



HUB TESTING LABORATORY, INC.
Environmental Testing Service

95 Beaver Street - Waltham, MA 02453
(781) 893-8330 (781) 893-4414 (fax)

MEMO

To: Ed Dufresne, Rick Roney, and Roger Young
From: Fred Boyle
Re: Fox, Crowell & Greenleaf Schools
Date: September 26, 2001

Ed,

Enclosed are copies of the notification to the Commonwealth of Mass. concerning the asbestos abatement at the above schools.

Please note that the Greenleaf and Crowell schools will be done the weekend of October 27 and the Fox school is scheduled for the weekends of October 13th and the 20th.

The contractor, Abatement Control Services, had been contacted and will forward the Insurance Certificate, 50% Bond and the Certificate from the city.

Would you please make arrangements for the schools to be open on these dates?

Enclosure

TO: <u>Rick Roney ✓</u>	
DEPT: <u>Harshill HS</u>	
CO: <u>Mount. Dept</u>	
FAX: <u>978-374-3479</u>	
	FROM: <u>Fred Boyle</u> DATE: <u>9/26/01</u>

REVISED DATE: 10/20/01

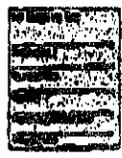


Commonwealth of Massachusetts
Asbestos Notification Form -- AHP-001



Asbestos Abatement Description

1. An abatement is required if any asbestos is removed or if any is disturbed in any way...
2. Contact State Dept. of Environmental Affairs...
3. This form must be filed with DEP...
4. This form must be filed with DEP...



1. Facility location: FOX ELEMENTARY SCHOOL, 75 ELM STREET, HAVERHILL, MA 01830, 978-374-2301
2. Is the facility occupied? YES NO
3. Asbestos Generation: APARTMENT CONTROL SERVICES, INC., 2 INDUSTRIAL WAY, BAYTOWN, NH 03079, 603-898-2000, WRITTEN
4. On-Site Project Supervision: THIRIE DEMONICO, AS 53137
5. Project Monitor: WILK TESTING LABORATORY, INC., 0013
6. Asbestos Analysis Lab: WILK TESTING LABORATORY, INC., 0013
7. Project start date: 10/20/01
8. What type of project is this? (circle one): renovation
9. Describe the asbestos abatement procedures to be used (circle one): enclosure
10. Is the job being conducted in enclosures? enclosure enclosure 1
11. Total amount of each type of Asbestos Containing Material (ACM) to be removed or enclosed or otherwise controlled...
12. Describe the containment system(s) to be used: MXMI CONTAINMENT
13. Describe the containment system(s) to be used to comply with 810 CMR 7.15 and 810 CMR 6.14(2): WILK TESTING LABORATORY, INC. will follow Asbestos Labeled Bar
14. For Emergency Asbestos Abatement Operations, the DEP and OLI officials who evaluated the emergency...
15. Do provisions which refer apply to 817 M.G.L. c. 144, s. 25, 27, or 37A-7 to this contract? Yes No

City of Haverhill

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7-3

Asbestos removal

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Revised Date 10/1/01
Commonwealth of Massachusetts
Asbestos Notification Form - ANF-001

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Asbestos Abatement Description

1. All portions of this form must be completed in order to receive the notification of abatement. The information provided on this form is required for the Department of Environmental Health to issue a permit for the abatement. The information provided on this form is also used for the Department of Environmental Health to issue a permit for the abatement. The information provided on this form is also used for the Department of Environmental Health to issue a permit for the abatement.

1. Project location: FOX BENGOL 75 ELM STREET
City: HAVERHILL, MA 01830 978-374-
State: MA Zip: 01830
Address: 1st floor inside

2. Is the building occupied? Yes No
3. Asbestos Consultant: APARTMENT CONTROL SERVICES, INC. 2 INDUSTRIAL WAY
City: SALEM, NH 03079 603-898-9-
State: NH Zip: 03079
Address: 2000
AC0000362 WRITTEN
Date: 10/1/01

4. On-site Project Supervisor: CHRIS DEMONACO AS 33137
City: SALEM, NH 03079

5. Project Monitor: HUB TESTING LABORATORY, INC. 0013
City: SALEM, NH 03079

6. Asbestos Analytical Lab: HUB TESTING LABORATORY, INC. 0013
City: SALEM, NH 03079

7. Project start date: 10/1/01 and end date: 10/1/01
Project start time: 08:00 and end time: 10:00
Project start day: Monday

8. What type of project is this? (check one): removal repair enclosure other
9. Describe the asbestos abatement procedures to be used: (check one): wet dry HEPA

10. Is the job being conducted? interior exterior
11. Total amount of each type of Asbestos Containing Material (ACM) to be removed or encased or sealed (check one):
Asbestos (lb):
Asbestos (cu ft):
Asbestos (sq ft):
Asbestos (other):

12. Describe the decontamination method(s) to be used:
full decontamination

13. Describe the container/enclosure method(s) to comply with 810 CMR 7.18 and 811 CMR 8.14(1)(i):
wet removal into 5 mil. Poly. Asbestos labeled bags

14. For Emergency Asbestos Abatement Operations, the DEP and DLI officials who organized the emergency:
Name of DEP official: _____
Name of DLI official: _____
Name of other official: _____

15. Do providing with this report on per M.G.L. c. 149, § 28, 27, or 27A - F to this project? Yes No

