



**State of Rhode Island
Department of Administration / Division of Purchases
One Capitol Hill, Providence, Rhode Island 02908-5855
Tel: (401) 574-8100 Fax: (401) 574-8387**

**Solicitation Information
December 19th, 2019**

ADDENDUM # 3

RFQ# 7599833

TITLE: Various Demolition Projects for RIDEM

Submission Deadline has been extended to:

Tuesday December 31st, 2019 at 9:30 am (EST)

Note to vendors:

Attached includes:

- **Questions received with answers. No more questions will be answered.**
- **Abatement plans for those sites requiring one**
- **Clarification regarding structures at Arcadia Caretakers Hut**

**Max Righter
Senior Buyer**

Interested parties should monitor this website, on a regular basis, for any additional information that may be posted



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration
Division of Purchases
One Capitol Hill, 2nd Floor
Providence, RI 02908

TEL: (401) 574-8100
FAX: (401) 574-8387
TDD: (401) 574-8228
Website: www.ridop.ri.gov

Questions Received

Solicitation #7599833

Various Demolition Projects for RIDEM

1. Can all concrete foundation remains be drilled and buried 3' below grade or does that only apply to locations that do not specifically call out the complete removal of foundation remains?
Answer: All concrete foundation remains may be drilled and buried 3' below grade, according to Spec. 02060 Building Demolition, unless otherwise noted on the plan set. For example, page C6 of the plans specify that the slab of the hatchery building remain after demolition.
2. Are there any electrical services to any of these buildings that need to be disconnected?
Answer: Yes, sites will need to be field verified if electricity service remains. Many of the sites were disconnected, however, some of the sites may still need to be disconnected. DEM has provided the disconnect letters we have in our records within this addendum.
3. Unit prices are listed on the bid form for each property. Is this a lump sum bid? Are these unit prices to add or delete projects from the bid?
Answer: This project is a lump sum bid. The unit prices are requested so that DEM can allocate its funding sources appropriately to each demolition site. It is not anticipated that any sites will be added or deleted from the scope.
4. What testing laboratory services should we be carrying in our bid per section 01410?
Answer: RIDEM requests that the contractor carries any testing services necessary to properly abate hazardous material found at the site. Please find inspection reports of each property, prepared by Environmental Consulting & Management (ECM), within Appendix A of the project manual.
5. Please note that ECM also has prepared abatement plans for those sites requiring one. These plans are included within this addenda.
6. Clarification: The two sizable collapsed structures to the East and N. East of the Hut, are to be removed. Concrete foundations may be demolished according to Spec. 02060.

nationalgrid

55 Bearfoot Rd
Northborough MA 01532

June 4, 2019


RE: Service Removal for Building Demolition
36 Grantville Rd, Apt B
Hope Valley, RI

To Whom It May Concern,

This letter is to confirm that, per your request, National Grid has confirmed electrical meter # 98768391 and service line have been removed from 36 Grantville Rd, Apt B in Hope Valley, RI. The work was processed on work request 28435735.

If you have any questions or need further assistance, please feel free to contact me at (508) 357-4662.

Sincerely,

A handwritten signature in black ink, appearing to read "Shayna L. Chalmers". The signature is fluid and cursive, with a long horizontal stroke at the end.

Shayna Chalmers
NE Standard Connections

nationalgrid

nationalgrid

55 Bearfoot Rd
Northborough MA 01532

May 31, 2019

RE: Service Removal for Building Demolition
0 E Watchaug Pond Rd.
Bradford, RI

To Whom It May Concern,

This letter is to confirm that, per your request, National Grid has confirmed electrical meter # 13255319 and service line have been removed from 0 E Watchaug Pond Rd in Bradford, RI. The work was processed on work request 28435335.

If you have any questions or need further assistance, please feel free to contact me at (508) 357-4662.

Sincerely,



Shayna Chalmers
NE Standard Connections

nationalgrid

nationalgrid

40 Sylvan Rd
Waltham MA 02451

June 3, 2019

RE: Service Removal for Building Demolition
1037 Hartford Pike.
Scituate, RI.

To Whom It May Concern,

This letter is to confirm that, per your request, National Grid has confirmed electrical meter # 25186909 and service line have been removed from 1037 Hartford Pike. Scituate, RI. The work was processed on work request 28435169.

If you have any questions or need further assistance, please feel free to contact me at (508) 357 4657.

Sincerely,

A handwritten signature in black ink, appearing to read "Brett DiGiovanni". The signature is written in a cursive style with a horizontal line extending to the right.

Brett DiGiovanni
Standard Connections NE

nationalgrid

RHODE ISLAND DEPARTMENT OF HEALTH

NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN

Facility: **Chopmist Forestry Building**

Address: **1037 Old Hartford Pike**

City/Town: **Scituate**

Zip: **02857**

Amendment Phase No: _____

Abatement Plan Written By: **Joseph Lepore**

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

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

Type of Asbestos Abatement () Removal () Enclosure () Encapsulation
(X) 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 (X) No

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

Contractor: **TBD**

License No: LAC-

Estimated Starting Date: **06/04/18**

Pre-Abatement Sampling Information

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

Certification No: **0661IS**

Bulk Samples Analyzed By: **San Air**

Certification No: **AAL-143**

Air Samples Analyzed By: **ECM Inc**

Certification No: **AAL-131**

Clearance Air Sampling Information

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

Air Samples to be Analyzed By: **ECM Inc**

Certification No: **AAL-131**

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: _____
(Signature of Building Owner or Agent)

(Typed/Printed Name of Certifier) Date: _____

Subscribed and sworn before me this _____ day of _____, 20____

My Commission Expires: _____

(Notary Public)

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 DEM

2. Application Prepared By:
Joseph M. Lepore
RI certification No: **AAC-661-PD**
Telephone No: **401-304-6614**

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

Street: **235 Promenade Street**

City/Town: **Providence**

Zip: **02903**

Telephone No.: **401-222-2776**

(Area Code, No., Ext.)

4. Person to be contacted regarding this application:

Name: **David DeCost**

Telephone No: **(401) 222-2776 x4312**

(Area Code, No., Ext.)

5. Location where abatement work will be performed:

Name (if applicable): **Chopmist Forestry Building**

Street: **1037 Old Hartford Pike**

City/Town: **Scituate**

Zip: **02857**

6. Is this application being submitted in response to a "Notice of Requirement to Submit an Asbestos Abatement plan"? Yes 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 selected**

R.I. License No.: LAC-

14. Pre-Abatement Air Sample Collection and Analysis:

A). Person collecting pre-abatement air samples:

Name: **ECM Personnel**

Affiliation: **ECM**

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

Name: **ECM Inc**

RI Certification No.: **AAL-131**

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: **ECM Personnel**

Affiliation: **ECM**

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 – Interior

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

Signature:  Date 04 20 2018
(Month) (Day) (Year)

Affiliation: **ECM 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
- 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: 1037 Old Hartford Pike, Scituate

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 – Interior

(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]	_____
B.8.2 & B.8.4	[ENCAPSULATION]	_____
B.8.2 & B.8.5	[ENCLOSURE]	_____
B.8.6	[DEMOLITION	Floor Tile, Linoleum, Transite Panels
B.8.7	[GLOVEBAG]	_____
B.8.8	[ASP. 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

AGENCY USE ONLY

ATTACHMENT #1

In Process and Clearance Air Sampling

- A. If requested by the building owner, ECM will be on site for part time monitoring and will collect one compliance air sample outside the 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 interior areas have passed the consultant's visual inspection, he or his authorized representative will collect:

Area 1 – -OSHA Personnel Samples will be submitted by Abatement Contractor. If the building is going to be occupied prior to demolition 5 PCM clearance air samples will be collected.
- 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

Chart 1.1 – ACBM Sample Chart

Sample #	Material	Location	Asbestos %	Quantity
01A-E	9x9 Floor Tile	Original Portion of the First Floor and Second Floor	5% Chrysotile	~2000sf
02A-E	Black Mastic on Wood Floor	Under 9x9 Floor Tile	<1% Chrysotile	NA
03A-C	1x1 Ceiling Tiles	Throughout	None Detected	NA
04A	Linoleum	Bathrooms	30% Chrysotile	120sf
05A-C	2x4 Ceiling Tiles	Ground Floor Addition	None Detected	NA
06A	Insulation on Ducts	Ground Floor Addition	None Detected	NA
07A	Attic Insulation	Unfinished Attic Space	None Detected	NA
08A-B	Transite Panels	Boiler Room Walls and Ceilings	20% Chrysotile	260sf
09A-C	Boiler Packing	Boiler Gun Packing	None Detected	NA
010A	Tar Paper Under Siding	Exterior Siding	None Detected	NA
011A-C	Roofing	Exterior Roof	None Detected	NA

ATTACHMENT #2 (Cont.)

Laboratory Analysis Reports:

1. Pre-Abatement Air Sample
2. Bulk Sample Results



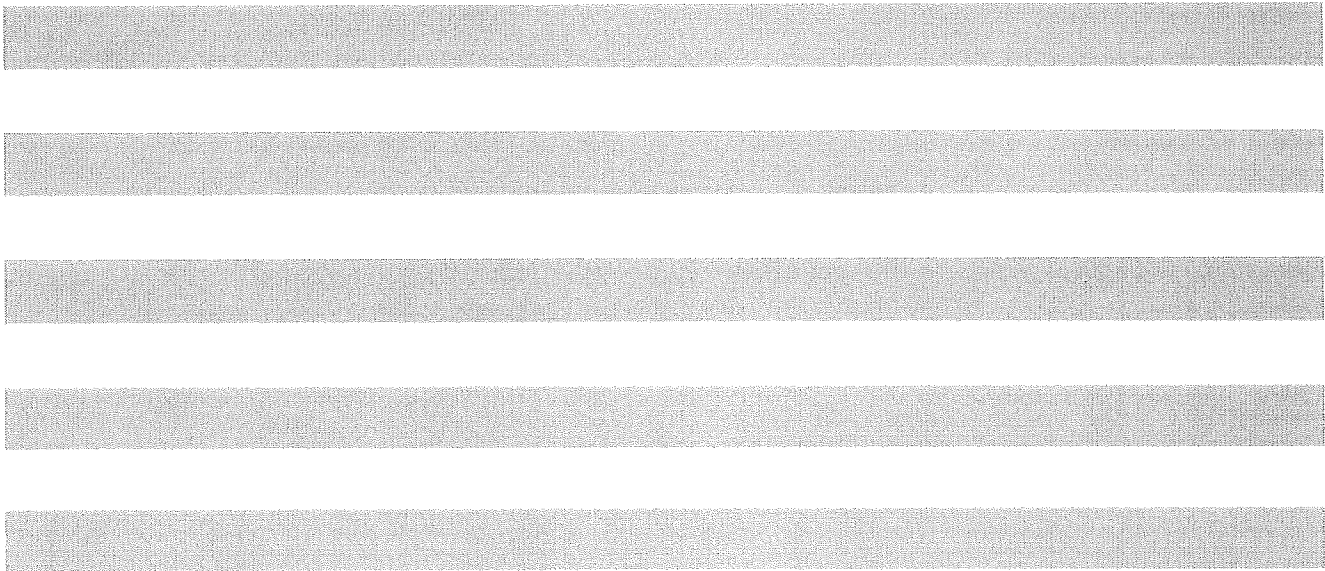
Environmental Consulting
& Management Inc.
181 Amaral Street
Riverside, RI 02915
401-438-1360

Certificate of Analysis
Asbestos PCM Air Analysis by NIOSH 7400

Client: RI DEM
Project Location: Chopmist Forestry
Sample Type: Background Airs & Blanks

Project Number: 180150
Collected By: JML
Date: 3-29-2018
PCM Lot #:

Sample	Identification	Start	End	Flow (LPM)	Volume (L)	Fibers		Fiber Density (f/mm ²)	Concentration (f/cc)
							Fields		
1	Blank	-	-	-	-	0	100	<7	< -
2	Blank	-	-	-	-	0	100	<7	< -
3	Pre Air Interior	09:27	11:12	12	1260	5	100	<7	<0.0021



Analyzed By: Joseph M. Lepore

Date Analyzed: 3-29-2018

Standards

Clearance Criteria: <0.01 f/cc
OSHA Permissible Exposure Limit (8 hour TWA): 0.1 f/cc
OSHA 30 Minute Excursion Limit: 1.0 f/cc
Limit of Detection fibers/100 fields: 5.5
Limit of Detection fiber density: 7 f/mm
Relative Standard Deviation:0.45

Reviewed By: Daniel J. Simas

WO#18000195



The Identification Specialists

Analysis Report
prepared for
Environmental Consulting & Management Inc

Report Date: 4/9/2018

Project Name: Chopmist Forestry

Project #: 180150

SanAir ID#: 18013275



NVLAP LAB CODE 200870-0

1551 Oakbridge Dr. Suite B | Powhatan, Virginia 23139-8061
888.895.1177 | 804.897.1177 | fax: 804.897.0070 | IAQ@SanAir.com | SanAir.com



SanAir ID Number
18013275
FINAL REPORT
4/9/2018 2:51:29 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Chopmist Forestry
Collected Date: 3/29/2018
Received Date: 4/2/2018 9:55:00 AM

Dear Joseph M. Lepore,

We at SanAir would like to thank you for the work you recently submitted. The 28 sample(s) were received on Monday, April 02, 2018 via FedEx. The final report(s) is enclosed for the following sample(s): 01A, 01B, 01C, 01D, 01E, 02A, 02B, 02C, 02D, 02E, 03A, 03B, 03C, 04A, 05A, 05B, 05C, 06A, 07A, 08A, 08B, 09A, 09B, 09C, 010A, 011A, 011B, 011C.

These results only pertain to this job and should not be used in the interpretation of any other job. This report is only complete in its entirety. Refer to the listing below of the pages included in a complete final report.

Sincerely,

A handwritten signature in cursive script that reads "Sandra Sobrino".

Sandra Sobrino
Asbestos & Materials Laboratory Manager
SanAir Technologies Laboratory

Final Report Includes:

- Cover Letter
- Analysis Pages
- Disclaimers and Additional Information

Sample conditions:

- 28 samples in Good condition.



SanAir ID Number
18013275
 FINAL REPORT
 4/9/2018 2:51:29 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
 Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Chopmist Forestry
Collected Date: 3/29/2018
Received Date: 4/2/2018 9:55:00 AM

Analyst: Vaughan, Nathaniel

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non Fibrous	
01A / 18013275-001 9X9 Floor Tile	Brown Non-Fibrous Heterogeneous		95% Other	5% Chrysotile
01B / 18013275-002 9X9 Floor Tile	Brown Non-Fibrous Heterogeneous		95% Other	5% Chrysotile
01C / 18013275-003 9X9 Floor Tile	Brown Non-Fibrous Heterogeneous		95% Other	5% Chrysotile
01D / 18013275-004 9X9 Floor Tile	Brown Non-Fibrous Heterogeneous		95% Other	5% Chrysotile
01E / 18013275-005 9X9 Floor Tile	Brown Non-Fibrous Heterogeneous		95% Other	5% Chrysotile
02A / 18013275-006 Mastic	Black Non-Fibrous Heterogeneous		100% Other	< 1% Chrysotile
02B / 18013275-007 Mastic	Black Non-Fibrous Heterogeneous		100% Other	< 1% Chrysotile
02C / 18013275-008 Mastic	Black Non-Fibrous Heterogeneous		100% Other	< 1% Chrysotile
02D / 18013275-009 Mastic	Black Non-Fibrous Heterogeneous		100% Other	< 1% Chrysotile
02E / 18013275-010 Mastic	Black Non-Fibrous Heterogeneous		100% Other	< 1% Chrysotile

Certification

Analyst: *Nathaniel Vaughan*

Approved Signatory: *[Signature]*

Analysis Date: 4/9/2018

Date: 4/9/2018



SanAir ID Number
18013275
 FINAL REPORT
 4/9/2018 2:51:29 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
 Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Chopmist Forestry
Collected Date: 3/29/2018
Received Date: 4/2/2018 9:55:00 AM

Analyst: Vaughan, Nathaniel

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic Appearance	Components		Asbestos Fibers
		% Fibrous	% Non Fibrous	
03A / 18013275-011 1X1 CT	White Fibrous Heterogeneous	90% Cellulose	10% Other	None Detected
03B / 18013275-012 1X1 CT	White Fibrous Heterogeneous	90% Cellulose	10% Other	None Detected
03C / 18013275-013 1X1 CT	White Fibrous Heterogeneous	90% Cellulose	10% Other	None Detected
04A / 18013275-014 Linoleum	Beige Non-Fibrous Heterogeneous		70% Other	30% Chrysotile
05A / 18013275-015 2X4 CT	White Fibrous Heterogeneous	45% Cellulose 35% Glass 10% Min. Wool	10% Other	None Detected
05B / 18013275-016 2X4 CT	White Fibrous Heterogeneous	45% Cellulose 35% Glass 10% Min. Wool	10% Other	None Detected
05C / 18013275-017 2X4 CT	White Fibrous Heterogeneous	45% Cellulose 35% Glass 10% Min. Wool	10% Other	None Detected
06A / 18013275-018 Insulation On Duct	Brown Fibrous Heterogeneous	85% Cellulose	15% Other	None Detected
07A / 18013275-019 Attic Insulation	Brown Fibrous Heterogeneous	90% Cellulose	10% Other	None Detected
08A / 18013275-020 Transite (Boiler Room)	Grey Non-Fibrous Heterogeneous		80% Other	20% Chrysotile

Certification

Analyst: *Nathaniel Vaughan* Approved Signatory: *[Signature]*

Analysis Date: 4/9/2018 Date: 4/9/2018



SanAir ID Number
18013275
 FINAL REPORT
 4/9/2018 2:51:29 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
 Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Chopmist Forestry
Collected Date: 3/29/2018
Received Date: 4/2/2018 9:55:00 AM

Analyst: Vaughan, Nathaniel

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic		Components		Asbestos Fibers
	Appearance		% Fibrous	% Non Fibrous	
08B / 18013275-021 Transite (Boiler Room)	Grey Non-Fibrous Heterogeneous			80% Other	20% Chrysotile
09A / 18013275-022 Boiler Packing	Grey Non-Fibrous Heterogeneous			100% Other	None Detected
09B / 18013275-023 Boiler Packing	Grey Non-Fibrous Heterogeneous			100% Other	None Detected
09C / 18013275-024 Boiler Packing	Grey Non-Fibrous Heterogeneous			100% Other	None Detected
010A / 18013275-025 Tar Paper Under Siding	Black Fibrous Heterogeneous		85% Cellulose	15% Other	None Detected
011A / 18013275-026 Roofing	Brown Non-Fibrous Heterogeneous		8% Glass	92% Other	None Detected
011B / 18013275-027 Roofing	Brown Non-Fibrous Heterogeneous		8% Glass	92% Other	None Detected
011C / 18013275-028 Roofing	Brown Non-Fibrous Heterogeneous		8% Glass	92% Other	None Detected

Certification

Analyst:

Nathaniel Vaughan

Approved Signatory:

[Signature]

Analysis Date:

4/9/2018

Date:

4/9/2018



1551 Oakbridge Dr. STE B
 Powhatan, VA 23139
 804.897.1177 / 888.895.1177
 Fax 804.897.0070
 sanair.com

Asbestos
 Chain of Custody
 Form 140, Rev 1.1 20 2017

SanAir ID Number
 18013275

Company: Environmental Consulting & Management Inc	Project #: 180152	Collect by: Tanya Lopez
Address: 50 Kickemuit Ave	Project Name: Choppers + Forestry	Phone #: 401-438-1360
City, St., Zip: Bristol, RI 02809	Date Collected: 3-29-18	Fax #: 401-438-1316
State of Collection: RI Account #: 2667	P.O. Number:	Email: T.Lopez@ECM-DC.com

Bulk		Air		Soil	
ABB	PLM EPA 600 R-93 116 <input checked="" type="checkbox"/>	ABA	PCM NIOSH 7400 <input type="checkbox"/>	ABSE	PLM EPA 600/R-93 116 (Qual.) <input type="checkbox"/>
	Positive Stop <input type="checkbox"/>	ABA-2	OSHA w TWA <input type="checkbox"/>	Vermiculite & Soil	
ABEPA	PLM EPA 400 Point Count <input type="checkbox"/>	ABTEM	TEM AHERA <input type="checkbox"/>	ABSP	PLM CARB 435 (LOD <1%) <input type="checkbox"/>
ABB1K	PLM EPA 1000 Point Count <input type="checkbox"/>	ABATN	TEM NIOSH 7402 <input type="checkbox"/>	ABSP1	PLM CARB 435 (LOD 0.25%) <input type="checkbox"/>
ABBEN	PLM EPA NOB** <input type="checkbox"/>	ABT2	TEM Level II <input type="checkbox"/>	ABSP2	PLM CARB 435 (LOD 0.1%) <input type="checkbox"/>
ABBCH	TEM Chatfield** <input type="checkbox"/>	Other:	<input type="checkbox"/>	Dust	
ABBTM	TEM EPA NOB** <input type="checkbox"/>	New York ELAP		ABWA	TEM Wipe ASTM D-6480 <input type="checkbox"/>
ABQ	PLM Qualitative <input type="checkbox"/>	PLM NY	PLM EPA 600 M4-82-020 <input type="checkbox"/>	ABDMV	TEM Microvac ASTM D-5755 <input type="checkbox"/>
** Available on 24-hr. to 5-day TAT					
Water					
ABHE	EPA 100.2 <input type="checkbox"/>	ABEPA2	NY ELAP 198.1 <input type="checkbox"/>	Matrix Other <input type="checkbox"/>	
		ABENY	NY ELAP 198.5 PLM NOB <input type="checkbox"/>		
		ABBNY	NY ELAP 198.4 TEM NOB <input type="checkbox"/>		

Turn Around Times	3 HR (4 HR TEM) <input type="checkbox"/>	6 HR (8HR TEM) <input type="checkbox"/>	12 HR <input type="checkbox"/>	24 HR <input type="checkbox"/>
	<input type="checkbox"/> 2 Days	<input type="checkbox"/> 3 Days	<input type="checkbox"/> 4 Days	<input checked="" type="checkbox"/> 5 Days

Special Instructions

Sample #	Sample Identification/Location	Volume or Area	Sample Date	Flow Rate*	Start - Stop Time*
01A	9004 Flac file				
01B					
01C					
01D					
01E					
02A	Mudstone				
02B					
02C					
02D					
02E					
03A	1x10T				
03B					

Relinquished by: [Signature]	Date: 3/30/18	Time: 1:45	Received by: [Signature]	Date: APR 02 2018	Time: 9:55 am
------------------------------	---------------	------------	--------------------------	-------------------	---------------

If no technician is provided, then the primary contact for your account will be selected. Unless scheduled, the turnaround time for all samples received after 3 pm EST Friday will begin at 8 am Monday morning. Weekend or holiday work must be scheduled ahead of time and is charged for rush turnaround time. SanAir covers Standard Overnight FedEx shipping. Shipments billed to SanAir with a faster shipping rate will result in additional charges.

ATTACHMENT #3

Interim Operations & Maintenance Plan

The contractors, maintenance personnel and staff associated with the Chopmist Forestry Building 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

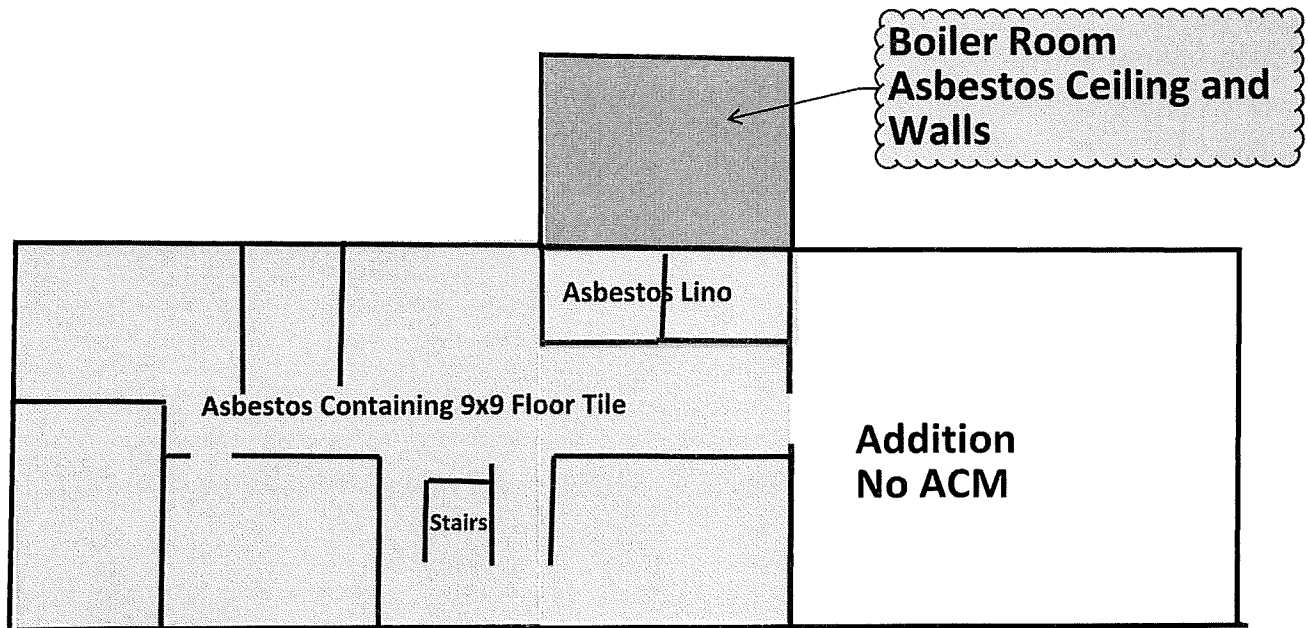
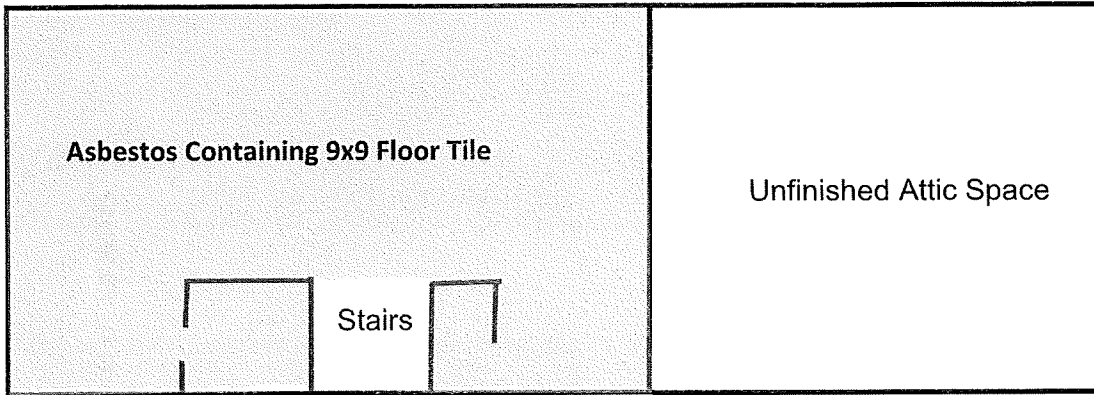
All proper OSHA, federal, state, and local safety regulations shall be followed.

All materials identified withing Area 1 will be removed utilizing B8.6 Demolition work procedures.

Personnel air monitoring of Asbestos Abatement Workers, which demonstrates compliance with the provisions of OSHA 29 CFR 1926.1101, will be used in lieu of the clearance air sampling requirements contained in Paragraph B.8.2(p) of the RI Rules & Regulations for Asbestos Control.

Chopmist Forestry Building Asbestos Diagram

Upper Level Asbestos Diagram



 **Transite Ceilings
and Walls**

 **9x9 Floor Tile**

 **Asbestos Linoleum**

RHODE ISLAND DEPARTMENT OF HEALTH

NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN

Facility: **Fort Adams Maintenance Garage 2**

Address: **1 Lincoln Drive**

City/Town: **Newport, RI** Zip: **02840** Amendment Phase No: _____

Abatement Plan Written By: **Joseph 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 (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: **TBD**

License No: LAC-

Estimated Starting Date: **06/04/18**

Pre-Abatement Sampling Information

Bulk Samples Collected By: **Andrew Perreault** Certification No: **AAC-0914**

Bulk Samples Analyzed By: **San Air** Certification No: **AAL-143**

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

Clearance Air Sampling Information

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

Air Samples to be Analyzed By: **ECM Inc** Certification No: **AAL-131**

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: _____
(Signature of Building Owner or Agent)

(Typed/Printed Name of Certifier) Date: _____

Subscribed and sworn before me this _____ day of _____, 20_____

My Commission Expires: _____

(Notary Public)

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 DEM

2. Application Prepared By:
Joseph M. Lepore
RI certification No: **AAC-661-PD**
Telephone No: **401-304-6614**

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

Street: **235 Promenade Street**

City/Town: **Providence**

Zip: **02903**

Telephone No.: **401-222-2776**

(Area Code, No., Ext.)

4. Person to be contacted regarding this application:

Name: **David DeCost**

Telephone No: **(401) 222-2776 x4312**

(Area Code, No., Ext.)

5. Location where abatement work will be performed:

Name (if applicable): **Fort Adams Maintenance Garage 2**

Street: **1 Lincoln Drive**

City/Town: **Newport, RI**

Zip: **02840**

6. Is this application being submitted in response to a "Notice of Requirement to Submit an Asbestos Abatement plan"? Yes 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 selected**

R.I. License No.: LAC-

14. Pre-Abatement Air Sample Collection and Analysis:

A). Person collecting pre-abatement air samples:

Name: **NA**

Affiliation: **NA**

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

Name: **NA**

RI Certification No.: **NA**

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

(X) Other (Specify) Pre-Abatement Air Samples not collected. This project will be conducted using demolition procedures. There is no power to the building.

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: **ECM Personnel**

Affiliation: **ECM**

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 – Exterior

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

Signature:  Date 04/24/18
(Month) (Day) (Year)

Affiliation: **ECM 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
- 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: Fort Adams Maintenance Garage 2 – 1 Lincoln Dr. Newport, RI

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 – Exterior

(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] | _____ |
| 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 | [ASP. ROOFING] | Transite Siding Shingles |

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).

AGENCY USE ONLY

ATTACHMENT #1

In Process and Clearance Air Sampling

- A. If requested by the building owner, ECM will be on site for part time monitoring and will collect one compliance air sample outside the 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 interior areas have passed the consultant's visual inspection, he or his authorized representative will collect:
- Area 1 - Clearance air samples will not be required as removal is exterior. A qualified individual will perform a visual inspection to confirm all asbestos containing materials identified within this abatement plan have been removed. It is the responsibility of the asbestos abatement contractor to collect personnel air samples in compliance with OSHA 29 CFR 1926.1101 (f). These samples must be submitted to the RIDOH after the completion of the abatement area.**
- 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

Chart 1.1 – ACBM Sample Chart

Sample #	Material	Location	Asbestos %	Quantity
08A-B	Transite Siding Shingle	Exterior Siding	15% Chrtysotile	900 SF

**Transite siding is exposed and under wood siding on the exterior walls of the garage.
It is the contractor's responsibility to verify all quantities.**

ATTACHMENT #2 (Cont.)

Laboratory Analysis Reports:

1. Bulk Sample Results



The Identification Specialists

Analysis Report
prepared for
Environmental Consulting & Management Inc

Report Date: 3/26/2018

Project Name: Fort Adams Bldg 2

Project #: 180150

SanAir ID#: 18011240



NVLAP LAB CODE 200870-0

1551 Oakbridge Dr. Suite B | Powhatan, Virginia 23139-8061
888.895.1177 | 804.897.1177 | fax: 804.897.0070 | IAQ@SanAir.com | SanAir.com



SanAir ID Number
18011240
FINAL REPORT
3/26/2018 5:57:48 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Fort Adams Bldg 2
Collected Date: 3/16/2018
Received Date: 3/19/2018 9:05:00 AM

Dear Andrew Perreault,

We at SanAir would like to thank you for the work you recently submitted. The 10 sample(s) were received on Monday, March 19, 2018 via FedEx. The final report(s) is enclosed for the following sample(s): 07A, 08A, 08B, 09A, 09B, 10A, 11A, 11B, 12A, 12B.

These results only pertain to this job and should not be used in the interpretation of any other job. This report is only complete in its entirety. Refer to the listing below of the pages included in a complete final report.

Sincerely,

A handwritten signature in cursive script that reads "Sandra Sobrino".

Sandra Sobrino
Asbestos & Materials Laboratory Manager
SanAir Technologies Laboratory

Final Report Includes:

- Cover Letter
- Analysis Pages
- Disclaimers and Additional Information

Sample conditions:

- 10 samples in Good condition.



SanAir ID Number
18011240
 FINAL REPORT
 3/26/2018 5:57:48 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
 Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Fort Adams Bldg 2
Collected Date: 3/16/2018
Received Date: 3/19/2018 9:05:00 AM

Analyst: Moore, Brandi

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic Appearance	Components		Asbestos Fibers
		% Fibrous	% Non Fibrous	
07A / 18011240-001 12"12" Floor Tile/ Bathroom, Floor Tile	White Non-Fibrous Heterogeneous		100% Other	None Detected
07A / 18011240-001 12"12" Floor Tile/ Bathroom, Mastic	Yellow Non-Fibrous Homogeneous		100% Other	None Detected
08A / 18011240-002 Transite Siding Shingle/ Exterior North Side	White Non-Fibrous Homogeneous		85% Other	15% Chrysotile
08B / 18011240-003 Transite Siding Shingle/ Exterior East Side				Not Analyzed
09A / 18011240-004 Tar Paper Under 08A	Black Fibrous Heterogeneous	60% Cellulose	40% Other	< 1% Chrysotile
09B / 18011240-005 Tar Paper Under 08B	Black Fibrous Heterogeneous	60% Cellulose	40% Other	< 1% Chrysotile
10A / 18011240-006 Window Glazing/ Exterior North Side	White Non-Fibrous Heterogeneous		100% Other	< 1% Chrysotile
11A / 18011240-007 Asphalt Shingle/ Roof South Side	Black Non-Fibrous Heterogeneous	30% Cellulose	70% Other	None Detected
11B / 18011240-008 Asphalt Shingle/ Roof East Side	Black Non-Fibrous Heterogeneous	30% Cellulose	70% Other	None Detected
12A / 18011240-009 Tar Paper Under 11A	Black Fibrous Heterogeneous	60% Cellulose	40% Other	None Detected

Certification

Analyst: *Brandi Moore*

Approved Signatory: *Sandra Sobieraj*

Analysis Date: 3/26/2018

Date: 3/26/2018



SanAir ID Number
18011240
FINAL REPORT
3/26/2018 5:57:48 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Fort Adams Bldg 2
Collected Date: 3/16/2018
Received Date: 3/19/2018 9:05:00 AM

Analyst: Moore, Brandi

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non Fibrous	
12B / 18011240-010 Tar Paper Under 11B	Black Fibrous Heterogeneous	60% Cellulose	40% Other	None Detected

Certification

Analyst: *Brandi Moore*

Approved Signatory: *Sandra Sobieraj*

Analysis Date: 3/26/2018

Date: 3/26/2018

Disclaimer

The final report cannot be reproduced, except in full, without written authorization from SanAir. Fibers smaller than 5 microns cannot be seen with this method due to scope limitations. The accuracy of the results is dependent upon the client's sampling procedure and information provided to the laboratory by the client. SanAir assumes no responsibility for the sampling procedure and will provide evaluation reports based solely on the sample and information provided by the client. This report may not be used by the client to claim product endorsement by NVLAP or any other agency of the U.S. government. Samples are held for a period of 60 days.

For NY state samples, method EPA 600/M4-82-020 is performed.

Polarized- light microscopy is not consistently reliable in detecting asbestos in floor covering and similar non-friable organically bound materials. Quantitative transmission electron microscopy is currently the only method that can be used to determine if this material can be considered or treated as non-asbestos containing.

Asbestos Certifications

NVLAP lab code 200870

City of Philadelphia: ALL-460

PA Department of Environmental Protection Number: 68-05397

California License Number: 2915

Colorado License Number: AL-23143

Connecticut License Number: PH-0105

Massachusetts License Number: AA000222

Maine License Number: LB-0075

New York ELAP lab ID: 11983

Rhode Island License Number: AAL-126

Texas Department of State Health Services License Number: 300440

Commonwealth of Virginia 3333000323

Washington State License Number: C989

West Virginia License Number: LT000566

Vermont License: AL166318

Revision Date: 11/30/2017



1551 Oakbridge Dr. STE B
 Powhatan, VA 23139
 804.897.1177 / 888.895.1177
 Fax 804.897.0070
 sanair.com

Asbestos
 Chain of Custody
 Form 140, Rev 1, 1/20/2017

SanAir ID Number
 18011240

Company: ECM Inc.	Project #: 180150	Collect by: Andrew Perreault
Address: 181 Amaral Street	Project Name: Fort Adams Bldg 2	Phone #: 401-304-6615
City, St., Zip: Riverside, RI 02915	Date Collected: 3/16/2018	Fax #:
State of Collection: RI Account#: 2667	P.O. Number:	Email: aperreault@ecmne.com

Bulk		Air		Soil	
ABB	PLM EPA 600/R-93 116 <input checked="" type="checkbox"/>	ABA	PCM NIOSH 7400 <input type="checkbox"/>	ABSE	PLM EPA 600/R-93 116 (Qual.) <input type="checkbox"/>
	Positive Stop <input checked="" type="checkbox"/>	ABA-2	OSHA w/ TWA* <input type="checkbox"/>	Vermiculite & Soil	
ABEPA	PLM EPA 400 Point Count <input type="checkbox"/>	ABTEM	TEM AHERA <input type="checkbox"/>	ABSP	PLM CARB 435 (LOD <1%) <input type="checkbox"/>
ABB1K	PLM EPA 1000 Point Count <input type="checkbox"/>	ABATN	TEM NIOSH 7402 <input type="checkbox"/>	ABSP1	PLM CARB 435 (LOD 0.25%) <input type="checkbox"/>
ABBEN	PLM EPA NOB** <input type="checkbox"/>	ABT2	TEM Level II <input type="checkbox"/>	ABSP2	PLM CARB 435 (LOD 0.1%) <input type="checkbox"/>
ABBCH	TEM Charfield** <input type="checkbox"/>	Other:	<input type="checkbox"/>	Dust	
ABBTM	TEM EPA NOB** <input type="checkbox"/>	New York ELAP		ABWA	TEM Wipe ASTM D-6480 <input type="checkbox"/>
ABQ	PLM Qualitative <input type="checkbox"/>	PLM NY	PLM EPA 600/M4-82-020 <input type="checkbox"/>	ABDMV	TEM Microvac ASTM D-5755 <input type="checkbox"/>
		ABEPA2	NY ELAP 198.1 <input type="checkbox"/>	Matrix Other	
		ABENY	NY ELAP 198.6 PLM NOB <input type="checkbox"/>		
		ABBNY	NY ELAP 198.4 TEM NOB <input type="checkbox"/>		
Water					
ABHE	EPA 100.2 <input type="checkbox"/>				

** Available on 24-hr. to 5-day TAT

Turn Around Times	3 HR (4 HR TEM) <input type="checkbox"/>	6 HR (8HR TEM) <input type="checkbox"/>	12 HR <input type="checkbox"/>	24 HR <input type="checkbox"/>
	<input type="checkbox"/> 2 Days	<input type="checkbox"/> 3 Days	<input type="checkbox"/> 4 Days	<input checked="" type="checkbox"/> 5 Days

Special Instructions

Sample #	Sample Identification/Location	Volume or Area	Sample Date	Flow Rate*	Start - Stop Time*
07A	12"x12" Floor Tile / Bathroom				
08A	Transite Siding Shingle / Exterior North Side				
08B	Transite Siding Shingle / Exterior East Side				
09A	Tarpaper under 08A				
09B	Tarpaper under 08B				
10A	Window Glazing / Exterior North Side				
11A	Asphalt Shingle / Roof South Side				
11B	Asphalt Shingle / Roof East Side				
12A	Tarpaper under 11A				
12B	Tarpaper under 11B				

Relinquished by	Date	Time	Received by	Date	Time
<i>[Signature]</i>	3/16/18	15:45	<i>[Signature]</i>	MAR 19 2018	9:05AM

If no technician is provided, then the primary contact for your account will be selected. Unless scheduled, the turnaround time for all samples received after 3 pm EST Friday will begin at 8 am Monday morning. Weekend or holiday work must be scheduled ahead of time and is charged for rush turnaround time. SanAir covers Standard Overnight FedEx shipping. Shipments billed to SanAir with a faster shipping rate will result in additional charges.

ATTACHMENT #3

Interim Operations & Maintenance Plan

The contractors, maintenance personnel and staff associated with the Rhode Island Department of Environmental Management (RI DEM) 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 shall be followed.

All materials identified within Area 1 will be removed utilizing B8.8 Procedures below.

The RI DEM request a waiver of pre-abatement air samples. No power is at this structure.

Fort Adam Maintenance Garage 2
1 Lincoln Drive, Newport RI
Asbestos Locations



— Asbestos Containing Transite Siding Shingle



RHODE ISLAND DEPARTMENT OF HEALTH

NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN

Facility: **Fort Adams Maintenance Garage 1**

Address: **1 Lincoln Drive**

City/Town: **Newport, RI**

Zip: **02840**

Amendment Phase No: _____

Abatement Plan Written By: **Joseph 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 (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: **TBD**

License No: LAC-

Estimated Starting Date: **06/04/18**

Pre-Abatement Sampling Information

Bulk Samples Collected By: **Andrew Perreault**

Certification No: **AAC-0914**

Bulk Samples Analyzed By: **San Air**

Certification No: **AAL-143**

Air Samples Analyzed By: **NA**

Certification No: **AAL-**

Clearance Air Sampling Information

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

Air Samples to be Analyzed By: **ECM Inc**

Certification No: **AAL-131**

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: _____
(Signature of Building Owner or Agent)

(Typed/Printed Name of Certifier) Date: _____

Subscribed and sworn before me this _____ day of _____, 20____

My Commission Expires: _____

(Notary Public)

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 DEM

2. Application Prepared By:
Joseph M. Lepore
RI certification No: **AAC-661-PD**
Telephone No: **401-304-6614**

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

Street: **235 Promenade Street**

City/Town: **Providence**

Zip: **02903**

Telephone No.: **401-222-2776**

(Area Code, No., Ext.)

4. Person to be contacted regarding this application:

Name: **David DeCost**

Telephone No: **(401) 222-2776 x4312**

(Area Code, No., Ext.)

5. Location where abatement work will be performed:

Name (if applicable): **Fort Adams Maintenance Garage 1**

Street: **1 Lincoln Drive**

City/Town: **Newport, RI**

Zip: **02840**

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 selected**

R.I. License No.: **LAC-**

14. Pre-Abatement Air Sample Collection and Analysis:

A). Person collecting pre-abatement air samples:

Name: **NA**

Affiliation: **NA**

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

Name: **NA**

RI Certification No.: **NA**

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

(**X**) Other (Specify) Pre-Abatement Air Samples not collected. This project will be conducted using demolition procedures. There is no power to the building.

-
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: **ECM Personnel**

Affiliation: **ECM**

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 – Exterior

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

Signature:  Date 04/24/18
(Month) (Day) (Year)

Affiliation: **ECM 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
- 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: Fort Adams Maintenance Garage 1 – 1 Lincoln Dr. Newport, RI

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 – Exterior

(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]	_____
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	[ASP. ROOFING]	Transite Siding Shingles

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).

AGENCY USE ONLY

ATTACHMENT #1

In Process and Clearance Air Sampling

- A. If requested by the building owner, ECM will be on site for part time monitoring and will collect one compliance air sample outside the 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 interior areas have passed the consultant's visual inspection, he or his authorized representative will collect:

Area 1 - Clearance air samples will not be required as removal is exterior. A qualified individual will perform a visual inspection to confirm all asbestos containing materials identified within this abatement plan have been removed. It is the responsibility of the asbestos abatement contractor to collect personnel air samples in compliance with OSHA 29 CFR 1926.1101 (f). These samples must be submitted to the RIDOH after the completion of the abatement area.

- 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

Chart 1.1 – ACBM Sample Chart

Sample #	Material	Location	Asbestos %	Quantity
03A-B	Transite Siding Shingle	Exterior Siding	20% Chrysotile	1,400 SF

**Transite siding is exposed and under wood siding on the exterior walls of the garage.
It is the contractor's responsibility to verify all quantities.**

ATTACHMENT #2 (Cont.)

Laboratory Analysis Reports:

1. Bulk Sample Results



The Identification Specialists

Analysis Report
prepared for
Environmental Consulting & Management Inc

Report Date: 3/26/2018

Project Name: Fort Adams Bldg 1

Project #: 180150

SanAir ID#: 18011231



NVLAP LAB CODE 200870-0

1551 Oakbridge Dr. Suite B | Powhatan, Virginia 23139-8061
888.895.1177 | 804.897.1177 | fax: 804.897.0070 | IAQ@SanAir.com | SanAir.com



SanAir ID Number
18011231
FINAL REPORT
3/26/2018 5:47:11 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Fort Adams Bldg 1
Collected Date: 3/16/2018
Received Date: 3/19/2018 9:05:00 AM

Dear Andrew Perreault,

We at SanAir would like to thank you for the work you recently submitted. The 10 sample(s) were received on Monday, March 19, 2018 via FedEx. The final report(s) is enclosed for the following sample(s): 01A, 02A, 03A, 03B, 04A, 04B, 05A, 05B, 06A, 06B.

These results only pertain to this job and should not be used in the interpretation of any other job. This report is only complete in its entirety. Refer to the listing below of the pages included in a complete final report.

Sincerely,

A handwritten signature in cursive script that reads "Sandra Sobrino".

Sandra Sobrino
Asbestos & Materials Laboratory Manager
SanAir Technologies Laboratory

Final Report Includes:

- Cover Letter
- Analysis Pages
- Disclaimers and Additional Information

Sample conditions:

- 10 samples in Good condition.



SanAir ID Number
18011231
 FINAL REPORT
 3/26/2018 5:47:11 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
 Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Fort Adams Bldg 1
Collected Date: 3/16/2018
Received Date: 3/19/2018 9:05:00 AM

Analyst: Fleming, Christopher

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non Fibrous	
01A / 18011231-001 Patch On Steel Chimney/ Workshop, Patch	White Non-Fibrous Homogeneous		100% Other	None Detected
01A / 18011231-001 Patch On Steel Chimney/ Workshop, Mastic	Black Non-Fibrous Homogeneous		100% Other	None Detected
02A / 18011231-002 Window Glaizng To Garage Bay Door/ Exterior West Side	White Non-Fibrous Homogeneous		100% Other	None Detected
03A / 18011231-003 Transite Siding Shingle/ Exterior North Side	Grey Non-Fibrous Homogeneous		80% Other	20% Chrysotile
03B / 18011231-004 Transite Siding Shingle/ Exterior East Side				Not Analyzed
04A / 18011231-005 Tar Paper Under Transite Siding Shingle/ Exterior North Side	Black Fibrous Homogeneous	50% Cellulose	50% Other	None Detected
04B / 18011231-006 Tar Paper Under Transite Siding Shingle/ Exterior East Side	Black Fibrous Homogeneous	50% Cellulose	50% Other	None Detected
05A / 18011231-007 Asphalt Shingle/ Roof South Side	Black Non-Fibrous Heterogeneous		100% Other	None Detected
05B / 18011231-008 Asphalt Shingle/ Roof East Side	Black Non-Fibrous Heterogeneous		100% Other	None Detected
06A / 18011231-009 Tar Paper Under 05A	Black Fibrous Homogeneous	60% Cellulose	40% Other	None Detected

Certification

Analyst: *Chris Fleming*

Approved Signatory: *Sandra Sobieraj*

Analysis Date: 3/26/2018

Date: 3/26/2018



SanAir ID Number
18011231
FINAL REPORT
3/26/2018 5:47:11 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: Fort Adams Bldg 1
Collected Date: 3/16/2018
Received Date: 3/19/2018 9:05:00 AM

Analyst: Fleming, Christopher

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non Fibrous	
06B / 18011231-010 Tar Paper Under 05B	Black Fibrous Homogeneous	60% Cellulose	40% Other	None Detected

Certification

Analyst: *Chris Fleming*

Approved Signatory: *Sandra Sobieraj*

Analysis Date: 3/26/2018

Date: 3/26/2018

Disclaimer

The final report cannot be reproduced, except in full, without written authorization from SanAir. Fibers smaller than 5 microns cannot be seen with this method due to scope limitations. The accuracy of the results is dependent upon the client's sampling procedure and information provided to the laboratory by the client. SanAir assumes no responsibility for the sampling procedure and will provide evaluation reports based solely on the sample and information provided by the client. This report may not be used by the client to claim product endorsement by NVLAP or any other agency of the U.S. government. Samples are held for a period of 60 days.

For NY state samples, method EPA 600/M4-82-020 is performed.

Polarized- light microscopy is not consistently reliable in detecting asbestos in floor covering and similar non-friable organically bound materials. Quantitative transmission electron microscopy is currently the only method that can be used to determine if this material can be considered or treated as non-asbestos containing.

Asbestos Certifications

NVLAP lab code 200870

City of Philadelphia: ALL-460

PA Department of Environmental Protection Number: 68-05397

California License Number: 2915

Colorado License Number: AL-23143

Connecticut License Number: PH-0105

Massachusetts License Number: AA000222

Maine License Number: LB-0075

New York ELAP lab ID: 11983

Rhode Island License Number: AAL-126

Texas Department of State Health Services License Number: 300440

Commonwealth of Virginia 3333000323

Washington State License Number: C989

West Virginia License Number: LT000566

Vermont License: AL166318

Revision Date: 11/30/2017



1551 Oakbridge Dr. STE B
 Powhatan, VA 23139
 804.897.1177 / 888.895.1177
 Fax 804.897.0070
 sanair.com

Asbestos
 Chain of Custody
 Form 140, Rev 1, 1/20/2017

SanAir ID Number
 18011231

Company: ECM Inc.	Project #: 180150	Collect by: Andrew Perreault
Address: 181 Amaral Street	Project Name: Fort Adams Bldg 1	Phone #: 401-304-6615
City, St., Zip: Riverside, RI 02915	Date Collected: 3/16/2018	Fax #:
State of Collection: RI Account#: 2667	P.O. Number:	Email: aperreault@ecmne.com

Bulk		Air		Soil	
ABB	PLM EPA 600/R-93/116 <input checked="" type="checkbox"/>	ABA	PCM NIOSH 7400 <input type="checkbox"/>	ABSE	PLM EPA 600/R-93 116 (Qual.) <input type="checkbox"/>
	Positive Stop <input checked="" type="checkbox"/>	ABA-2	OSHA w/ TWA* <input type="checkbox"/>	Vermiculite & Soil	
ABEPA	PLM EPA 400 Point Count <input type="checkbox"/>	ABTEM	TEM AHERA <input type="checkbox"/>	ABSP	PLM CARB 435 (LOD <1%) <input type="checkbox"/>
ABB1K	PLM EPA 1000 Point Count <input type="checkbox"/>	ABATN	TEM NIOSH 7402 <input type="checkbox"/>	ABSP1	PLM CARB 435 (LOD 0.25%) <input type="checkbox"/>
ABBN	PLM EPA NOB** <input type="checkbox"/>	ABT2	TEM Level II <input type="checkbox"/>	ABSP2	PLM CARB 435 (LOD 0.1%) <input type="checkbox"/>
ABBCH	TEM Chatfield** <input type="checkbox"/>	Other:	<input type="checkbox"/>	Dust	
ABBTM	TEM EPA NOB** <input type="checkbox"/>	New York ELAP		ABWA	TEM Wipe ASTM D-6480 <input type="checkbox"/>
ABQ	PLM Qualitative <input type="checkbox"/>	PLM NY	PLM EPA 600/M4-82-020 <input type="checkbox"/>	ABDMV	TEM Microvac ASTM D-5755 <input type="checkbox"/>
		ABEPA2	NY ELAP 198.1 <input type="checkbox"/>	Matrix Other	
Water		ABENY	NY ELAP 198.6 PLM NOB <input type="checkbox"/>		
ABHE	EPA 100.2 <input type="checkbox"/>	ABBNY	NY ELAP 198.4 TEM NOB <input type="checkbox"/>		

** Available on 24-hr. to 5-day TAT

Turn Around Times	3 HR (4 HR TEM) <input type="checkbox"/>	6 HR (8HR TEM) <input type="checkbox"/>	12 HR <input type="checkbox"/>	24 HR <input type="checkbox"/>
	<input type="checkbox"/> 2 Days	<input type="checkbox"/> 3 Days	<input type="checkbox"/> 4 Days	<input checked="" type="checkbox"/> 5 Days

Special Instructions

Sample #	Sample Identification/Location	Volume or Area	Sample Date	Flow Rate*	Start - Stop Time*
01A	White Patch on Steel Chimney / Work Shop				
02A	Window Glazing to Garage Bay Door / Exterior West Side				
03A	Transite Siding Shingle / Exterior North Side				
03B	Transite Siding Shingle / Exterior East Side				
04A	Tarpaper under Transite Siding Shingle / Exterior North Side				
04B	Tarpaper under Transite Siding Shingle / Exterior East Side				
05A	Asphalt Shingle / Roof South Side				
05B	Asphalt Shingle / Roof East Side				
06A	Tarpaper under 05A				
06B	Tarpaper under 05B				

Relinquished by	Date	Time	Received by	Date	Time
<i>[Signature]</i>	3/16/18	1545	<i>[Signature]</i>	MAR 10 2018	9:05AM

If no technician is provided, then the primary contact for your account will be selected. Unless scheduled, the turnaround time for all samples received after 3 pm EST Friday will begin at 8 am Monday morning. Weekend or holiday work must be scheduled ahead of time and is charged for rush turnaround time. SanAir covers Standard Overnight FedEx shipping. Shipments billed to SanAir with a faster shipping rate will result in additional charges.

ATTACHMENT #3

Interim Operations & Maintenance Plan

The contractors, maintenance personnel and staff associated with the Rhode Island Department of Environmental Management (RI DEM) 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 shall be followed.

All materials identified within Area 1 will be removed utilizing B8.8 Procedures below.

The RI DEM request a waiver of pre-abatement air samples. No power is at this structure.

Fort Adam Maintenance Garage 1
1 Lincoln Drive, Newport RI
Asbestos Locations



— Asbestos Containing Transite Siding Shingle



RHODE ISLAND DEPARTMENT OF HEALTH

NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN

Facility: Salty Acres

Address: 972 Point Judith Road

City/Town: Narragansett

Zip: 02882

Amendment Phase No: _____

Abatement Plan Written By: Joseph Lepore

Certification No: AAC-661-PD

Summary of specific waivers/variances being requested: See Attachment #4

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: TBD

License No: LAC-

Estimated Starting Date: 06/04/18

Pre-Abatement Sampling Information

Bulk Samples Collected By: Charles E. Prescott III

Certification No: AAC-0642

Bulk Samples Analyzed By: San Air

Certification No: AAL-126

Air Samples Analyzed By: N/A

Certification No: AAL-

Clearance Air Sampling Information

Air Samples to be Collected By: ECM Personnel

Air Samples to be Analyzed By: ECM Inc

Certification No: AAL-131

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: _____
(Signature of Building Owner or Agent)

_____ Date: _____
(Typed/Printed Name of Certifier)

Subscribed and sworn before me this _____ day of _____, 20_____

_____ My Commission Expires: _____

(Notary Public)

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 DEM

2. Application Prepared By:
Joseph M. Lepore
RI certification No: **AAC-661-PD**
Telephone No: **401-304-6614**

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

Street: **235 Promenade Street**

City/Town: **Providence**

Zip: **02903**

Telephone No.: **401-222-2776**

(Area Code, No., Ext.)

4. Person to be contacted regarding this application:

Name: **David DeCost**

Telephone No: **(401) 222-2776 x4312**

(Area Code, No., Ext.)

5. Location where abatement work will be performed:

Name (if applicable): **Salty Acres**

Street: **972 Point Judith Road**

City/Town: **Narragansett**

Zip: **02882**

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 selected**

R.I. License No.: **LAC-**

14. Pre-Abatement Air Sample Collection and Analysis:

A). Person collecting pre-abatement air samples:

Name: NA

Affiliation: NA

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

Name: NA

RI Certification No.: NA

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) Pre-Abatement Air Samples not collected. This project will be conducted using demolition procedures. There is no power to the building.

-
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: **ECM Personnel**

Affiliation: **ECM**

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 – Kitchen

Area 2- Exterior

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

Signature: 

Date 05 02 2018
(Month) (Day) (Year)

Affiliation: **ECM 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: Salty Acres- 972 Point Judith Road, Narraganset

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 – Interior

(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

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: Salty Acres- 972 Point Judith Road, Narraganset

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 – Exterior

(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]	_____
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	[ASP. ROOFING]	Lexonite on Roof

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

AGENCY USE ONLY

ATTACHMENT #1

In Process and Clearance Air Sampling

- A. If requested by the building owner, ECM will be on site for part time monitoring and will collect one compliance air sample outside the 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 interior areas have passed the consultant's visual inspection, he or his authorized representative will collect:

Area 1 – If the building is to be occupied after abatement, a minimum of 2 PCM Clearance Air Samples per containment will need to be collected. Clearance air samples will not be required if the building is to be demolished after a visual inspection by ECM personnel. A qualified individual will perform a visual inspection to confirm all asbestos containing materials identified within this abatement plan have been removed. It is the responsibility of the asbestos abatement contractor to collect personnel air samples in compliance with OSHA 29 CFR 1926.1101 (f). These samples must be submitted to the RIDOH at the completion of the abatement area.

Area 2 - Clearance air samples will not be required as removal is exterior. A qualified individual will perform a visual inspection to confirm all asbestos containing materials identified within this abatement plan have been removed. It is the responsibility of the asbestos abatement contractor to collect personnel air samples in compliance with OSHA 29 CFR 1926.1101 (f). These samples must be submitted to the RIDOH after the completion of the abatement area.

- 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

Chart 1.1 – ACBM Sample Chart

Sample #	Material	Location	Asbestos %	Quantity
01A	Sheet Linoleum	Living Room, Hallway	Contaminated by 02A	~550 sf
02A	Backing to 01A		60% Chrysotile	
03A	Mastic/Tar Paper	Living Room – Under 01A/02A	None Detected	--
04A	1x1 Ceiling Tile	Living Room; 2 nd Floor Hallway	None Detected	--
05A-C	Glue Daubs		None Detected	--
06A	Linoleum	Kitchen – On Plywood	None Detected	--
07A	Backing		None Detected	--
08A	Mosaic Linoleum	Kitchen – Under Plywood	Contaminated by 09A	~120 sf
09A	Backing to 08A		60% Chrysotile	
010A	Mastic/Tar Paper	Kitchen – Under 08A/09A	None Detected	--
011A	Sink Anti-Condensate	Kitchen	4% Chrysotile	1 sink
012A	Panel Adhesive	Kitchen	None Detected	--
013A-C	Sheetrock	Kitchen, Boiler Room, Garage	None Detected	--
014A-C	Seam Tape		Negative (<1% Chrysotile)	--
015A	Flue Packing	Boiler Room	None Detected	--
016A	12x12 Stick-on Floor Tile	2nd Floor Bathroom	5% Chrysotile	~140 sf
017A	Black Floor Tile	2nd Floor Bathroom – Under Plywood	3% Chrysotile	~140 sf
018A	Mastic to 017A	2 nd Floor Bathroom	None Detected	--
019A-C	Window Glazing	Exterior	None Detected	--
020A-C	Asphalt Shingle		None Detected	--
021A-C	Bottom Roofing Layer		None Detected	--
022A	Lexonite	Roof Penetrations; Dormer Edge; Lower Roof to Main Building Edge; Up Sides of Chimney	5% Chrysotile	~100 sf

It is the contractor's responsibility to verify all quantities.

ATTACHMENT #2 (Cont.)

Laboratory Analysis Reports:

1. Bulk Sample Results



The Identification Specialists

Analysis Report
prepared for
Environmental Consulting & Management Inc

Report Date: 3/16/2018

Project Name: RIDEM - Salty Acres House

Project #: 180150

SanAir ID#: 18010034



NVLAP LAB CODE 200870-0

1551 Oakbridge Dr. Suite B | Powhatan, Virginia 23139-8061
888.895.1177 | 804.897.1177 | fax: 804.897.0070 | IAQ@SanAir.com | SanAir.com



SanAir ID Number
18010034
FINAL REPORT
3/16/2018 6:02:12 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: RIDEM - Salty Acres House
Collected Date: 3/8/2018
Received Date: 3/9/2018 10:50:00 AM

Dear Chad Prescott,

We at SanAir would like to thank you for the work you recently submitted. The 34 sample(s) were received on Friday, March 09, 2018 via FedEx. The final report(s) is enclosed for the following sample(s): 01A, 02A, 03A, 04A, 05A, 06A, 07A, 08A, 09A, 010A, 011A, 012A, 013A, 013B, 013C, 014A, 014B, 014C, 015A, 016A, 017A, 018A, 019A, 019B, 019C, 020A, 020B, 020C, 021A, 021B, 021C, 022A, 5B, 5C.

These results only pertain to this job and should not be used in the interpretation of any other job. This report is only complete in its entirety. Refer to the listing below of the pages included in a complete final report.

Sincerely,

Sandra Sobrino
Asbestos & Materials Laboratory Manager
SanAir Technologies Laboratory

Final Report Includes:

- Cover Letter
- Analysis Pages
- Disclaimers and Additional Information

Sample conditions:

- 34 samples in Good condition.



SanAir ID Number
18010034
FINAL REPORT
3/16/2018 6:02:12 PM

Name: Environmental Consulting & Management Inc
Address: 50 Kickemuit Ave
Bristol, RI 02809
Phone: 401-438-1360

Project Number: 180150
P.O. Number:
Project Name: RIDEM - Salty Acres House
Collected Date: 3/8/2018
Received Date: 3/9/2018 10:50:00 AM

Analyst: Toth, Elizabeth

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non Fibrous	
01A / 18010034-001 Sheet Linoleum	Various Non-Fibrous Heterogeneous		100% Other	None Detected
02A / 18010034-002 Backing To 01A	Beige Fibrous Homogeneous		40% Other	60% Chrysotile
03A / 18010034-003 Mastic/ Tarpaper	Black Fibrous Homogeneous	60% Cellulose	40% Other	None Detected
04A / 18010034-004 1X1 Ceiling Tile	White Fibrous Homogeneous	50% Glass 30% Min. Wool 10% Cellulose	10% Other	None Detected
05A / 18010034-005 Glue Daubs	Brown Non-Fibrous Homogeneous		100% Other	None Detected
06A / 18010034-006 Linoleum	Grey Non-Fibrous Heterogeneous		100% Other	None Detected
07A / 18010034-007 Backing To 06A	Brown Non-Fibrous Homogeneous	10% Glass	90% Other	None Detected
08A / 18010034-008 Linoleum	Various Non-Fibrous Heterogeneous		100% Other	None Detected
09A / 18010034-009 Backing To 08A	Beige Fibrous Homogeneous		40% Other	60% Chrysotile
010A / 18010034-010 Mastic/ Tar Paper	Black Fibrous Homogeneous	70% Cellulose	30% Other	None Detected

Certification

Analyst:

Elizabeth Toth

Approved Signatory:

[Signature]

Analysis Date: 3/16/2018

Date: 3/16/2018



SanAir ID Number
18010034
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 3/16/2018 6:02:12 PM

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Received Date: 3/9/2018 10:50:00 AM

Analyst: Toth, Elizabeth

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic Appearance	Components		Asbestos Fibers
		% Fibrous	% Non Fibrous	
011A / 18010034-011 Sink Anti-Condensate	Off-White Non-Fibrous Homogeneous		96% Other	4% Chrysotile
012A / 18010034-012 Panel Adhesive	Brown Non-Fibrous Homogeneous		100% Other	None Detected
013A / 18010034-013 Sheetrock	Off-White Non-Fibrous Homogeneous	3% Cellulose	97% Other	None Detected
013B / 18010034-014 Sheetrock	Off-White Non-Fibrous Homogeneous	3% Cellulose	97% Other	None Detected
013C / 18010034-015 Sheetrock	Off-White Non-Fibrous Homogeneous	3% Cellulose	97% Other	None Detected
014A / 18010034-016 Seam Tape	Green Fibrous Heterogeneous	95% Cellulose	5% Other	< 1% Chrysotile
014B / 18010034-017 Seam Tape	Green Fibrous Homogeneous	95% Cellulose	5% Other	None Detected
014C / 18010034-018 Seam Tape	Green Fibrous Heterogeneous	95% Cellulose	5% Other	< 1% Chrysotile
015A / 18010034-019 Flue Packing	Grey Non-Fibrous Homogeneous	5% Glass	95% Other	None Detected
016A / 18010034-020 12X12 Stick-On Floor Tile	Beige Non-Fibrous Homogeneous		95% Other	5% Chrysotile

Certification

Analyst: *Elizabeth Toth*

Approved Signatory: *[Signature]*

Analysis Date: 3/16/2018

Date: 3/16/2018



SanAir ID Number
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Analyst: Toth, Elizabeth

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic Appearance	Components		Asbestos Fibers
		% Fibrous	% Non Fibrous	
017A / 18010034-021 Floor Tile	Black Non-Fibrous Homogeneous		97% Other	3% Chrysotile
018A / 18010034-022 Mastic	Black Fibrous Heterogeneous	60% Cellulose	40% Other	None Detected
019A / 18010034-023 Window Caulking	White Non-Fibrous Homogeneous		100% Other	None Detected
019B / 18010034-024 Window Caulking	White Non-Fibrous Homogeneous		100% Other	None Detected
019C / 18010034-025 Window Caulking	White Non-Fibrous Homogeneous		100% Other	None Detected
020A / 18010034-026 Asphalt Shingle	Grey Non-Fibrous Heterogeneous	15% Cellulose	85% Other	None Detected
020B / 18010034-027 Asphalt Shingle	Grey Non-Fibrous Heterogeneous	15% Cellulose	85% Other	None Detected
020C / 18010034-028 Asphalt Shingle	Black Non-Fibrous Heterogeneous	15% Cellulose	85% Other	None Detected
021A / 18010034-029 Bottom Roofing Layer	Black Fibrous Homogeneous	60% Cellulose	40% Other	None Detected
021B / 18010034-030 Bottom Roofing Layer	Black Fibrous Homogeneous	60% Cellulose	40% Other	None Detected

Certification

Analyst: *Elizabeth Toth*

Approved Signatory: *[Signature]*

Analysis Date: 3/16/2018

Date: 3/16/2018



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Analyst: Toth, Elizabeth

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non Fibrous	
021C / 18010034-031 Bottom Roofing Layer	Black Fibrous Homogeneous	60% Cellulose	40% Other	None Detected
022A / 18010034-032 Lexonite	Black Non-Fibrous Homogeneous		95% Other	5% Chrysotile
5B / 18010034-033 Glue Daubs	Brown Non-Fibrous Homogeneous		100% Other	None Detected
5C / 18010034-034 Glue Daubs	Brown Non-Fibrous Homogeneous		100% Other	None Detected

Certification

Analyst: *Elizabeth Toth* Approved Signatory: *[Signature]*
 Analysis Date: 3/16/2018 Date: 3/16/2018

ATTACHMENT #3

Interim Operations & Maintenance Plan

The contractors, maintenance personnel and staff associated with the Rhode Island Department of Environmental Management (RI DEM) 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

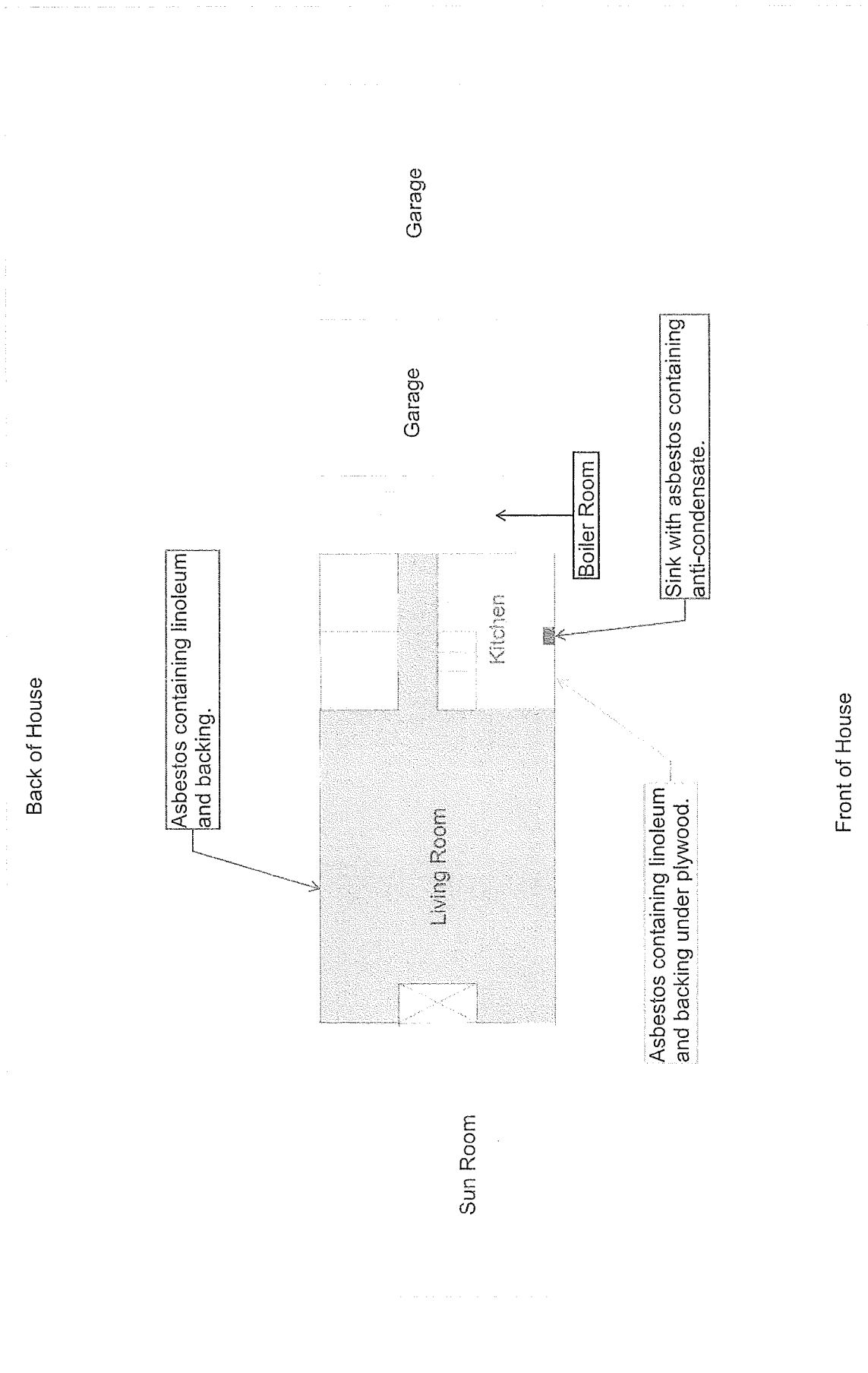
All proper OSHA, federal, state, and local safety regulations shall be followed.

All materials identified withing Area 1 will be removed utilizing B8.6 work procedures.

All materials identified within Area 2 will be removed utilizing B8.8 Procedures below.

The RI DEM request a waiver of pre-abatement air samples. No power is at this structure. A waiver floor sheeting is request where those substrates will be abated.

Salty Acres House, 972 Point Judith Road, Narragansett - 1st Floor Interior



Back of House

Garage

Garage

Sun Room

Living Room

Kitchen

Boiler Room

Sink with asbestos containing anti-condensate.

Asbestos containing linoleum and backing under plywood.

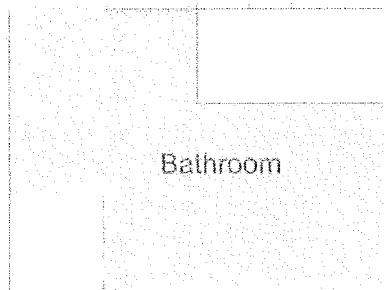
Asbestos containing linoleum and backing.

Front of House

Salty Acres House
972 Point Judith Road, Narragansett - 2nd Floor

Back of House

← Stairs to 1st Floor



Asbestos containing 12x12 stick-on floor tile on top of plywood.
Asbestos containing floor tile under plywood.

Front of House

Salty Acres House
972 Point Judith Road, Narragansett - Exterior

