Asbestos	Not Detected	11/5/2014	EVH
		Cellulose	1-5 %	11/5/2014	EVH
		Non-fibrous	95-99 %	11/5/2014	EVH
		Sample Color	Gray	11/5/2014	EVH
005	STEAM HEADER	PLM Fiber Analysis			
		Asbestos	Detected	11/5/2014	EVH
		Chrysotile	1-5 %	11/5/2014	EVH
		Amosite	5-15 %	11/5/2014	EVH
		Non-fibrous	80-94 %	11/5/2014	EVH
		Sample Color	White	11/5/2014	EVH

R.I. Analytical Laboratories, Inc.
CERTIFICATE OF ANALYSIS

R.I. Analytical (EAM Division)

Date Received: 11/3/2014

Work Order #: 1411-24652

Site Location:PROJECT #140838 RIC - ROBERTS HALL - MECH RM & CATWALK

METHOD: EPA 600/R-93/116

SAMPLE NO.	SAMPLE DESCRIPTION	PARAMETER	SAMPLE RESULTS / UNITS	DATE ANALYZED	ANALYST
006	PAPER ON FG	PLM Fiber Analysis			
		Asbestos	Not Detected	11/5/2014	EVH
		Glass Fiber	5-15 %	11/5/2014	EVH
		Non-fibrous	85-95 %	11/5/2014	EVH
		Sample Color	Beige	11/5/2014	EVH

Project #140838
 RIC
 Roberts Hall
 Mech Room & Catwalk
 HVAC Equipment

ATTACHMENT #3

Interim Operations & Maintenance Plan

The contractors, maintenance personnel and staff associated with Roberts Hall are aware of the presence and location of ACBM within the above stated areas. They have been instructed not to disturb the material due to the potential health hazards if fibers become airborne.

1. Notification

All building occupants, also any contractors entering the building and/or premises to perform work, shall be notified of the presence and location of asbestos-containing material(s) and cautioned regarding disturbance of the material(s). Also, the building occupants must be notified regarding the occurrence of asbestos abatement activities. If an emergency fiber release occurs, the following procedures shall be initiated.

2. Fiber Release Episodes

A. Minor Release Episode

If a minor fiber release episode occurs (release of less than 10 linear feet or 25 square feet of material), trained maintenance staff may perform the cleaning. Access to the area shall be restricted during clean-up. All debris shall be thoroughly wetted using amended water and placed in labeled, double six-mil polyethylene bags. The area shall then be cleaned using HEPA filtered vacuums and/or wet cleaning methods. Damaged material must be cleaned and repaired with non-asbestos-containing material. The area shall then be evaluated to decide if further action is necessary.

B. Major Release Episode

If a major fiber release episode occurs (falling or dislodging of more than 10 linear feet or 25 square feet of ACBM), the cleaning must be carried out and directed by persons accredited to conduct and design response actions. After such an episode, the area shall be immediately restricted and entry to the area prevented. Warning signs shall be posted to caution people other than those qualified to deal with the problem. Air handling units in the area shall be shut down to prevent the spread of fibers beyond the problem area. A response action shall be designed and carried out by qualified personnel.

3. Training

Any employee who, because of their work, may disturb asbestos-containing material shall be trained and certified as a Competent Person as described by the R.I. Rules and Regulations for Asbestos Control. The program coordinator shall ensure that the procedures described above to protect the building occupants shall be followed for any operations and maintenance activities disturbing or involving ACBM.

ATTACHMENT #4

Scope of Work / Description of Waivers

All proper OSHA, federal, state, and local safety regulations were followed for this project.

All interior asbestos containing materials will be removed utilizing B8.2, B8.3 and B8.7 work procedures.

All exterior asbestos containing materials will be removed utilizing B8.8 work procedures.

Pipe fittings and TSI in Area 2 may be removed using work procedures B8.7 work procedures.

Debris in Catwalk area must be removed during the pre-cleaning of the space. Negative ventilation, critical barriers and PPE are required to perform this activity.

ATTACHMENT #5
Building Drawing

Note: Tape and insulation debris was observed on the back of the plaster ceiling for the Auditorium and on the catwalk system.

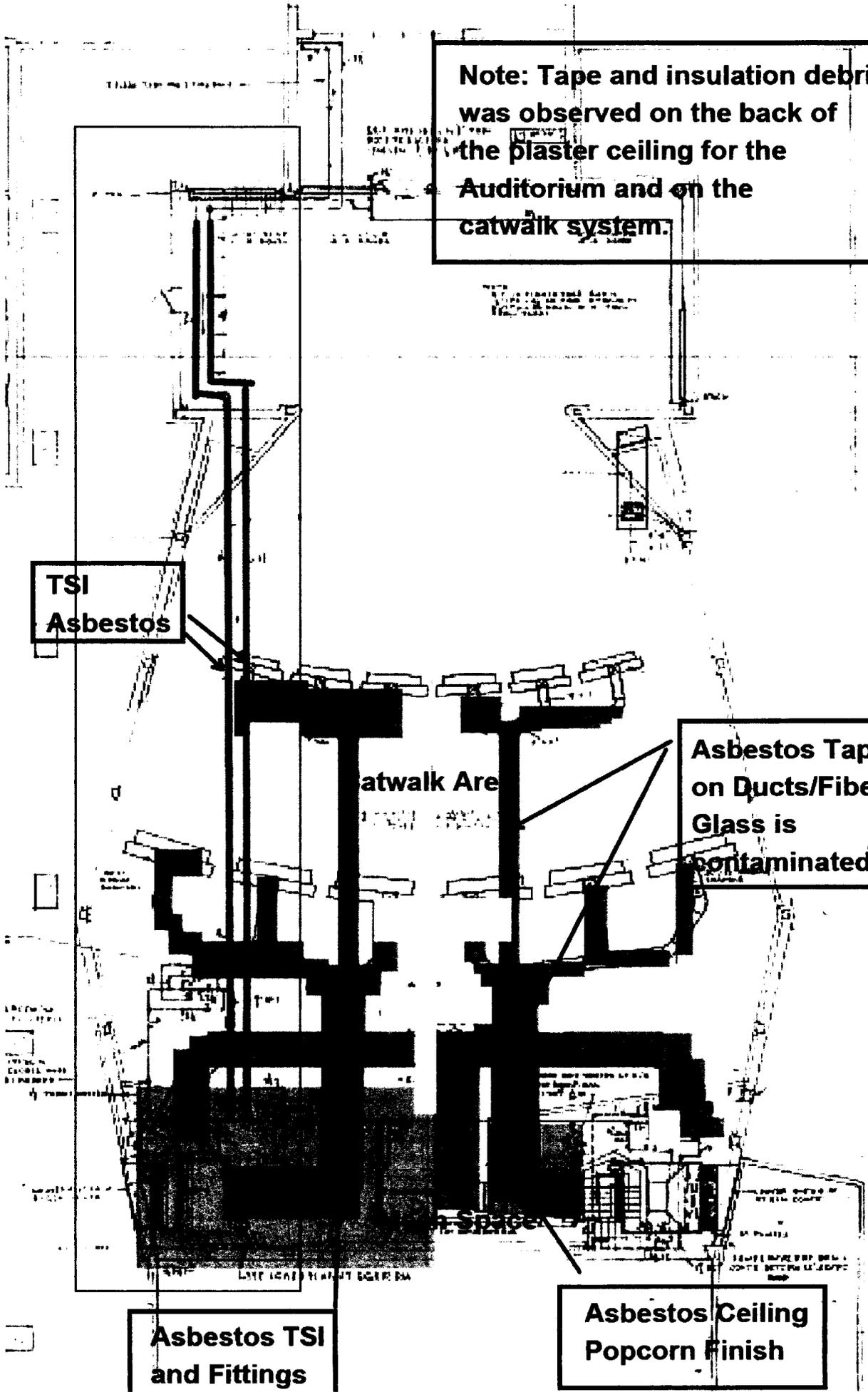
**TSI
Asbestos**

Catwalk Area

Asbestos Tape on Ducts/Fiber Glass is contaminated

Asbestos TSI and Fittings

Asbestos Ceiling Popcorn Finish





State of Rhode Island
Division of Purchases
One Capitol Hill
Providence, RI 02908

"NON-MANDATORY" PRE-BID CONFERENCE SIGN IN SHEET

BID NUMBER 7549307
BID TITLE HVAC Upgrades Project, Roberts Hall, RIC
PRE-BID DATE AND TIME Monday, 2/23/15 at 9:00 AM.

Purchasing Representative
John F. O'Hara II
Pre-bid START TIME
9:00 AM
Pre-bid END TIME

COMPANY NAME	COMPANY REPRESENTATIVE	ADDRESS	CONTACT EMAIL	CONTACT PHONE NUMBER	CONTACT FAX NUMBER	PROPOSAL SUBMITTED FOR PURCHASING USE ONLY
1 ALL STATE CONST	ARON FRESHETTE	444 COLE ST. FARMINGTON CT 06032	ARON.FRESHETTE@ALLSTATECONST.NET	860 678 0678	860 676 8910	
2 CAM HVAC & CONST	ADAM PETRUJO		ADAM@CAMHVAC.COM	401-232-7230	401-232-7290	
3 SITECON CORP.	MIKE LEWIS	1430 S. I. 4 CROSBY ST. CROSBY RI	MIKE@SITECONCORP.COM	(401) 944-2335	(401) 944-6999	
4 EW AUDOT	GEORGE ROBERT	169 BAY STREET PROV	GEORGE@EWAUDOT.COM	401-967-3578	401-967-3578	
5 SARVA ENG.	JAMES CALDWELL	One Hating St. West PO Box 947 N. Scituate RI	JUSTICE@SARVAENGINEERING.COM	401 942 1050	401 943 5179	
6 Nolin electric	JEFF NOLIN	44 WILCEN ST WARRANTON NJ	JEFF@NOLINELECTRIC.NET	401 647 5478	401 647 2780	
7 DELTA MECH	DAVID RIVARU		DAVID@DELTA-MECH.COM	401-737-3500	401-737-3518	
8 WAKING TND	MARK WEGOT	325 PATTINGWAY 317 ROAD WALK WAY PROVIDENCE 02905	MARK@WAKINGTND.COM	401-487-9322	401-296-1366	
9 LUSSY O'NEILL	DAVID LUSSIER		DLUSSIER@FUND.COM	401-861-3670		
10 Taha O'Hara Purchaser						
11						
12						
13						
14						
15						
16						