

Environmental Testing Service

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

DOCUMENTATION CHECKLIST FOR AHERA/SCHOOL FINAL REPORTS (Response Action Information Only)

This information must be included in all final reports, either in the body of the text, or in an appendix attached hereto.

1.	Name and location of school		
2.	Location and type of ACBM. Amount of ACBM present (linear and/or square footage). P1 P3		_
2. 3	Amount of ACRM present (linear and/or square footage)	P. 3	PH
ے. ر 4.	Type of abatement activity:		
٠٠.	Removal X Encapsulation Enclosure Repair	-	
5.	Reason for activity		
5. 6.	Start/ston dates P1P2	P 3	P.4
7.	Personnel Documentation (all involved personnel):		
7.			
	Workers, Supervisors -Certificates/licensesHealth/Medical examination. A++ F A++ F		
	Health Medical examination Att F		
	-Training Documentation.		
	Project Monitors, Project Designers		
	-Certificates/LicensesAH E		
	-Training documentation A11 E		
8.	Contractor Documentation/MA License		
9.	Laboratory Documentation		
٧.	MA License		
	Certificate PCM/PLM/TEMA++ E		
10.	Contractor's Job Documentation:		
10.	-Copies of Notifications to DLWD, DEP, EPA, and applicable		
	Police fire or safety authority		
	-Daily sign-in sheets (verify workers, supervisors, project monitors,		
	and visitors)		
	-Contractor's submittal package, with abatement plan and		
	Standard Operating Procedure, Respirator Program, Insurance		
	Certificates, equipment and supply specification sheets,		
	fire and emergency evacuation planAtt		
	Chair of Custody documents for waste		
	-Disposal Manifests		•
	-Disposal Manifests		
	-Name and Certification of disposal carrier		,

11.	Consultants' Job Documentation: -Daily checklists for work environment and/or conditions, with
	Commentary of unusual or noteworthy activities)
	-Air monitoring data sneets showing location, date, 974, samples collected and analyzed, indicate square footage and conformance to Appendix A, CMR 763.90(i) (2) (ii)
	-Name and title of person performing analysis
	-Name and title of person performing final visual inspection and their certification
	Date:
12.	Checklist completed by: Date:

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Environmental Testing Service

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

Report For:

City of Haverhill School Department

City Hall

4 Summer Street

Haverhill, MA. 01830-5877

Attention:

Mr. Roger Young

Executive Director of Business

Project:

Hunking Middle School

Tilton School

Whittier Middle School

Air sampling and Monitoring for Asbestos Exposure During the Removal of Asbestos Containing Floor Tile with Associated Mastic in the Hunking Middle School and Whittier Middle School and Removal and Wet Wrapping of Asbestos Containing Pipe

Insulation in the Tilton School.

Submitted By

Susan Boyle Vice President

Date:

September 5, 2001

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AIR MONITORING RESULTS

ATTACHMENT B DAILY MONITORING CHECKLIST

ATTACHMENT C PRE-ABATEMENT INSPECTION

ATTACHMENT D FINAL CLEARANCE FORMS

ATTACHMENT E LABORATORY DOCUMENTATION PROJECT MONITORING DOCUMENTATION

ATTACHMENT F CONTRACTOR DOCUMENTATION

> License / Accreditation Notifications Worker Documentation

ATTACHMENT G WASTE SHIPMENT RECORDS

1. INTRODUCTION

Hub Testing Laboratories, Inc. was contracted to provide monitoring, laboratory analysis and technical services to assure a safe work environment during the removal of tile and mastic in Hunking Middle School, 100 Winchester Street, and Whittier Middle School, 256 Concord Street and pipe insulation in the Tilton School, 70 Grove Street. Asbestos containing materials were removed due to damage sustained to the floor tile and accessibility of pipe insulation to school occupants. The asbestos abatement was performed by Environmental Compliance Specialists Incorporated (ECSI), #111 RET. 125, Kingston, NH. 03848. The project consisted of the removal of pipe insulation in rooms 116, 107, 109, 216, 215, 219 and wet wrapping of insulation in the Girl's room, Teachers Lounge, Lunch room and in the back of the closet of room 19 in the basement of the Tilton School. In addition floor tile and mastic in rooms 4 and 9 at the Hunking School and floor tile and mastic in rooms 7 and 9 in the Whittier School were also removed. A field laboratory was set up on the school premises in order to analyze the air samples and to provide the turn around time required by the job specifications.

SUMMARY REPORT

HUNKING MIDDLE SCHOOL

ECSI arrived on-site August 20, 2001 and began set up of containment in rooms 4 and 9. Floor tile and mastic in both the rooms and their closets and bathrooms was removed. Rooms 4 and 9 are adjacent and were combined into a single containment with a three chamber decontamination facility located adjacent to the control area in the hallway. Baseline air sampling was performed both inside and outside the containment area. The abatement workers prepared the containment by installing critical barriers at all windows and doors inside the

containment area. A three chamber decontamination unit was installed and HEPA unit connections were made and vented out window openings. The Project Monitor proceeded to inspect the containment and set-up of the work area. The layout of the work area, water and electrical connections, decontamination unit, negative air pressure and manpower were found to be in compliance with regulations and specifications. Thus being in compliance, ECSI was given authorization to commence with the abatement. ECSI began removal on August 20, 2001. The project required the removal of 328 SQ FT of floor tile and associated mastic. All materials that were removed were thoroughly wetted with amended water and then double bagged. An additional amount of water was added to every bag to insure the materials would stay wet. ECSI workers loaded the waste bags into a lined truck for transport and disposal. Once abatement was completed, a final visual inspection was performed to insure the containment was visually clean and ready for application of lock-down encapsulant. Any deficiencies were pointed out to the supervisor as the inspection progressed and were remedied at the time of inspection. When the visual inspection passed, the two rooms were treated with a lockdown encapsulant. Aggressive TEM samples were collected for final clearance. The TEM samples revealed that the asbestos fiber concentration was below clearance levels and ECSI was contacted to return and complete breakdown of the containment. ECSI returned on August 22, 2001 to complete tear down.

WHITTIER ELEMENTARY SCHOOL

ECSI arrived on-site August 21, 2001 and began set up of containment in rooms 7 and 9. The rooms are adjacent and were combined to encompass a single containment area. A personal decontamination facility was located in the hallway adjoining the classrooms and an equipment load out was constructed adjacent to

the containment directed to the outside of the building. Baseline air samples were performed both inside and outside the containment area. The abatement workers proceeded to prepare the containment by installing critical barriers at all windows and doors within the controlled area after which the decontamination unit was installed and HEPA unit connections were made at window openings. The Project Monitor proceeded to inspect the containment and set-up of the work area. The layout of the work area, water and electrical connections, decontamination unit, negative air pressure and manpower were found to be in compliance with regulations and specifications. ECSI was given authorization to commence with the abatement and began removal on August 21, 2001. Specifications required the removal of 896 SQ FT of floor tile and mastic. All waste that was removed was thoroughly wetted with amended water and then double bagged. An additional amount of water was added to every bag to insure the waste would stay wet. ECSI workers loaded the waste bags into a lined truck for transport and disposal. Once abatement was completed, a final visual inspection was performed to insure the containment was visually clean and ready for application of lock-down encapsulant. Any deficiencies were pointed out to the supervisor as the inspection progressed and were remedied at the time of inspection. When the visual inspection passed the two rooms were treated with a lockdown encapsulant. Aggressive TEM samples were collected for final clearance. The TEM samples revealed that the asbestos fiber concentration was below clearance levels and ECSI was contacted to return and complete breakdown of the containment. ECSI returned on August 24, 2001 to complete tear down.

TILTON MIDDLE SCHOOL

ECSI arrived on-site August 23, 2001 and began set up of containments. Containments consisted of a mini chamber built around the immediate area of the asbestos containing pipe insulation. Additionally, glove bags were used inside the containments. Baseline air samples were collected in each room abatement took place. The Project Monitor inspected the containment and set-up of all the work areas. The layout of the work areas, water and electrical connections and manpower were found to be in compliance with regulations. Thus being in compliance, ECSI was given the authorization to commence with the abatement. ECSI began work on August 21, 2001. Specifications required the removal of 81 LF of pipe insulation. All materials that were removed were thoroughly wetted with amended water and then double bagged. An additional amount of water was added to every bag to insure the materials would stay wet. ECSI workers loaded the waste bags into a lined truck for transport and disposal. Once abatement was completed, a final visual inspection was performed to insure the containment was visual clean and ready for application of lock-down encapsulant. Any deficiencies were pointed out to the supervisor as the inspection progressed and were remedied at the time of inspection. When the final visual inspection passed the containment area was treated with a lockdown encapsulant. Aggressive PCM samples were collected for final clearance. The samples revealed that the fiber concentration was below clearance levels and ECSI was contacted to return and complete breakdown of the containment. ECSI returned on August 24, 2001 to complete tear down.

3. SAMPLING PROCEDURES

All air asbestos monitoring and testing was performed under the guidelines specified by the U.S. Public Health Service as specified in USPH/NIOSH Membrane Filter Method for Evaluating Airborne Asbestos Fibers. This procedure is used for area monitoring. The general procedure calls for drawing a known volume of air through a membrane filter using a calibrated sampling pump. After the duration, flow rates were re-checked to make sure that the loading of the filter had not restricted sample flow. The filter holders were capped, wiped, sealed with tape and labeled. Pump identification, sample location, and calibration data are included in Attachment A.

LABORATORY ANALYSIS

The air samples were examined using Phase Contrast Microscopy (PCM) per the National Institute for Occupational Safety and Health (NIOSH), Asbestos and Other Fibers Method 7400.

This technique enhances the contrast of the optical system allowing detection and measurement of small particles. Polarized Light Methods, used for analysis of asbestiform, however are not simultaneously compatible with PCM methods, and hence, only morphological properties can be used to identify particles with phase contrast illumination. Accordingly, analysis done by this method can eliminate some materials from being "suspect" but will not permit others, usually smaller, particles from being removed from this "suspect" category.

As mentioned above, all air samples were examined using the prescribed NIOSH techniques. More specifically it consists of dissolving the filter using acetone vapor to render it absolutely transparent, and then counting the fibers in a carefully dictated fashion using PCM. This procedure defines a fiber as any particle greater than 0.005 mm (5 microns) in length and having an aspect ratio (length to width) of three to one or greater.

This procedure includes all fibers regardless of their nature. In accordance with the AHERA regulations samples in work areas where more then 160 SF and 260 LF of material was removed, clearance samples were collected and analyzed in accordance with the requirements for Transmission Electron Microscopy (TEM) as prescribed by the Appendix A to Subpart E of 40 CFR Part 763.

5. STEPS TAKEN TO PROTECT OCCUPANTS

School employees and trades persons working in the building were protected from exposure to asbestos fibers by the following methods.

5.1 BARRIER CONSTRUCTION

Construction of critical barriers separating the work areas from other inhabited areas. The barriers were constructed of one layer of six mil thickness of polyethylene plastic sheeting on all widow and door openings to the work area and subsequently covered with two layers of 6-mil. polyethylene plastic sheeting on all walls floor to ceiling. In the case of the use of mini containments, barriers consisted of a single layer of 6-min poly built as a tent to completely surround the work area. Additionally abatement took place inside glove bags which were sealed around the asbestos containing material.

5.2 CONTINUOUS AIR MONITORING

Air monitoring was performed on the outside of the barriers on a daily basis to detect fiber penetration in the event of a containment failure. Analytical results can be found in Attachment A.

5.3 WORKING IN WET CONDITIONS

At all times, amended water was used to wet the asbestos containing materials inside the work area to minimize airborne fiber level concentrations.

5.4 FINAL INSPECTION

The work areas were inspected for visible residue after final cleaning of all surfaces. When residue was encountered the contractor re-cleaned until the hygienist was satisfied that the area was clean and complied with regulatory agencies.

6. STEPS TAKEN TO PROTECT THE ENVIRONMENT

The following steps were taken to prevent the release of airborne asbestos fibers outside the building and to ensure proper disposal of asbestos waste:

Construction of a plastic sheet barrier, reinforced at window and door openings, and two layers of 6-mil plastic sheeting covered the walls and critical barriers. This allowed for removal to be performed without contaminating the environment beyond the barriers.

The work area was maintained as a negative pressure environment by means of HEPA (High Efficiency Particular Air) filtration units exhausted to the outside. Removal of asbestos and contaminated items in 6-mil labeled disposable bags (double bagged), placed in a waste trailer and removed from the site to an approved landfill.

In the case of the use of mini containments, barriers consisted of a single layer of 6-min poly built as a tent to completely surround the work area.

Additionally abatement took place inside glove bags which were sealed around the asbestos containing material.

7. FINAL LEVEL OF ASBESTOS AFTER CLEANING

An inspection was made upon completion of the removal process.

Wherever visible suspect debris was found, it was removed. At the time of final inspection, no accumulation of visible debris was found in the work area. Air monitoring was conducted throughout the project.

8. WASTE DISPOSAL DOCUMENTATION

The "Waste Shipment Record" must be provided to the Owner by the Contractor within 45 days of the completion of the project as stated in 40 CFR Part 61. The documentation is pending at this time. When it is made available to the Owner by the Contractor it will be maintained with all documentation for this project. This documentation is an important component of record keeping.

Attachment A Air Monitoring Results





Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Hunking School, floor tile removal, rooms 7 and 4

Contractor:

ECSI

Date:

8/20/01

Rotometer ID: 12 - L 2 10-10 10 10 10

Pump 07 24 29 1U-10 79 2 Number Pre-10 10 10 10 10 calibration 12 Post-10 10 10 10 0 10 10 calibration

Sample ID	Location	Pump #	Start Time	Stop Time	Min.	Vol.	Fiber Count	F/CC
131	Hall	29	8:12	10:1分	122	1220	10	.003
132	1200m 4	17-10	8:14	10:15	121	1210	37	,02
133	1200m 7	2.	8:16	10:15	119	1190	30	.01
A4	Hall	10:40	29	3:∞	260	ည္မသ	9	.002
AS	Stage.	10:45		3:00	255	2550	8	.002
46	Doon Hall	10:47		3:00	253	\$ 530	10	.002
A7	200m 4	10:49	14-10	3100	\$51	2510	5	+20009
AB	1200m 7	10:50	2	3:00	250	2500	フ	(00)
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Technician: from

Date: 8/20/01



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Whittier School, floor tile removal, rooms 7 and 9

Contractor:

ECSI

Date:

8/21/01

	Bascli	nc		Abato	ment	Rote	ometer ID:	2-4	
Pump Number	29	λ	17-10		2	14-10	07		
Pre- calibration	9.4	9.4	9.4	9.4	9.4	9.4	9.4		
Post- calibration	9.4	9.4	9.4	9.4	9,4	9.4	9,4		

Sample ID	Location	Pump #	Start Time	Stop Time	Min.	Vol.	Fiber Count	F/CC
BI	Hall	29	3:10	11:00	170	1 593	20	· 006
B2	200m 7	2	8:03	11100	167	1570	14	1004
B 3	Room 9	10-10	8:05	11100	165	1551	11	. ၁၁૩
^ 1	1-1011	29	1:03	2:30	87	318	9	130S
A2	Room 7	7	1:01	2:30	89	837	13	7007
A3	Room 9	14-10	1,00	2:30	90	346	12	,007
A4	Drcon	07	1:04	2:30	86	808	6	, 003

Technician: Date: 8/21/01



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Whittier School, floor tile removal, rooms 7 and 9

Contractor:

ECSI

Date:

8/22/01

Rotometer ID: U-L Pump 07 14-10 07 Z 1V-10 29 29 Number Pre-9.4 9,4 9.4 9.4 9.4 9.4 9.4 9.4 calibration Post-9.4 9.4 9.4 9.4 9,4 9.4 9.4 9.4 calibration

Sample ID	Location	Pump #	Start Time	Stop Time	Min.	Vol.	Fiber Count	F/CC
A5	Hall	٦9	7:28	11:30	338	3 237	16	.003
A6	200m 7	3	7:30	11: 35	240	2256	17	·03
AT	Room 9	10-10	7:31	11:00	209	1965	18	·004
A8	Decon	07	7:29	11:00	211	1933	15	•००५
Aq	Hall	29	11:30	1:30	120	1128	14	.006
A10	Room 7	2	11:00	1:30	150	1410	Dest	oyed
A 1)	Room 9	10-10	11:00	1:30	150	1410	Dest	25 ed
112	Decon	07	11:30	1:30	120	11 ४ छ	15	,ಖ6
	- •					<u>.</u>	. <u> </u>	

Technician:

Date: 8/22/01



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Tilton School, Pipe insulation removal and encapsulation

(Rms. 116, 107, 109, 209, 215, 216, girls rm, teachers lounge, closet behind 119)

Contractor:

ECSI

Date:

8 3/23/01_

Rotometer ID: 2-4 14-41 6-9 19 Pump 29 2 ころり 26 Number 9.4 9.4 Pre-9.4 9.4 9.4 9.4 9.4 calibration 9.4 9.4 Post-9.4 9.4 9.4 9.4 9.4 calibration

Sample ID	Location		Pump #	Start Time	Stop Time	Min.	Vol.	Fiber Count	F/CC
B-1	Rm	109	14-10	4:20	1922	120	1128	38	.016
B-2	Rm	107	26	9:04	11:00	116	10404	131	1013
B-3	2m	116	29	9205	11:03	118	1109.	14	၊သန
B-4	Hall	116	1 2	9:10	11:07	ハフ	1099,	8 6	,003
B-5	2m	214	19	9:12	11:10	118	1124.	6	,003
B-6			10-4	ļ .	11:10	119	1104,2	1	. 20)
	12m_	209	6-9	9:19	1112	117	109.	3 9	ر عصل
B-7	2m	215		<u> </u>					
					-		1		

Technician:

Date: 9/23/01

Attachment B Daily Monitoring Checklist

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

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Report For:

Haverhill School Dept.

Project:

Hunking School, floor tile removal, room 7 and 4

Contractor:

54

Date:

ECSI 8/20/01

			Adequate	Deficient
l.	Contractor's Personnel	#		
2.	Signs:		- \ \ \ \ \	
3.	Barriers Condition:		_ <u>_</u>	
1 .	Decontamination Facility Condition: Housekeeping Inside and Outside:	•	<u> </u>	·
5. ნ.	Entry and Exit Procedures Followed:			
5. 7.	HEPA Exhaust Operating:		_ X	
%. 8.	Work Procedures Followed:	. ii (2	\$	
9.	Respiratory Protection Used:	Type Half		
10.	Differential Pressure:			
	a contact Air Compling Penarts			ceived
11.	Copy of Contractor's Air Sampling Reports Copy of Contractor's Daily Logs		IUDV Re	ceived
12.	Copy of Contractor's Daily Dogs		ř	Not Present
13.	Signs of Heat Stress		Present	Not Present
14.	Unusual occurrences			
	Action taken			
		Li Clina Tama		
	Daily Air Sampling Results: See Daily A	Air Sampling Form		
	Number of bags removed from site:			
		1		61/1m
	Technician:	Log In: <u>දි</u> : බට	Log Out:	0.70
		•		



Environmental Testing Service

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

p	enort	For

Haverhill School Dept.

Project:

Whittier School, floor tile removal, room 7 and 9

Contractor:

ECSI

Date:

8/21/01

			Adequate	Deficient
Cont	ractor's Personnel	#		·
Sign	s:			
Вап	iers			X
	ontamination Facility Condition:			
Hou:	sekeeping Inside and Outside:			X
	y and Exit Procedures Followed:			
	A Exhaust Operating:			- }
_	k Procedures Followed:	_ , , . (1		-4
	iratory Protection Used:	Type Half		
Diffe	erential Pressure:			
Con	y of Contractor's Air Sampling Reports		No. 1	ceived
	y of Contractor's Daily Logs		Reco	ceived
Cop.	y of Contractor 3 Daily Dogs			
Sign	s of Heat Stress		Present	Not Present
Hnu	sual occurrences			
Onu				
	on taken Building Contain			
	on taken Building Contain			
	on taken Building Contain			
Acti				
Acti				
Acti	y Air Sampling Results: See Daily			
Acti				
Acti	y Air Sampling Results: See Daily	Air Sampling Form		



Environmental Testing Service

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

Report For:	Haverhill School Dept.	

Project:

Whittier School, floor tile removal, room 7 and 9

Contractor:

ECSI

Date:

3122101

		Adequate	Deficient
Contractor's Personnel	#		 -
Signs:			<u> </u>
Barriers		\(\frac{}\)	
Decontamination Facility Condition:			
Housekeeping Inside and Outside:	•	- ^	
Entry and Exit Procedures Followed:		-) -	
HEPA Exhaust Operating:			
Work Procedures Followed:	Type Half	<u></u>	
Respiratory Protection Used:	Type Fig 11	X	
Differential Pressure:			
a contract the Compline Deports		Not Rec	ceived
Copy of Contractor's Air Sampling Reports		Not Rec	ceived
Copy of Contractor's Daily Logs	•		
Signs of Heat Stress		Present C	Not Present
Unusual occurrences			
Action taken			
Daily Air Sampling Results: See Daily A	ir Sampling Form	-	
The state of the s			
Number of bags removed from site:			
/D/N	Log In: 7:20	'n Log Out'	3:00
Technician:	1708 III\/-\V(



Environmental Testing Service

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

Report For: Haverhill School Dept.

Project:

Whittier School, floor tile removal, room 7 and 9

Contractor:

ECSI

Date:

3/23/01

		Adequate	Deficient
Contractor's Personnel	#		
Signs:		<u> </u>	
Barriers			
Decontamination Facility Condition:			
Housekeeping Inside and Outside:	•		
Entry and Exit Procedures Followed:		\}-	
HEPA Exhaust Operating: Work Procedures Followed:		\times	
Respiratory Protection Used:	Type Half		
Differential Pressure:	~ JP		
Differential Fressure.			
Copy of Contractor's Air Sampling Reports			ceived
Copy of Contractor's Daily Logs		100} Re	ceived
			Not Prese
Signs of Heat Stress		Present	Not Prese
Unusual occurrences			
Action taken Cleavence			
Daily Air Sampling Results: See Daily Air	r Sampling Form		
Number of bags removed from site:			
1 00			
Technician:	Log In: 8. ∞	Log Out:	\\$ [3 0

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REPORT FOR:

Consulting and Testing Engineers

95 Beaver Street — Waltham, Mass. 02154 — (617) 893-8330

	PROJECT:	7.Uh; # 17.3	<u> </u>	
	CONTRACTOR: ,	8/24/5) 1	
	2 -	Checklist	Adequate	Deficient
1. 2. 3. 4. 5. 6. 7. 8.	Contractor's Personnel: Signs: Barriers: DECON Facility Condition Housekeeping In/Out: Entry/Exit Procedures F HEPA Exhaust Operating: Work Procedures Followe Respiratory Protection Differential Pressure:	n: ollowed: d: Used:	Paparts:	Received
11. 12.	Copy of Contractor's Ai Copy of Contractor's Da	r Sampling aily Logs:	Reports.	Received
13.	Signs of Heat Stress:		Present	Not Present
14.	Unusual Occurences: TV	ude wak	CHOCK	
15.	Action Taken:			· · · · · · · · · · · · · · · · · · ·
16.	Hub Testing's Air Moni	toring Tes		Fibers/cc
	Sample I.D.	Locatio	, _ , , _ , , , , , , , , , , , , , , ,	
	Technician:			0-Log Out: 3-100
	The state of the s		٠.	



Environmental Testing Service

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

PRE-ABATEMENT INSPECTION FORM

WORK AREA I.D.: HUNKING WORK AREA DESCRIPTION: Two odieunt one another reach has a smaller other norm	200MS - 7+4
DEMOLITION REQUIRED (describe) (*):	
MATERIAL TO BE ABATED (describe, give quantities): Floor tile	
ESTIMATED DAYS REQUIRED FOR ABATEMENT:	
CRITICAL BARRIERS IN PLACE:	١,
Windows X Doors Y HVAC Vents K Electrical Sw Electrical Outlets X Other	itches
ALL MOVABLE EQUIPMENT OUT OF AREA ALL NON MOVABLE EQUIPMENT WRAPPED (*) YES X X	NO
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD WATER X TWO CHAMBER EDF WITH WATER IN WASH CHAMBER IF OTHER DESCRIBE	
TYPE OF RESPIRATORY PROTECTION TO BE USED: Half- NUMBER OF NEGATIVE AIR MACHINES OPERATING (*): 2 PRESSURE READING:	
	TE 8/20/01
PIH'S SIGNATURE	
CONTRACTOR'S SIGNATURE: DA	TE
(*) - Indicate on sketch	



Environmental Testing Service

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

PRE-ABATEMENT INSPECTION FORM

WORK AREA I.D.: Whitticy 22ms 7/9 WORK AREA DESCRIPTION:	Two class rooms
DEMOLITION REQUIRED (describe) (*):	
MATERIAL TO BE ABATED (describe, give quantities): Floor tile and mastic	
ESTIMATED DAYS REQUIRED FOR ABATEMENT: 3	
CRITICAL BARRIERS IN PLACE: Windows X Doors X HVAC Vents Elect	rical Switches
Electrical Outlets X Other DESE	NO
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD WATER TWO CHAMBER EDF WITH WATER IN WASH CHAMBER IF OTHER DESCRIBE	
TYPE OF RESPIRATORY PROTECTION TO BE USED: Half NUMBER OF NEGATIVE AIR MACHINES OPERATING (*): 2 PRESSURE READING:	
CONTAINMENT SMOKE TESTED: PIH'S SIGNATURE:	DATE 8/11/01
CONTRACTOR'S SIGNATURE:	DATE

(*) - Indicate on sketch



Environmental Testing Service

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

PRE-ABATEMENT INSPECTION FORM

WORK AREA I.D.: Room 109 WORK AREA DESCRIPTION A chartement areas - one vertile nicer one how	ON: <u>Class Room</u>
DEMOLITION REQUIRED (desçribe) (*):	
MATERIAL TO BE ABATED (describe, give quantities):	
ESTIMATED DAYS REQUIRED FOR ABATEMENT: \(\begin{align*}\limits \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
CRITICAL BARRIERS IN PLACE: Windows Doors HVAC Vents	Electrical Switches
Windows Doors HVAC verits Electrical Outlets X Other YES	NO
ALL MOVABLE EQUIPMENT OUT OF AREA ALL NON MOVABLE EQUIPMENT WRAPPED (*)	
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD WATER TWO CHAMBER EDF WITH WATER IN WASH CHAMBER IF OTHER DESCRIBE MIN CONT. COLOR	')
TYPE OF RESPIRATORY PROTECTION TO BE USED: Half NUMBER OF NEGATIVE AIR MACHINES OPERATING (*): 1 PRESSURE READING:	
CONTAINMENT SMOKE TESTED!	DATE 8/23/01
PIH'S SIGNATURE:	DATE
CONTRACTOR'S SIGNATURE:	

(*) - Indicate on sketch



Environmental Testing Service

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PRE-ABATEMENT INSPECTION FORM

WORK AREA I.D.: Room 107 WORK AREA DESC 3 contain months - one niser one borizated pip	CRIPTION: <u>Class</u> Koom
DEMOLITION REQUIRED (describe) (*):	
MATERIAL TO BE ABATED (describe, give quantities): T_{5} .	
ESTIMATED DAYS REQUIRED FOR ABATEMENT: \(\begin{align*}\limits & \limits & \	
CRITICAL BARRIERS IN PLACE:	- Flactrical Switches X
Windows Doors HVAC Vents Electrical Outlets X Other	Electrical officer
Electrical Oddiets	YES NO
ALL MOVABLE EQUIPMENT OUT OF AREA ——————————————————————————————————	*
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD WATE TWO CHAMBER EDF WITH WATER IN WASH CHAMB IF OTHER DESCRIBE	RER
TYPE OF RESPIRATORY PROTECTION TO BE USED: Ha	14
PRESSURE READING:CONTAINMENT SMOKE TESTED:	DATE 9/23/01
PIH'S SIGNATURE:	DATE
CONTRACTOR'S SIGNATURE:	
(*) - Indicate on sketch	



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PRE-ABATEMENT INSPECTION FORM

JORKAREALD (Room) Reading 16 WORK AREA 2 Containments - one riser in courses on		
EMOLITION REQUIRED (describe) (*):		
MATERIAL TO BE ABATED (describe, give quantities):		
ESTIMATED DAYS REQUIRED FOR ABATEMENT:\		
CRITICAL BARRIERS IN PLACE: Windows _ ズ Doors HVAC Vents Electrical Outlets _ × Other		_Electrical Switches
	VEC	140
ALL MOVABLE EQUIPMENT OUT OF AREA ALL NON MOVABLE EQUIPMENT WRAPPED (*)	X	
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD W TWO CHAMBER EDF WITH WATER IN WASH CH. IF OTHER DESCRIBE Min (6)	9)	
TYPE OF RESPIRATORY PROTECTION TO BE USED:	tal t	
CONTAINMENT SMOKE TESTED:		DATE_3/23/2
PIH'S SIGNATURE:	<u></u>	DATE



Environmental Testing Service

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PRE-ABATEMENT INSPECTION FORM

WORK AREA I.D. 200 109 WORK AREA DESCRIPTION L contenancets - une with pipe one hopizated pipe	ckss Room
DEMOLITION REQUIRED (describe) (*):	
MATERIAL TO BE ABATED (describe, give quantities):	
ESTIMATED DAYS REQUIRED FOR ABATEMENT:	
CRITICAL BARRIERS IN PLACE: WindowsX Doors HVAC Vents Ele Electrical OutletsX Other YES	ctrical Switches X
ALL MOVABLE EQUIPMENT OUT OF AREA ALL NON MOVABLE EQUIPMENT WRAPPED (*)	
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD WATER TWO CHAMBER EDF WITH WATER IN WASH CHAMBER IF OTHER DESCRIBE	
TYPE OF RESPIRATORY PROTECTION TO BE USED: Half NUMBER OF NEGATIVE AIR MACHINES OPERATING (*): 1 PRESSURE READING:	
PIH'S SIGNATURE:	DATE
CONTRACTOR'S SIGNATURE:	DATE

(*) - Indicate on sketch



Environmental Testing Service

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PRE-ABATEMENT INSPECTION FORM

WORK AREA I.D.: 200m 215 WORK AREA D	ESCRIPTION:	cks Ram
2 contenments one vertile procon by	1.50,01 1/2	
DEMOLITION REQUIRED (describe) (*):		
MATERIAL TO BE ABATED (describe, give quantities):		
ESTIMATED DAYS REQUIRED FOR ABATEMENT:		
CRITICAL BARRIERS IN PLACE: Windows X Doors HVAC Vents Electrical Outlets Other	Elec	strical Switches
Electrical Outlets Other	YES	NO
ALL MOVABLE EQUIPMENT OUT OF AREA ALL NON MOVABLE EQUIPMENT WRAPPED (*)	X	
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD WA TWO CHAMBER EDF WITH WATER IN WASH CHA IF OTHER DESCRIBE	,)	
TYPE OF RESPIRATORY PROTECTION TO BE USED:	1-16	
CONTAINMENT SMOKE TESTED:	•	DATE _8/24 /OL
PIH'S SIGNATURE:		DATE
CONTRACTOR'S SIGNATURE:		
(*) - Indicate on sketch		



Environmental Testing Service

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

PRE-ABATEMENT INSPECTION FORM

WORK AREA I.D.: 2001 214 WORK AREA DESCRIPTION 2 contenments - one Vertile one homestal pipe	N: cless Koom
DEMOLITION REQUIRED (describe) (*):	
MATERIAL TO BE ABATED (describe, give quantities):	
ESTIMATED DAYS REQUIRED FOR ABATEMENT: 1	
CRITICAL BARRIERS IN PLACE:	trateiant Switches
CRITICAL BARRIERS IN PLACE: Windows Doors HVAC Vents Electrical Outlets Other YES	NO NO
ALL MOVABLE EQUIPMENT OUT OF AREA ALL NON MOVABLE EQUIPMENT WRAPPED (*)	
DECONTAMINATION FACILITIES (*): FULL THREE CHAMBER PDF WITH HOT/COLD WATER TWO CHAMBER EDF WITH WATER IN WASH CHAMBER IF OTHER DESCRIBE	
TYPE OF RESPIRATORY PROTECTION TO BE USED: Hall NUMBER OF NEGATIVE AIR MACHINES OPERATING (*): \(\) PRESSURE READING: \(\)	
CONTAINMENT SMOKE TESTED:	DATE 9/24/
PIH'S SIGNATURE	DATE
CONTRACTOR'S SIGNATURE:	
(*) - Indicate on sketch	

Attachment D Final Clearance Inspection



Environmental Testing Service

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

FINAL CLEARANCE FORM

WORK AREA I.D. Hunking	School	Rooms	7,4		
CONTRACTOR ECST					
VISIBLE DEBRIS NOTED ON:		YE	ES	NO	
1. FLOORS 2. WALLS 3. CEILINGS 4. PIPES 5. ELBOW FITTINGS 6. DUCTS 7. HORIZONTAL SURFACES 8. EQUIPMENT				`	- - - -
LOCKDOWN ENCAPSULANT A SAMPLES COLLECTED USING SAMPLE VOLUMES ADEQUAT DATE SAMPLLIMG PUMPS CA	AGGRESSIVI E FOR DETE	E METHODS _ CTION LIMIT _			
FINAL AIR SAMPLE RESULTS					-
FINAL AIR SAMPLES - PASS FINAL AIR SAMPLES - FAIL					- -
CONTRACTOR NOTIFIED			. ,		
MONITOR'S SIGNATURE		Sull	D.	ате <u>8/20</u>	10



Service Environmental Testing

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

Report For:

Haverhill School Department

Project:

Hunking School, floor tile removal, rooms 7 and 4

Contractor:

ECSI

Date:

8/20101

Rotometer ID: 2-4 E-25 13-15 D-15 A-10 C-25 J Pump 14-10 29 24 07 Number 9.3 8.3 8.3 8.3. 8.3 Pre-8.3 33 8.3 calibration 3.3 623 9.3 8.5 Post-3.3 8.3 8.3 8.3 calibration

Sample ID	Location	Pump #	Start Time	Stop Time	Min.	Vol.	Fiber Count	F/CC
<u> </u>	in cont	לס	3:30	6:20	160	1328		
CZ	in cont	24	3:30	6:30	160	1328		
<u> </u>	in cont	11-10	3:30	6:20	160	1328	<u> </u>	
C4	1 -201	29	3:30	6:20	160	1328	<u> </u>	
<u> </u>	in cont	2	3:30	6:40	160	1328		
<u> </u>	04	D-15	3:33	6:23	160	1328		
<u> </u>	at	C-25	3:34	6:24	160	1328		
<u> </u>	Out_	13-15	3:36	6:26	160	1328		_
69	at		3:38	6:28	160	1329		
	aut -	[2¢		0 6:30	-1	1326	ን	

C10

Date: 8/20) 01

Rec'd Pam Lavor 8/20/01 C12-Lab HMC

Serving our Clients since 1941 •

SciLab Job #: 501081444

Client Name: HUB TESTING

Table I

Summary of Transmission Electron Microscopy (TEM) Results for Asbestos (air)

Haverhill School Department; Hunking School, Floor Tile Removal, Rooms 7 & 4

		TO THE STATE OF TH	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		•			Structure	ture	Structure	urc	
		Air	Area	* Analytical	Asbestos Structures Detected	structures	Detected	Density	sity	Concentration	ration	Type
4° 1:00	Client	Dilution Filtered Analyzed	d Analyzed	Sensitivity)	(Microns)		(struc/sq. mm.)	l. mm.)	ပ	c air)	oę.
Sample #	Sample #	Factor (liters	(liters) (sq. mm.)	_	0.5-5.0	>5.0	Total	>5.0	Total	>5.0	Total	Aspestos
01 inside	CI	1328	.090	0.0048	0.0	0.0	0.0	<16.6	<16.6	<0.0048	<0.0048	OSN
	In Containment							,	\ \ -		0700	CON
02 inside	23	1328	090	0.0048	0.0	0.0	0.0	<16.6	<16.6	<0.0048	<0.0048	Gen
	In Containment						•••	,	ì	0,000	07000	Con
03 inside	ខ	1328	990.	0.0048	0.0	0.0	0.0	<16.6	<16.6	<0.0048	<0.0048	den.
	In Containment					,	•	``	\ \ \ \	0,00	970007	
04 inside	25	1328	3 .060	0.0048	0.0	0.0	0.0	<10.0	<10.0	<0.0040	<0.0040	
	In Containment							,	`	. 00	05000	Colo
05 inside	S	1328	3 .060	0.0050	0.0	0.0	0.0	<16.6	<16.0	VCUVUS VCUVUS	00,000	der.
	In Containment											
**90	SC	1328	~									
	Out											
***0	CJ	1328	80									
	Out											
**80	80	1328	&									
	Out											
**60	ව	1328	∞									
	Out											
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	Out											
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12**	C12											
	Box Blank											

* concentration represented by the detection of 1 structure ** not analyzed

Reviewed By:

; Analyzed By:___

Sandhya Gunasekara

,

Mean Total Structure Density For Inside Samples: 0 structures/sq. mm.

Date: 8/21/01

NSD: No Asbestos Structures Detected

NVLAP#: 102079-0

sample area analyzed

385 mm2

Client Name: HUB TESTING

Job #: 501081444

Lab Sample #: 01

Client Sample #: C1

Received: 08/20/2001

20:00:00

Date Analyzed: 08/21/2001 Scope #: AB Volume (liters): 1 328.0

Filter Type / Filter Area: MCE

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by:

Khukan

Sandhya Gunasekara

Location	Grid Opening	Fiber	Length μΜ	Width μΜ	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
B6-3/6C	1	NSD							H	
B6-3/6E	2	NSD _.			•			ļ		
B6-3/6F	3	NSD								
B7-4/6C	4	NSD								ļ
B7-4/6E	5 6	NSD NSD	1							Ì
B7-4/6F	°	מפויו				1				
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NSD: No Asbestos Structures Detected

		Structure Density		Grid Evaluation
Total Grid Openings:	6	(str/mm2)	(str/cc air)	☐ Grid Openings Covered > 50%
Chrysotile Asbestos Structures:		<16.6	< 0.0048	☐ Intact Grid Opening > 50%
Amphibole Asbestos Structures:		<16.6	< 0.0048	
Asbestos Structures >=5 microns:		<16.6	<0.0048	✓ Undissolved Filter < 10%✓ Folded Replica < 50%
Total Non-Asbestos Structures:			0.0040	Filter Loading < 10%
Total Asbestos Structures:	0	<16.6	<0.0048	Particulate Even
Analytical Sensitivity:		16.6	0.0048	ZZ 1 atticulate Even

sample area analyzed

Client Name: HUB TESTING

Job #: 501081444

Lab Sample #: 02

Client Sample #: C2

Received: 08/20/2001 Date Analyzed: 08/21/2001

Scope #: AB

Volume (liters): 1 328.0

Filter Type / Filter Area: MCE 385 mm2

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by:

Sandhya Gunasekara

20:00:00

Location	Grid Opening	Fiber	Length	Width µM	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
B8-5/6C B8-5/6E	1 2	NSD NSD								
B8-5/6F	3	NSD							 	
B9-4/4B	4	NSD						1		į į
B9-4/4C	5	NSD	i i							
B9-4/4E	6	NSD		ĺ			:			1
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NSD: No Asbestos Structures Detected

Total Grid Openings: Chrysotile Asbestos Structures: Amphibole Asbestos Structures: Asbestos Structures >= 5 microns: Total Non-Asbestos Structures:	0	Structure Density (str/mm2) <16.6 <16.6 <16.6	Concentration (str/cc air) <0.0048 <0.0048 <0.0048	Grid Evaluation ☐ Grid Openings Covered > 50% ☐ Intact Grid Opening > 50% ☐ Undissolved Filter < 10% ☐ Folded Replica < 50%
Total Non-Asbestos Structures: Total Asbestos Structures: Analytical Sensitivity:	0	<16.6 16.6	<0.0048 0.0048	☐ Filter Loading < 10% ☐ Particulate Even

sample area analyzed

385 mm2

Client Name: HUB TESTING

Job #: 501081444

Lab Sample #: 03 Client Sample #: C3

Received: 08/20/2001

Date Analyzed: 08/21/2001

Scope #: AB

Volume (liters): 1 328.0

Filter Type / Filter Area: MCE

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by:

20:00:00

Sandhya Gunasekara

Location	Grid Opening	Fiber	Length µM	Width μΜ	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
B10-4/6C	1	NSD								
B10-4/6E	2 3	NSD NSD			•			ļ		
B10-4/6F	4	NSD							<u> </u>	}
C6-4/6C C6-4/6E	5	NSD		1				1		
C6-4/6F	6	NSD	4							
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NSD: No Asbestos Structures Detected

Total Grid Openings: Chrysotile Asbestos Structures:	0	Structure Density (str/mm2) <16.6 <16.6	Concentration (str/cc air) <0.0048 <0.0048	Grid Evaluation ☐ Grid Openings Covered > 50% ☐ Intact Grid Opening > 50%
Amphibole Asbestos Structures: Asbestos Structures >= 5 microns: Total Non-Asbestos Structures: Total Asbestos Structures: Analytical Sensitivity:	0	<16.6 <16.6 16.6	<0.0048 <0.0048 0.0048	✓ Undissolved Filter < 10%✓ Folded Replica < 50%✓ Filter Loading < 10%✓ Particulate Even

20:00:00

sample area analyzed

385 mm2

Client Name: HUB TESTING

Job#: 501081444

Lab Sample #: 04

Client Sample #: C4

Received: 08/20/2001

Date Analyzed: 08/21/2001

Scope #: AB

Volume (liters): 1 328.0

Filter Type / Filter Area: MCE

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by: ___

Sandhya Gunasekara

Location	Grid Opening	Fiber	Length	Width μΜ	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
C7-4/6C C7-4/6E C7-4/6F C8-4/6C C8-4/6E C8-4/6F	1 2 3 4 5	NSD NSD NSD NSD NSD NSD	Α.							
		-								

NSD: No Asbestos Structures Detected

Comments

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		Structure Density		Grid Evaluation
Total Grid Openings:	6	(str/mm2)	(str/cc air)	☐ Grid Openings Covered > 50%
Chrysotile Asbestos Structures:		<16.6	<0.0048	☐ Intact Grid Opening > 50%
Amphibole Asbestos Structures:		<16.6	<0.0048	✓ Intact Grid Opening > 30 % ✓ Undissolved Filter < 10%
Asbestos Structures >= 5 microns: Total Non-Asbestos Structures:		<16.6	<0.0048	▼ Folded Replica < 50%
Total Asbestos Structures:	0	<16.6	<0.0048	 ⊠ Filter Loading < 10% ⊠ Particulate Even
Analytical Sensitivity:		16.6	0.0048	M Fatticulate Lveli

sample area analyzed

Client Name: HUB TESTING

<u>Job #:</u> 501081444

Lab Sample #: 05

Client Sample #: C5

Received: 08/20/2001

08/20/2001 20:00:00

<u>Date Analyzed:</u> 08/21/2001 <u>Scope #:</u> AB Volume (liters): 1 328.0

Filter Type / Filter Area: MCE 385 mm2

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by:

Mynu Cunasakan

Sandhya Gunasekara

*	Grid Opening	Fiber	Length µM	Width μΜ	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
Location	Opening	FIUCI	μМ	μМ	2,00,,,	ļ			11	
C9-4/6C	1	NSD							-	
C9-4/6E	2	NSD.			•				-	1
C9-4/6F	3	N\$D						1		
C10-4/6C	4	NSD					i			
C10-4/6E	5	NSD	1					Ì		
C10-4/6F	6	N\$D	^							
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NSD: No Asbestos Structures Detected

Total Grid Openings: Chrysotile Asbestos Structures:	6 0	Structure Density (str/mm2) <16.6	Concentration (str/cc air) <0.0050	Grid Evaluation ☐ Grid Openings Covered > 50% ☐ Intact Grid Opening > 50%
Amphibole Asbestos Structures: Asbestos Structures >= 5 microns:		<16.6 <16.6	<0.0050 <0.0050	 ✓ Intact Grid Opening > 50 % ✓ Undissolved Filter < 10% ✓ Folded Replica < 50%
Total Non-Asbestos Structures: Total Asbestos Structures: Analytical Sensitivity:	0	<16.6 16.6	<0.0050 0.0050	 ⊠ Filter Loading < 10% ⊠ Particulate Even



Environmental Testing Service

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

FINAL CLEARANCE FORM

WORK AREA I.D. Whittier Room	15 / /7	<u> </u>
CONTRACTOR ECSI		<u></u>
VISIBLE DEBRIS NOTED ON:	YES	ИО
1. FLOORS 2. WALLS 3. CEILINGS 4. PIPES 5. ELBOW FITTINGS 6. DUCTS 7. HORIZONTAL SURFACES 8. EQUIPMENT		X X X X X X X
LOCKDOWN ENCAPSULANT APPLIED	EMETHODS Yes	
FINAL AIR SAMPLE RESULTS		
FINAL AIR SAMPLES - PASS X FINAL AIR SAMPLES - FAIL		
MONITOR'S SIGNATURE	//	DATE 8/24/0



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Whittier School, floor tile removal, rooms 7 and 9

Contractor:

ECSI

Date:

8/23/01_

12-4 Rotometer ID: 24 01-10 01-10 E-25 07 7 Pump 13-15 H-10 C-25 0-15 Number 9.4 9.4 9.4 7.3 9.4 Pre-7.3 7.3 7.3 7.3 calibration 9.4 9.4 9.4 9.4 9.4 7.3 7.3 Post-フ・3 7.3 7.3 calibration

Sample ID	Location	Pump #	Start Time	Stop Time	Min.	Vol.	Fiber Count	F/CC
<u> </u>	in	14-10	8:30	11:30	180			ļ
C 2	, N	13-15	a: 30	11:30	180	ļ		
C 3	in			11:30	180			
C4	ìn	E-25	8:30	11:30	180	\		
ر ر ر	in	c - 25	8130	11:30	180			_
C 6	04	2	g:50	11:30	160		<u> </u>	
67	out	07	8:50	11:30	180			
CB	out	24	3:50	11:30	160			
C9	007	01 - 1Y	8:50	11.30	160			
<u>-1</u>	1 803	21-1		11:30	160			

C10 out

Technician:

Date: 8/23/0/

SciLab Job #: 501081538

[] []

Client Name: HUB TESTING

Table I

Summary of Transmission Electron Microscopy (TEM) Results for Asbestos (air)

	Sn	Summary of Transmission Electron Paris	ransm	SSION FIG	יייייייייייייייייייייייייייייייייייייי	747-1445	Cohoo	<u>-</u>						
				Haverhil	Haverhill School Dept.; William School	i.; wnu	מחוזה ומ	•	Structure	ure	Structure	er.	Time	
			Air	Area	* Analytical	Asbestos Structures Detected	iructures	Detected	Density (etruc/sq. mm.)	ity mm.)	Concentration (struc/cc air)	ation air)	of	
<u>.</u> :	Client	Dilution	Filtered	Dilution Filtered Analyzed	Sensitivity)	(Microns)	Total	>5.0 Total	Total	>5.0	Total	Asbestos	
Scillab Sample #	Sample #	Factor	(liters)	(sd. mm.)	(liters) (sq. mm.) (struc/cc air)	0.0-0.0	2		<16.6	<16.6	<0.0049 <0.0049	<0.0049	NSD	
Sample "			1314	090	0.0049	0:0	0.0	2.5) /				:	
01 inside	5				0	C	0.0	0.0	<16.6	>16.6	<0.0049 <0.0049	<0.0049	NSD	
. Co	C-2		1314	090.	0.0049	?	<u>;</u>						Ü	
02 mside			1314	090	0.0049	0.0	0.0	0.0	<16.6	<16.6	<0.0049	<0.0049	G C	
03 inside	C-3		1	<u>:</u>				1	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	7 7 1	<0.0049 <0.0049	<0.0049	NSD	
			1314	090.	0.0049	0.0	0.0	0.0	0.01>	0:01>				
04 inside	<u>.</u>					•	ć	0	<16.6	<16.6	<0.0049 <0.0049	<0.0049	NSD	
05 inside	C-5		1314	090.	0.0049	0:0	0.0	3						
,									•					
06 outside**	9-O													
07 outside**	C-7													
08 outside**	స్త													
09 outside**	C-9										·			
10 outside**	C-10													

.; Analyzed By: Count Bc.

* concentration represented by the detection of 1 structure

** not analyzed

NSD: No Asbestos Structures Detected

Reviev

Reviewed By:

sample area analyzed

Client Name: HUB TESTING

<u>Job #:</u> 501081538

Lab Sample #: 01 Client Sample #: C-1

Received: 08/24/2001

Date Analyzed: 08/24/2001 Scope #:

09:40:00

Volume (liters): 1 314.0

385 mm2 Filter Type / Filter Area: MCE

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Noltage: 100 KeV

Analysis Performed by:

Corey A. Barnett

					Corey A. B	arnett		 -		T 7
Location	Grid Opening	Fiber	Length µM	Width μM	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
B8-C4/1 B8-E4/1 B8-F4/1 B9-C4/1 B9-E4/1 B9-F4/1	1 2 3 4 5 6	NSD NSD NSD NSD NSD NSD								
in the second se										

NSD: No Asbestos Structures Detected

Comments				i
		Structure Density	Concentration	Grid Evaluation
Chrysotile Asbestos Structures:	0	(str/mm2) <16.6 <16.6 <16.6	(str/cc air) <0.0049 <0.0049 <0.0049	 ☑ Grid Openings Covered > 50% ☑ Intact Grid Opening > 50% ☑ Undissolved Filter < 10% ☑ Folded Replica < 50%
Total Non-Asbestos Structures:	0	<16.6 16.6	<0.0049 0.0049	 ⊠ Filter Loading < 10% ∑ Particulate Even

sample area analyzed

Client Name: HUB TESTING

<u>Job #:</u> 501081538

Lab Sample #: 02

Client Sample #: C-2

Received: 08/24/2001

Date Analyzed: 08/24/2001

Scope #:

Volume (liters): 1 314.0

385 mm2 Filter Type / Filter Area: MCE

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by: Corev A Barnett

09:40:00

			•		Corey A. B	arnett		Orient.	SAED	Photo
ocation	Grid Opening	Fiber	Length μΜ	Width µM	Fiber Type	Morphology	EDS	Oneili.	H	
B10-C4/1 B10-E4/1 B10-F4/1 C6-C4/1 C6-E4/1	1 2 3 4 5 6	NSD NSD NSD NSD NSD NSD		··.						

NSD: No Asbestos Structures Detected

NSD. NO 1300000					
Comments		Structure Density	Concentration	Grid Evaluation	
Total Grid Openings: Chrysotile Asbestos Structures: Amphibole Asbestos Structures: Asbestos Structures >=5 microns: Total Non-Asbestos Structures: Total Asbestos Structures:	0 0 0	(str/mm2) <16.6 <16.6		Grid Evaluation ☐ Grid Openings Covered > 50% ☐ Intact Grid Opening > 50% ☐ Undissolved Filter < 10% ☐ Folded Replica < 50% ☐ Filter Loading < 10% ☐ Particulate Even	
Analytical Sensitivity:					

sample area analyzed

Client Name: HUB TESTING

<u>Job#:</u> 501081538

Lab Sample #: 03 Client Sample #: C-3

Received: 08/24/2001

Date Analyzed: 08/24/2001

Scope #:

Volume (liters): 1 314.0

Filter Type / Filter Area: MCE 385 mm2

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by:

Corey A. Barnett

09:40:00

					Corey A: E	Tarnett T			SAED	Photo
Location	Grid Opening	Fiber	Length μM	Width µM	Fiber Type	Morphology	EDS	Orient.	SAED	177000
C7-C4/1	1 '	NSD							 	
C7-E4/1	2 3	NSD	!	!	-				 	
C7-F4/1	3	NSD						}	Ì┡ ┈ ┤	
C8-C4/1	4	NSD	Į	•				ì	1	
C8-E4/1	5	NSD	- V.	}		}		1		
C8-F4/1	6	NSD	``		ļ			- 1		
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NSD: No Asbestos Structures Detected

Chrysotile Asbestos Structures:	6 0	Structure Density (str/mm2) <16.6 <16.6 <16.6	Concentration (str/cc air) <0.0049 <0.0049	Grid Evaluation ☐ Grid Openings Covered > 50% ☐ Intact Grid Opening > 50% ☐ Undissolved Filter < 10%
Asbestos Structures >=5 microns: Total Non-Asbestos Structures: Total Asbestos Structures: Analytical Sensitivity:	0	<16.6 16.6	<0.0049 0.0049	 ⊠ Folded Replica < 50% ⊠ Filter Loading < 10% ∑ Particulate Even

09:40:00

sample area analyzed

385 mm2

Client Name: HUB TESTING

<u>Job #:</u> 501081538

Lab Sample #: 04

Client Sample #: C-4

Received: 08/24/2001 Date Analyzed: 08/24/2001

Scope #: AB

Volume (liters): 1 314.0

Filter Type / Filter Area: MCE

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by:

Sandhya Gunasekara

			·····		Sandhya G	unasekara		-1	<u> </u>	
Location	Grid Opening	Fiber	Length µM	Width µM	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
C9-4/4B C9-4/4C C9-4/4E C10-3/6C C10-3/6F	1 2 3 4 5	NSD NSD NSD NSD NSD NSD	<i>€</i> .							
Sa .										

NSD: No Asbestos Structures Detected

Comments Comments				
Total Grid Openings: Chrysotile Asbestos Structures: Amphibole Asbestos Structures: Asbestos Structures >= 5 microns: Total Non-Asbestos Structures:	0 0 0	Structure Density (str/mm2) <16.6 <16.6 <16.6		Grid Evaluation ☐ Grid Openings Covered > 50% ☐ Intact Grid Opening > 50% ☐ Undissolved Filter < 10% ☐ Folded Replica < 50% ☐ Filter Loading < 10% ☐ Resticulate Even
Total Asbestos Structures: Analytical Sensitivity:		16.6	0.0049	Particulate Even

09:40:00

sample area analyzed

Client Name: HUB TESTING

<u>Job #:</u> 501081538

Lab Sample #: 05 Client Sample #: C-5

Received: 08/24/2001

Date Analyzed: 08/24/2001

Scope #: AB

Volume (liters): 1314.0

Filter Type / Filter Area: MCE 385 mm2

Grid Opening Size: 0.01003

Area Examined: 0.06018 mm2

Magnification: 20,000

Accelerating Voltage: 100 KeV

Analysis Performed by:

		11,	lary 515 T O		Sandhya G	unasekara		 ;		Mesto
Location	Grid Opening	Fiber	Length μΜ	Width μΜ	Fiber Type	Morphology	EDS	Orient.	SAED	Photo
D6-3/6C D6-3/6E D6-3/6F D7-4/6C D7-4/6E D7-4/6F	1 2 3 4 5 6	NSD NSD NSD NSD NSD NSD			•					
*										

NSD: No Asbestos Structures Detected

Comments				
Amphibole Aspesios Structures:	0 0 0	Structure Density (str/mm2) <16.6 <16.6 <16.6 <16.6	(str/cc air) <0.0049 <0.0049 <0.0049 <0.0049	Grid Evaluation ☐ Grid Openings Covered > 50% ☐ Intact Grid Opening > 50% ☐ Undissolved Filter < 10% ☐ Folded Replica < 50% ☐ Filter Loading < 10% ☐ Particulate Even
Analytical Sensitivity:		16.6	0.0049	



Environmental Testing Service

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

FINAL CLEARANCE FORM

WORK AREA I.D.	109/1	07/116/214/2	09/215
CONTRACTOR	ECSI		
VISIBLE DEBRIS !	NOTED ON:	YES	NO
 FLOORS WALLS CEILINGS FIPES ELBOW FITT DUCTS HORIZONTA EQUIPMENT 	L SURFACES		X
	CAPSULANT APPLIED1		
SAMPLE VOLUM	ES ADEQUATE FOR DET	rection limit Yes	
DATE SAMPL.LIN	AG PUMPS CALIBRATEI	8/24 - 9123	
FINAL AIR SAMP	LE RESULTS <u>See S</u>	anply Des	·
	PLES - PASS X		
CONTRACTOR N	OTIFIED Y64		
MONITOR'S SIG	NATURE (MATURE)	Zant M	_DATE <u>9/24</u> /3/23



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Tilton School, Pipe insulation removal and encapsulation

(Rms. 116, 107, 109, 209, 215, 216, girls rm, teachers lounge, closet behind 119)

Contractor:

ECSI

Date:

9/23/21

Rotometer ID: 2-4 ス 29 1V-10 W-W c-25 Pump B-15 A10 E25 121-Q Number 9.4 9.4 4.4 9.4 Pre-7.3 フ. ぅ 7,3 ゚゚゚゚゙゙゙゙゙゙゙゙゙゙゙゙゙゙゙゙゙゙゙゙ヿ・ゟ calibration 9.4 9.4 9.4 9,4 フ3 Post-7.3 7.3 7.3 7.3 calibration

Sample	Location		Pump #	Start Time	Stop		Min.		Vol.		Fiber Count	F/CC
ID C	109	Horocott	D-15	12:30			19	ల	10	35	18	1003
	109	1 10,35941	E~15	12:00	1						15	. 207
(2			A-10	12100							19	, 227
<u>C3</u>			B-15	12:00	 - -			<u> </u>			リフ	1007
C4	-		c -25)	14	, 207
C 5	100	up right	<u> </u>		<u> </u>	-			14	D	12	,004
C 6	109	Op risht	10-10		-	-	+-				13	المحمد،
C 7			-	12:00	+	+		+			14	. 205
<u>c</u> 3			29	12:00		+,		t	1		19	1006
<u>C9</u>		 ,	2	12:0		W	1	N/	1	j —	16	.03
C10	`		-		/				~	i	~ <u>]</u>	

Technician:

Date: 8/23/01



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Tilton School, Pipe insulation removal and encapsulation

(Rms. 116, 107, 109, 209, 215, 216, girls rm, teachers lounge, closet behind 119)

Contractor:

ECSI

Date:

9/23/01

12-4 Rotometer ID: 29 2 14-10 14-10 Pump 04 ロフ 24 27 104 Number 8.3 4.4 9.4 11.5 9.4 Pre-9.4 9,4 9.4 9.4 calibration 11.5 **વ્ર**. રૂ 9.4 9.4 Post-9.4 9.4 9,4 9.4 9.4 calibration

Sample ID	Location		Pump #	Star Tim		Stop Time		Min.	Vol.	Fiber Count	F/CC
CII	107 (proht	24	121	Ŋ	2:	30	140	1316	12	.004
	107		104					140	1316	15	,005
C12			27		-			140	1316	16	1006
C13			27					140	1316	13	1205
C14		1	04	\		1)	140	1316	12	.004
C15	1271		<u> </u>	7	35	b-) :	50	135	1269	14	1005
C16	(2)	ו אייניכל	707		<u> </u>	1		135	1 552.5	13	.004
C17		 	10-10		-	-		135	11 225	7	(Q)3
C13	<u> </u>		10-10		_				1269	14	1205
019		\	19)) —	135	1269	10	1003
C20 Techn	ician:		2						912	3/01	

• Serving our Clients since 1941 •



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Tilton School, Pipe insulation removal and encapsulation

(Rms. 116, 107, 109, 209, 215, 216, girls rm, teachers lounge, closet behind 119)

Contractor:

ECSI

Date:

9123101

Rotometer ID: 2 - 4 104 04 27 27 6-25 **入フ** Pump 13-15 ピーンろ 4-10 21-0 Number 9.4 11.5 9.4 9.4 7.3 9.7 Pre-7.3 7,5 7,3 calibration 9.4 11.5 9.4 タフ 9.4 7.3 7.3 Post-フ 3 フ. 3 7, 3 calibration

Sample	Location		Pump #	Start Time		Stop		Min.	Vol.	Fiber Count	F/CC
1D C 21	116 V		D-15	ユ 、		4:9	50	135	985	5	ကာဥ
C 27	116 4	1010 41	E-25	1	\			135	935	3	1001
			A - D					135	935.5	5	1002
C 23		1	13-15					135	1355	3_	.001
C 24		 	<u>υ-25</u>					135	985.5	16	1.004
C 25			- 		_	-	<u> </u>	135	1174.5	6	2صد،
C 26		prish!	177	<u> </u>	\vdash	-		135	1269	1)	, 229
C 27		-	37		\vdash	-		135	1269	10	. 004
C 20	<u> </u>		24	-	+	-	-	135		1	رده،
C 24					+		7	1 1 3 3	1 26		्००३
ر 30		1.16	104	9	ツ		Ą	Date	: 3/:	23/2)	



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Tilton School, Pipe insulation removal and encapsulation

(Rms. 116, 107, 109, 209, 215, 216, girls rm, teachers lounge, closet behind 119)

Contractor:

ECSI

Date:

8/24/01

Rotometer ID: 2-4 Bais 410 10-15 24 Pump 27 27 04 104 Number 7.4 7.4 7.4 9,4 7.4 9.4 Pre-9.4 4.4 9,4 calibration 7.4 7.4 7,4 7,4 7.4 9.4 Post-9.4 9,4 9.4 9,4 calibration

Sample	Location		Pump #	Start Time	Stop Time	Min.	Vol.		Fiber Count	F/CC
C 31	209	Rak	104	8?J	10:53	173	162	6.2	9	.003
C 37		EXIL	04	8:00	10:53	173			6	1002
C 33			27	B-00	10:53	173			7	1002
			27	8:00	10:53	173		,	9	1003
C 34		, 	24	8:00	12!53	173	7		5	(CO)
C 35	0.30	Let	0-15	3:05	11:05	130	13	32	7	1003
C 36	707	LEF	13-25	 	11:05	180			10	1004
C 37		1	4-10	2:05	11:05	130			9	1 003
C 39	-		B~15	-	11:05	130	-		10	, 004
C 35		 	c -25		11:05	130	-1)	14)	1005
C410	,	//			1) <i>I</i> n	u ka	

Technician:

_ Date: <u>8/24/</u>



Environmental Testing Service

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

Report For:

Haverhill School Department

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Tilton School, Pipe insulation removal and encapsulation

(Rms. 116, 107, 109, 209, 215, 216, girls rm, teachers lounge, closet behind 119)

Contractor:

ECSI

Date:

8/24/01

12-4 Rotometer ID: 27 PO 29 104 Pump 24 07 አ 12-10 Number 9.4 9.4 9.4 9.4 9.4 a.4 9.4 Pre-9,4 calibration 9.4 9.4 9.4 9.4 9.41 9.4 9.4 Post-9.4 9.4 calibration

Sample ID	Location	Pump	Start Time	Stop Time		Min.	Vol.	Fiber Count	F/CC
C 41	215	10-10	8:6	11.<	 วS	175	1645	15	1004
C 42	1	λ	8:10			175	1645	13	100,
C 43		כפ	310			175	1645	13	1004
		29	3,10		<u> </u>	175	1645	15	(2004)
C 44	1	29	3:10	1	 >	175	1645	30	1006
C 45	1	<u> </u>	 	+ -	,	130	1692	13	,004
C46	214 Let	24	11:10	21	10	180	1692	12	,003
C 47	 	104	61:11	-	 	1	 	8	1002
C 48		04)1: I)	-	-	130	1692	9	1002
C 49		27	(1:10)		 	<u> </u>	1692	8	1034
c GO Techn		27	11:10		_		91	-	



Environmental Testing Service

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

Report For:

Haverhill School Department

Project:

Tilton School, Pipe insulation removal and encapsulation

(Rms. 116, 107, 109, 209, 215, 216, girls rm, teachers lounge, closet behind 119)

Contractor:

ECSI

Date:

3/24/01

Rotometer ID: 12-L Pump 13-15 c-25 A-10 E-25 D-15 Number 7.4 7.4 Pre-フ. 4 フ・1 フ・リ calibration 7.4 7.4 Post-7,4 7.4 7.4 calibration

Sample	Location		Pump	Start Time	Stop Time	Min.	Vol.	Fiber Count	F/CC
ID C	214	Lett	D-15	まり	2:10	180	1332	8	1003
C 51	X / 1	(E-25		1	180	1332	17	100%
C52			4-10			180	1332	15	1005
c53	<u> </u>			-	 	780	1.	16	,006
ر <u>54</u> ح55	 		13-K	1		130	- 	11	1,004
C55		<u> </u>	c-25		-	1.0-	1.300		-
					 		<u> </u>		
					<u> </u>	_	<u> </u>		
					<u> </u>		-		

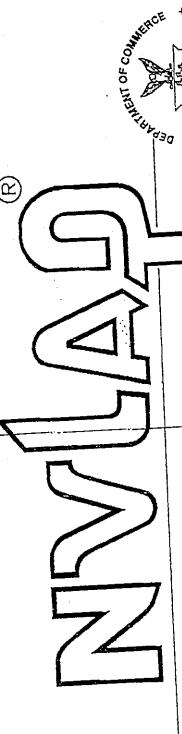
Technician:

Date: 8124 10)

Attachment E Laboratory Documentation Project Monitoring Documentation

United States Department of Commerce National Institute of Standards and Technology

[]



ISO/IEC GUIDE 25:1990 ISO 9002:1987

Certificate of Accreditation

SCILAB BOSTON, INC. EAST WEYMOUTH, MA

criteria established in Title 15, Part 285 Code of Federal Regulations. These criteria encompass the requirements of ISO/IEC Guide 25 and the relevant requirements of ISO/IEC Guide 25 and the relevant calibration or test results. Accreditation is awarded for specific services, listed on the Scope of Accreditation for: is recognized under the National Voluntary Laboratory, Accreditation Program for satisfactory compliance with

AIRBORNE ASBESTOS FIBER ANALYSIS

June 30, 2002

Estective through

Carried F. Molerman For the National Institute of Standards and Technology

NVI, AP Lab Code: 102079-0

NVLAP-01C (11-95)

National Institute of Standards and Technology



National Voluntary Laboratory Accreditation Program

ISO/IEC GUIDE 25:1990 ISO 9002:1987

Scope of Accreditation



Page: 1 of 1 NVLAP LAB CODE 102079-0

AIRBORNE ASBESTOS FIBER ANALYSIS

SCILAB BOSTON, INC.

8 School Sweet

East Weymouth, MA 02189

Mr. John Sulkowski

Phone: 781-337-9334 Fax: 781-337-7642

E-Mail: jsulkowski@scilabs.com URL: http://www.SCILABS.com

NVLAP Code

Designation

18/A02

U.S. EPA's "Interim Transmission Electron Microscopy Analytical Methods-Mandatory and Nonmandatory-and Mandatory Section to Determine Completion of Response Actions" as found in 40 CFR, Part 763, Subpart E, Appendix A.

June 30, 2002

Effective through

David T. alderman

Langer of the text of the control of the control of the control of the control of the control of the control of

For the National Institute of Standards and Technology



THE COMMONWEALTH OF MASSACHUSETTS Department of Labor and Workforce Development

Division of Occupational Safety

399 Washington Street, 5th Floor, Boston, Massachusetts 02108

CERTIFICATION FOR ASBESTOS ANALYTICAL SERVICES

HUB TESTING LABORATORY, INC. 95 BEAVER STREET WALTHAM MA 02154-

LICENSE: AA000013

EXPIRES: Friday, June 07, 2002

IN ACCORDANCE WITH MGL CH. 149 § 6B AND 453 CMR 6.08 THIS CERTIFICATE IS ISSUED BY THE DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT, DIVISION OF OCCUPATIONAL SAFETY TO PROVIDE THE ASBESTOS ANALYTICAL SERVICES SPECIFICALLY LISTED BELOW:

CLASS B CERTIFICATE

CLASS C CERTIFICATE

Robert J. Prezioso, Deputy Director

MCI-1/97

Commonwealth of Massachusetts
Division of Occupational Safety
Research, Prezioso, Deputy Director
Robert J. Prezioso, Deputy Director
Robert J. Prezioso, Deputy Director

Asbestos Project Monitor SCOTT PATRICK SMITH

Eff. Date 05/16/2001 Exp. Date 05/15/2002

AM 151140





9

INSTITUTE FOR

ENWIRONMENTAL EDUCATION.

Wilmington, MA 0188



This is to certify that (97,8) 658-5272

Scott Smith

has completed the requisite training, and has passed an examination for accreditation

Asb. Project Monitor

pursuantito Title Hof the Toxic Substance Control Act, 15 U.S.C. 2646

March 7, 8, 9, 12, 13, 2001

Course Dates

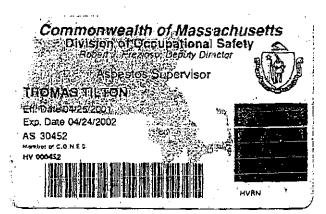
Course Location
Institute for Environmental Education

Wilmington, MA. 01887

Attachment F Contractor Documentation

Contractor Documentation

Fit Test Date	10/81/5	1011	(0) 1,9	3/28/01	10/11/5		5/31/01								
Medical Release Date	4/11/01		8/7/01	413/01	10/11/17		5/31/01								
MA License Exp.		Apr / 34/ 3002	Jun/14/1002	17 July 136 3002	45/2-2	700%/8/ 47/1	500c/31/ with	12 / 12 / 12 / 12 / 12 / 12 / 12 / 12 /							
MA License	Number	45 30483	AS 31617	41.75 (JA)	300	RS 32617	25.50	10000 MY							
Training Certificate	Exp. Date	act 11, 2001	2002		1 Mar 50, 4007	Any 31, 2002		5cp + 4, 1001							
Training Certificate	Number	0033031047499	018910182 1-10		A10301-30-8057	537014011 nn 10	212121212	AR0900-09-1760322							
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INSTITUTE FOR

ENVIRONMENTAL EDUCATION, INC.

16 Upton Drive, Wilmington, MA 01887 (978) 658-5272

This is to certify that

Thomas R Tilton

DOB: 7/27/64

has completed the requisite training, and has passed an examination for reaccreditation as:

Asbestos Supervisor Refresher

pursuant to Title II of the Toxic Substance Control Act, 15 U.S.C. 2646

October 21, 2000 course Dates

ECSI

Course Location

PO Box 1147

Atkinson, NH 03811

October 21, 2001 Expiration Date President/Director of Training

0033031047489

October 21, 2000

Examination Dale

Certificate Number

Valley Regional Occupational Health Services

☐ 61 Main Street Stoneham, MA 02180 (781) 438-9600 Fax (781) 438-9503 27 Charles Street North Andover, MA 04845 (978) 685-2900 Fex (978) 885-9567

PRELIMINARY ASBESTOS EXAMINATION RESULTS

Date: ///	90101 Re: DAY THOOK ID#003 54 1742
Company	ECST
Collips	The following examination was performed on the individual named above:
٠. ٠	(Y) Physical Exam (Y) Pulmonary Function Test (X) Chest X-Ray (Y) Part 1, Part 2 Questionnaire
	INTITIAL RESPIRATOR CLEARANCE
Based o	n the above examination, we find that this individual:
	MAY USE Respiratory and Personal protective equipment on a TRIAL BASIS only pending final results of the physical examination and procedures noted above.
	() MAY NOT USE Respiratory and Personal protective equipment due to abnormal findings noted on the initial examination. Final determination will be made when all test results are complete.
	The above examination has been conducted in full compliance with OSHA standards CFF 1910.1001 and 1926.58. This is a preliminary report only; final determination may be modified based on all test results and will be noted in the Letter of Interpretation (complying with OSHA standards).
Comm	nents:
Physi	cian's Signature:

Form PAER

Valley Regional Occupational Health Services

☐ 61 Main Street Stoneham, MA 02180 (781) 438-9600 Fax (781) 438-9603 27 Charles Street North Andover, MA 01845 (978) 685-2900 Fax (978) 685-9567

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COUPANY PROVIDED SERVICE PROV	OUR NAME T. RD. RAYMOND 1	JH. 02077		
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DIAGNOSIS: DR. COMMENTS: Date Signature of Physician PHONE CALL MADE TO COMPANY Ferror Contacted Private of Physician (Physici	. 67/ 56	D Other		,
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Valley kegional occupations

☐ 81 Main Street Stoneham, MA 02180 (781) 438-9600 Fax (781) 438-9603 © 27 Charles Street North Andover, MA 01845 (978) 685-2900 Fax (978) 685-9567

ASBESTOS PHYSICAL EXAMINATION LETTER OF INTERPRETATION

	ECSI
` THOMA	S TILTON Company
RE:	ramination, tests, and procedures were performed on the above-named 4/11/01
The following ex	amination, tests, and procedures word p
individual on _	4/11/01
(X)	Physical exam with emphasis on cardio-respiratory system Function Test performed by a certified technician
(x)	Dulmonary FilhClicit lest portonine
()	Dart I Resolratory Questionnaire
(x)	n_4 II Despiratory Questionitalis
(x)	Chest X-Ray PA view with B-reading
an the a	bove examination, I find that this individual:
Based on the a	pove state of the projective equipment without limitation.
(\times)	MAY USE Respiratory and Personal protective equipment without limitation. MAY USE Respiratory and Personal protective equipment for six months, when a MAY USE Respiratory and Physical is recommended.
(``)	AND LICE Decouratory and Forey of Fr
•	MAY USE Respiratory and Personal protective equipment due to abnormal MAY NOT USE Respiratory and Personal protective equipment due to abnormal MAY NOT USE Respiratory and Personal protective equipment due to abnormal
()	findings (see "Comments" below).
	Other
()	
Comr	ments:
•	RISK FACTOR NOTED
() (~~	Has no risk factors placing the individual at greater risk for asbestos exposure. Has the following risk factors placing the individual at greater risk from asbestos
(~)	expôsure:
	exposure: (X) Smoking or recent history of smoking. () Restrictive lung disease or symptoms (asthma, emphysema, active
	() Restrictive lung disease of 5) when
	allergies, etc.).
	() Other
These examin	nations have been performed in full compliance with OSHA standards set forth R 1910, 1001 and 1926,58. The above named individual has been informed of the medical findings were conveyed to the employer.
under 29 CF	recommendations. Only work-related medical findings were conveyed to the employer. recommendations. Only work-related medical findings were conveyed to the employer. In questions, please do not hesitate to call.

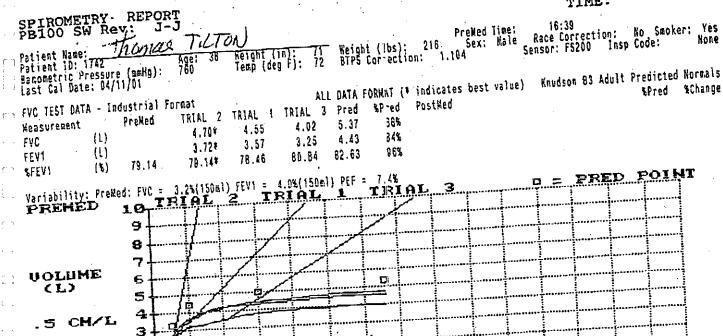
After successful completion of a physical examination, this candidate for employment is considered fit for wearing respirator equipment per OSHA guidelines and has been advised that lung cencer risk increases when digerofte amoking is combined with asbestos exposure.

Valley Regional Occupational Health Services

© 61 Main Street Stoneham, MA 02180 (781) 438-9600 Fax (781) 438-9603 ☐ 27 Charles Street North Andover, MA 01845 (978) 685-2900 Fax (978) 685-9587

•	Fax (781) 438-9603	Lay (910) 200 1111			
ntilter NAME	PHYSICAL EXAM	IINATION	ELSI	OOMBANIV	
n71/162	- Cretin TV	NUMBER		COMPANY	/
NAME	SUCIAL SECTION 1.	D PRESSURE 120/2	do_	PULSE	2
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ION without glasses	20/20 20/20	PERIPHE	RAL VISION		
or R	×—/	R 90	L 90		
101 R 20/20 L 20/20	R				
, ,	Comment on abr	ormal findings.			
structions. Place an "X" in the	appropriate box. Comment on abr	1			
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	Abnormal	<u></u>			
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YMPH Normal X	Abnormal	1	·		
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DREAST Normal	Abnormal	<u> </u>			
11.	Abnormal				
1.1.2	Abnormal				
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Specific Recommendations/Li	mitations			1.	
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				Mul	a l
Signature of Examining Physic	\mathcal{P}	/~~	ate		~ {

Print Name of Examining Physician



Comments:

Planney

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2 (S)

Commonwealth of Massachusetts
Division of Occupational Safety

Asbestos Supervisor

RAFAEL PEREZ

Eft. Date 04, 15/2001 Exp. Date 0.1/14/2002

AS 31617





INSTITUTE FOR

ENVIRONMENTAL EDUCATION, INC.

16 Upton Drive, Wilmington, MA 01887 (978) 658-5272





This is to certify that

Rafael Perez

has completed the requisite training, and has passed an examination for reaccreditation as:

Asbestos Supervisor Refresher

pursuant to Title II of the Toxic Substance Control Act, 15 U.S.C. 2646

March 30, 2001 Course Dales Course Location

Institute for Environmental Education 16 Upton Drive Wilmington, MA 01887

March 30, 2002 Expiration Date President/Director of Training

March 30, 2001

Examination Date

0134391049810 Certificate Number

ENVIRONMENTAL COMPLIANCE SPECIALISTS, INC.

QUALITATIVE RESPIRATORY FIT TEST CERTIFICATION

: 	Rafael Perez	<u>ss#</u>	089-74-902	3
NAME:	COMPANY: ENVIRONMENTAL COMPANY: ENVIRONMENTAL COMPANY: ENVIRONMENTAL COMPANY: 111 RET. 125, KINGSTON, NH	OMPLIANCE SPEC	CIALISTS, INC.	
RESPI	RATOR TYPE:	HALF-FACE	NEGATIVE PRESSU	RE
RESPI	RATOR MODEL:	NORTH #77	00 MEDIUM	
RESP	IRATOR NIOSH APPROVAL:	TC-21C-530		
TEST	METHOD:	IRRITANT I	FUME PROTOCOL (C.29 CFR 1926-58)	
TEST	RESULTS: (CIRCLE ONE)	PASS	FAIL	
			,	
TES	T CONDUCTOR: Jak	Jel -	TEST DATE:	6/1/2001

LAWRENCE WALK-IN MEDICAL CENTER

Neville Navaratnam, M.D. 100 Franklin Street Lawrence, MA 01840 (978) 682-8343

EMPLOYERS ASBESTOS CLEARANCE LETTER
Dara Partial 189-74-9083
NAME: 12727 CATAL S.S.#
DATE OF EXAM: August 7 th Twoth own on
DATE OF EXAM:
This letter confirms that the above named individual was examined in compliance with the
This letter confirms that the above named individual was confirmed assessed OSHA asbestos standard (CFR 1910,1001 and 1926.58). The required asbestos OSHA asbestos standard (CFR 1910,1001 and 1926.58). The required asbestos questionnaire, a medical and work history, and a complete physical examination were questionnaire, a medical and work history, and a complete physical examination were
questionnaire, a medical and work in the performed. Pulmonary function tests (PFT) were administered.
periorated - Abnormal:
CHEST X-RAYS WITH "B" READING RESULTS: Normal: Abnormal:
Next indicated in 20 Abnormal: Abnormal:
COMMENTS:
The following conditions were identified which may place this employee at increased risk
of health impairment from asbestos exposite:
The following limitations on personal protective equipment, including respirators are
indicated.
indicated. () None: The patient is medically qualified to wear all personal protection equipment.
() Patient Limitations:
The employee has been informed of the results of the medical examination, both with
regard to occupation and general incular contains and regarding smoking cessation if
about increased risk of ling cancer. Sincated and diagnosis unrelated to asbestos
exposure may not be communicated to the employee. Standard, a copy of this opinion is being forwarded to the employee.
Thank you for the opportunity to examine this individual.
Physician. NAVARATNAM, M.D. Signature Centers 12 (177 - 836)
LAWRENCE WALK-IN MEDICAL CENTER
Address AWRENCE, WA UTBAD Phone #
Variable

TEST DATE: 08/07/01 TIME: 09:16 AM PIROMETRY REPORT B100 SW Rev: J-J Rafuel Race Correction: B5% Smoker: 09:17 AM PreMed Time: 128123 Sex: Male None Height (in): 69 Weight (ibs): 170 S Temp (deg F): 40 BTPS Correction: 1.183 Sensor: FS200 Insp Code: atient Name: atient ID: 089749023 38 . Age: arometric Pressure (mmHg): 760 Knudson 83 Adult Predicted Normals **%Change** BEST TEST SUMMIARY **%Pred** PostMed QC VC TEST DATA - Clinical Format %Pred Pred PreMed QC leasurement 130% 5.40 4.15 D (L) 129% :VC 3.43 4.44 (L) 99% ∍:EV1 82.99 82.22 (%) 129% (FEV1 3.61 4.64 (L/S)EF25%-75% 118វ 7.78 9.18 (L/S)135% PEF 3.93 5,30 FEV3 ET /ariability: PreMed: FVC = 1.5%(80ml) FEV1 = 0.2%(10ml) PEF = 1.5% TRIAL 14 TRIAL PREMED o = PRED POINT 18 FLOW (L/S) 4 .25 CM/L/S 2 UOLUME PRED POINT TRIAL PREHED 8 UOLUME (L) .5 CH/L 3 2

Interpretations:

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PREMED: Testing indicates normal spirometry. Comments:

TIME

(8)

R.L.N. novoration August 7th Twothoused one

R.L.N. NAVARATNAM, M.D. LAYRENCE WALK-IN MEDICAL CENTER 100 FRANKLIN STREET LAWRENCE, MA 01840

Commonwealth of Massachusetts
Division of Occupational Safety
Robert J. Prezioso. Deputy Director Asbestos Worker

ROBERT M. ORTIZ

Eff. Date 04/04/2001 Exp. Date 04/03/2002

AW 33174







LAWRENCE TRAINING SCHOOL, INC.

88 Franklin Street, Lawrence, MA 01841

Telephone: (978) 689-7370

This is to certify that

Robert M. Ortiz

has successfully completed the 32-hour course

Asbestos Worker - Spanish

pursuant to the requirements for asbestos accreditation of the TSCA, Title II

A10301-30-RO5751

Certificate Number

MAR 27, - MAR 30, 2001

Onless of "Praining

MAR 30, 2001

Onle of Examination

Expiration Dute

MAR 30, 2002

Transites tolanes

president/Director of Truining

LAWRENCE TRAINING SCHOOL, INC.

88 Franklin Street, Lawrence, MA 01841 Telephone (978) 689-7370

FIT TEST AND RESPIRATOR TRAINING CHECKLIST

DOR)

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PF PPROPRIATE 1 F T 15

		IT TEST AND RESPI	RATOR IRAI	Idition		
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Employ	ee/Subc	ontractor Signature: 106				
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Qualifi	ed Person	n Signature:			•	
	פכא נה	7/01				
Date:_	<u> 51 mi</u>	<u> </u>	· - L. Ranana	Oil, Sacc	harin	
	Ch-llo	nge substance: (Circle one) lr	ritant Smcke, Dallari-	,		
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	Fit Che	ck Procedures:				
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	ъ.	Positive Pressure Check			eaction:	
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3.	Testan	g Procedure:			1100	_
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	a.	n Beasthing	4			
	ъ.	Turn head from side to side	2	_		
	с.	Nod head up and down	100			
	₫.	Nod head up and down Talking and/or counting b	ackwards from 100			
	e. c	tageing in blace				
	f.	Rend over and touch toes				
	g. h.	Cinace and frown				
	I.	Repeat Rainbow Passage				
	j.	Breathe normally	•		, . 1	
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4.	Ove	rall Evaluation: (Fass / Fa	-			•
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5.	Res	pirator Approvals:		Size		
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LAWRENCE WALK IN MEDICAL CENTER

Neville Navarantum, M.D. 100 Franklin Street Lawrence, MA 01840 (978) 682-8343

	•	
	AND ACRESTOS C	LEARANCE LETTER
.,	EMPLOYERS ASBEST	023-84-5/3/
NAME: OYT	3 (20 bar) Anil 3 rd Tw	S.S.# 023-84-575) S.S.# 023-84-575) To the cus and over the OSHA asbestos are questionnaire, a medical and work history,
DATE OF EXAM:	DVI John January Mas	examined in compliance with the OSHA asbestos examined in compliance with the oshable with the OSHA asbestos examined in compliance with the oshable with the OSHA asbestos examined in compliance with the oshable with the oshab
This letter confirms that standard (CFR 1910, and a complete physic CHEST X-RAYS WITH Next indication of the pulmunary functions and the confirmation of the confirmat	at the above 1926.58). The required a 1901 and 1926.58). The required a call examination were performed. Place of the second of	ulmonary function tests (PFT) were administered.
COMMENTS:		
	tions were identified which may pla	ace this employee at increased risk of health
impairment from as	bestos exposure:	
() MONO. 110 h	ations on personal protective equiposations is medically qualifiedly to we itations:	oment, including respirators are indicated: ear all personal protection equipment.
() Patient Link	(Iddions)	
200 000000	:_a cmnkiiiu ccov="""	the medical examination, both with regard to occupations as been educated about increased risk of lung cancer as been educated about increased risk of lung cancer in it indicated in accordance with the Standard, finding are it indicated in accordance of be communicated to the employer. Also, in accordance forwarded to the employee.
Gizgriosis cimo	ard a copy of this opinion is bonning	^
d j	the opportunity to examine this indi	Signature R.L.N. navartran
· .		Center (82-834)

TEST DATE: 04/03/01 TIME: 09:57 AM TIME: PIROMETRY REPORT ____B100 SW Rev: J-J 10:00 AM PreMed Time: Sex: Male Race Correction: 85% Smoker: No Rober 04+17 Height (in): 69 Weight (lbs): 190 Sensor: FS200 Insp Code: stient ID: 023845751 36 Temp (deg F): 40 BTP5 Correction: 1.183 arometric Pressure (mmHg): 760 Knudson 83 Adult Predicted Normals BEST TEST SUMMARY %Change VC TEST DATA · Clinical Format %Pred PostMed QC %Pred Pred PreMed QC leasurement 4.20 100% 4.20 D .(L) .VC 102% 3.48 3.56 (L) EV1 102% 83.24 84.76 (%) :FEV1 127% 3.67 4.67 (L/S)EF25%-75% 100% 7.84 7.81 (L/S)- ¬)EF 102% 4.06 (L) :EV3 6.08 [] 'ariability: PreMed: FVC. = 10.0%(420ml) FEV1 = 8.7%(310ml) PEF = 18.4% PREMED = PRED POINT 18 FLOH (L/S) .25 CH/L/S 1 2 3 4 5 UOLUME (L) B = PRED POINT TRIAL 2 PREHED 9 8 UOLUME 6 (L) 5 4 .5 CH/L 3 2 (S) TIHE

Interpretations:

PREMED: Testing indicates normal spirometry.

Comments:

R.L.N. navaratrom

April 3rd Two thousandsone

FI.L.N. NAVARATNAM, M.D. LAWRENCE WALK-IN MEDICAL CENTER 100 FRANKLIN STREET LAWRENCE, MA 01840

Commonwealth of Massachusetts
Division of Occupational Safety

Robert J. Prezioso. Deputy Director

Asbestos Supervisor

DENNIS MCLEOD

Eff. Dani 05/09/2001 Exp. Date 05/08/2002

AS 326:7







ENVIRONMENTAL EDUCATION, INC.

16 Upton Drive, Wilmington, MA 01887 (978) 658-5272

This is to certify that

Dennis E McLeod Jr

has completed the requisite training, and has passed an examination for reaccreditation as:

Asbestos Supervisor Refresher

pursuant to Title II of the Toxic Substance Control Act, 15 U.S.C. 2646

April 21, 2001 Course Dales Course Location

Institute for Environmental Education Wilmington, MA 01867 16 Uplon Drive

Expiration Date April 21, 2002

President/Director of Training

April 21, 2001

Examination Date

01344210420652 Certificate Number





ENVIRONMENTAL COMPLIANCE SPECIALISTS, INC.

QUALITATIVE RESPIRATORY FIT TEST CERTIFICATION

	Dennis McLeodic	Tr. 98#	537-84-526	9
NAME:	COMPANY: ENVIRONMENTAL CO # 111 RET. 125, KINGSTON, NH 03	MPLIANCE SI		
RESPI	RATOR TYPE:	HALF-FAC	CE NEGATIVE PRESSURE	
RESPI	RATOR MODEL:	NORTH#	7700 MEDIUM	
RESPI	IRATOR NIOSH APPROVAL:	TC-21C-5	530	:
TEST	METHOD:		T FUME PROTOCOL DIX C.29 CFR 1926-58)	
TEST	RESULTS: (CIRCLE ONE)	PASS	FAIL	

TEST CONDUCTOR: Jeng / GABA

TEST DATE: 5/ 1/01

Valley Regional Occupational Free ...

☐ 61 Main Street Stoneham, MA 02180 (781) 438-9600 Fax (781) 438-9603 ☐ 27 Charles Street North Andover, MA 01845 (978) 685-2900 Fax (978) 685-9567

PHYSICAL EXAMINATION

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ENNIS NE	(201) _	557 87 c	JZ69 UNIY NUMBER		ł	COMPANY	3. /
NAME	WEIG	1013/1	BLOOD PRESSUR	- 1	26	PULSE HEARING	RWNC
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nstructions: Place	e an "X" in the	appropriate box. Comment	on abnormal findi	ngs.			
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	ining Planeigi	ian U	/~~		te	471110	
Signature of Exam					<del>.</del>		
Print Name of Exa	mining Phys	ician					VR 49

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		7/16/77
	Date of Birth	Street in
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ie: 5801 Time in	Time but Contact Perso	1:
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DEMAIS MARCON	SS 1 NAME OF COMPANY	
OUR NAME	MENERALL BARA	
ONE ADDRESS (Street, City, State, Zip)	COMPANY ADDRESS (Broo	(City, State, Zip)
and -72-4596		
ONE PHONE	COMPANY PHONE	way ka magaka maraka sa maraka da araba kata ka
	PATIENT AUTHORIZATIO	
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hereby authorize Valley Resonal Deco	pational Health Services to examine and/or t	real the theolically. 5/5/0/
oriente al money	Signatura of VRONS Wilmigs	Date
		sent or any prospective employer or to any
hereby authorize Valley Regional Occu	pational Health Services to release to my pre ig my examination, condition or treatment at	Valley Regional Occupational Health Service
said employer, all illium and regard		5/8/01
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Marehy authorize Valley Regional Occu	pational Health Services to release to my pro-	esent or any prospective employer the result
lrug screen analysis.		·
	Signature of VADHS With the t	Date
Signature of Pallent	in a market and the second	Tel: No. 464470
n case of emergency comact:	14 cm 100 or 100	
·	STATUS REPORT	RESTRICTED WORK AS INDICATED BELOW
SERVICE PROVIDED	WORK STATUS	Duration of modified work
] Physics1	Return to Regular Work	1. No protonged scanding or walking
Physical wLatter	Date:  Able to return to work with restrictions as indicated.	2. No climbing, bending or stooping
COODT Examination		3. United use of right/left hand
Industrial Accident/Examination and Treatment	Unable to roturn to work for duration of discountry.	4. Algoritest handed work only
Fallow up Examination	Capstile of Full Duny Work	<ul> <li>fi. No work near moving machinery</li> </ul>
FOLLOW-UP APPOINTMENT	☐ Panding X-Ray Report	6. Weight lifting restriction:
FOLEOW-DE VALOIM INCIVI	Pending Lab Report	C-15 pounds
DATE:	Other	15-35 pourids
•	•	□ 25-50 pounds
TIME:	<i>i</i>	☐ 7. Other
DIAGNOSIS: FIRE	,	
DIAGRECOIC:		
DR. COMMENTS:		
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	10.11	
111/M/01/VL	10011 5-9-01	
Signatura of Physician	Date	
PHONE CALL MADE TO COM	PANY	initials
	Person Conlacted	· · · · · · · · · · · · · · · · · · ·
COMMENTS:		
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		·

☐ 27 Charles Street North Andover, MA 01845 (978) 685-2900 Fax (978) 685-9567

☐ 61 Main Street
Stoneham, MA 02180
(781) 438-9600
Fax (781) 438-9603

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 North Andover, MA 01845
 (978) 685-2900
 Fax (978) 685-9567

### ASBESTOS PHYSICAL EXAMINATION LETTER OF INTERPRETATION

LETTER OF INTERPRETATION
RE: DENNIS MCLAS Company E.C.S. 1-
RE:
The following examination, tests, and procedures were performed on the above-named individual on
individual on
Physical exam with emphasis of the performed by a certified technician
5-8-01 ( Pulmonary Function less portonnaire
Part   Respiratory Questionnaire
( - ) Part II Respiratory Quastion with B-reading
( ) Chest X-Hay PA VIEW With B
I find that this individual.
Based on the above examination, I find that this item.  ( MAY USE Respiratory and Personal protective equipment without limitation.  ( MAY USE Respiratory and Personal protective equipment for six months, when a MAY USE Respiratory and Personal protective equipment for six months, when a mast of the PET and Physical is recommended.
MAY USE Respiratory and Personal protective equipment for six months, when a
MAY USE Respiratory and Personal protective equipment
( ) MAY USE Respiratory and Personal protective equipment due to abnormal repeat of the PFT and Physical is recommended.
AND NOT LISE RESUITATORY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LOCALITY AND LO
findings (see "Comments" below).
( ) Other
Comments:
RISK FACTOR NOTED
( ) Has no risk factors placing the individual at greater risk for asbestos exposure.
Has no risk factors placing the individual at greater risk from asbestos  Has the following risk factors placing the individual at greater risk from asbestos
exposure:  Smoking or recent history of smoking.  Smoking or recent history of smoking.
Smoking or recent history of smoking.  ( ) Smoking or recent history of smoking.  ( ) Restrictive lung disease or symptoms (asthma, emphysema, active
allergies, etc.).
( ) Other
w ocus standards set forth
These examinations have been performed in full compliance with OSHA standards set forth under 29 CFR 1910, 1001 and 1926.58. The above named individual has been informed of the me under 29 CFR 1910, 1001 and 1926.58. The above named individual has been informed of the employed under 29 CFR 1910, 1001 and 1926.58. The above named individual has been informed to the employed under 29 CFR 1910, 1001 and 1926.58.
under 29 CFB 1910, 1001 and 1926.58. The above named individual has book were conveyed to the employed
findings and recommendations. Only the strate to call.  If you have any questions, please do not hesitate to call.
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Sincerely, Allo
Date:
Physician:
a supplying of a physical exemination, this candidate for employment is considered fit for wearing

After successful completion of a physical examination, this candidate for employment is considered fit for wearing respirator equipment per OSHA guidelines and has been advised that lung cancer risk increases when digerate smoking is combined with asbestos exposure.

Form Ai

Commonwealth of Massachusetts
Division of Occupational Safety
Robert J. Prezioso, Deputy Director

Asbestos Worker

### MANUEL GONZALEZ

Eff. Date 01/17/2001 Exp. Date 01/16/2002 4W 33039

nv 003038





HVAN



88 Franklin Street, Lawrence, MA 01841

Telephone: (978) 689-7370

This is to certify that

### Manuel Gonzalez

has successfully completed the shour course

## Asbestos Refresher for Workers - Spanish

pursuant to the requirements for asbestos accreditation of the TSCA, Title II

AR0900-09-MG0322

Certificate Number

SEPT 09, 2000

Dales of Training

SEPT 09, 2000

Date of Examination

Francisco Tolan

Expiration Date

SEPT 09, 2001

Dresident/Director of Training

### ENVIRONMENTAL COMPLIANCE SPECIALISTS, INC.

### QUALITATIVE RESPIRATORY FIT TEST CERTIFICATION

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INA	IV	ıΕ	

Manuel Ganzalez ss#

675-78-0322

COMPANY: ENVIRONMENTAL COMPLIANCE SPECIALISTS, INC.

# 111 RET. 125, KINGSTON, NH 03848

**RESPIRATOR TYPE:** 

HALF-FACE NEGATIVE PRESSURE

RESPIRATOR MODEL:

NORTH # 7700 MEDIUM

RESPIRATOR NIOSH APPROVAL:

TC-21C-530

**TEST METHOD:** 

IRRITANT FUME PROTOCOL

(APPENDIX C.29 CFR 1926-58)

TEST RESULTS: (CIRCLE ONE)

PASS

FAIL

TEST DATE: 5/31/01

### Valley Regional Occupational Health Services

☐ 61 Main Street Stoneham, MA 02180 (781) 438-9600 Fax (781) 438-9603

☐ 27 Charles Street North Andover, MA 01845 (978) 685-2900 Fax (978) 685-9567

VR 4994

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Print Name of	Examining	Physician .				. <del></del>	·			

### Valley Regional Occupations.

☐ 61 Main Street Stoneham, MA 02180 (781) 438-9600 Fax (781) 438-9603 27 Charles Street
North Andover, MA 01845
(978) 685-2900
Fax (978) 685-9567

ASBESTOS PHYSICAL EXAMINATION LETTER OF INTERPRETATION Company The following examination, tests, and procedures were performed on the above-named individual on Physical exam with emphasis on cardio-respiratory system Pulmonary Function Test performed by a certified technician (4) (Y) Part I Respiratory Questionnaire Part II Respiratory Questionnaire Chest X-Ray PA view with B-reading Based on the above examination, I find that this individual: MAY USE Respiratory and Personal protective equipment without limitation. MAY USE Respiratory and Personal protective equipment for six months, when a repeat of the PFT and Physical is recommended. MAY NOT USE Respiratory and Personal protective equipment due to abnormal findings (see "Comments" below). Comments:_ RISK FACTOR NOTED Has no risk factors placing the individual at greater risk for asbestos exposure. Has the following risk factors placing the individual at greater risk from asbestos exposure: Smoking or recent history of smoking. Restrictive lung disease or symptoms (asthma, emphysema, active allergies, etc.). Other These examinations have been performed in full compliance with OSHA standards set forth under 29 CFR 1910, 1001 and 1926.58. The above named individual has been informed of the medic: findings and recommendations. Only work-related medical findings were conveyed to the employer. If you have any questions, please do not hesitate to call. Sincerely. Physician:

After successful completion of a physical examination, this candidate for employment is considered fit for wearing respirator equipment per OSHA guidelines and has been advised that lung cancer risk increases when digarette amoking is combined with asbestos exposure.

Ferm APE!

. T2:4T TIME: SPIROMETRY REPORT PB100 SW Rev: J-J 15:42 Race Correction: 85% Snoker: Sensor: FS200 Insp Code: PreMed line: Sex: Male 1,104 Patient Name:
Patient 10: 0322
Barometric Pressure (mmHg):
Last Cal Date: 05/30/01 Height (in) by Weight ilbs): 15 Temp (deg ): 72 BTPS Correction: ALL DATA FORMAT (* indicates best value) Knudson 83 Adult Predicted Hormals FVC TEST DATA - Industrial Format TRIAL 2 TRIAL 3 TRIAL 1 Pred %2red PostMed Preked Measurement 1125 3.57 3.67 3.77* (L) FVC 2.86 105% 2.82 3.09# 2.93 (1) FEV1 78.99 86.33 79.83 79.57* 79.57 **(%)** SFEVI Variability: PreMed: FVC = 2.7%(100ml) FEV1 = 2.3%(70ml) PEF = 3.4% D = PRED POINT 9 8 7 UOLUME 6 (L) 5 CH/L 3 2 1 nts: Lech. B Sailing los Ø Comments:

### Attachment G Waste Shipment Records

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### SERVICE TRANSPORT GROUP, INC.

r.U.	BUX 2132, BRISTUL, PA 1900/	1		1110112:(017) 000 0000
N	80424	WASTE SHIP	MENT RECORD	S.T.G. #
	1. Material Origin Site  HunKing School  100 Win Chester  Hoverhill, MA 01	Gene C 30	raior: Name/Address iTy of Haverhill iSummer St sverhill, MA 01863	Generator: Phone #
	2. Removal Contractor: Name/Address Environmental Compliance Sp 111 Route 125			Contractor: Phone # 603-642-9200
	Kingston, NH 03848 3. Responsible Agency: Name/Address U.S. EPA Region I JFK Federal Building Boston, MA 02203-2211		Frank Kasabian  4. US DOT Class - FRIABLE ASBESTOS  RQ ASBESTOS, 9, NA 2212, PG III	SONLY
RATOR	5. Description of Materials Specify Friable or Non-Friable	n Fiall	Containers No. 4 Drums	Total Quantity
GENERA	6. Special Handling Instructions	24-hour emer	gericy spill response no. 800-424-9300	
	according to the applicable regulations of the Departme to the best of my knowledge. If the waste shipment is a expense.	nt of Transportation, US E	ped, packaged, marked and lebeled and are in proper cond P.A., and any other state government agency. I certify that the RE "URN of the COMPLETE LOAD to the generator's serv	na foregoing is true and correct lice location at the generators
		upervisor	Senais Mc Lean MC	Date 8-20-0/
		Réceipt of Materials	) *If blank, Transporter 2 serves as sole trai	nsporter.
ER	Company Name & Address		Signature:	Telephone No.
FI			Printed Name:	_ Date:
9.0		<u> </u>	Title:	
TRANSPC	Transporter 2 (Acknowledgement of F Company Name & Address Service Transport Group, Inc.	eceipt of Materials	) Signature:	Telephone No. 877-999-9559
	P.O. Box 2132	e #00534	Printed Name:	_ Date:
SITE	10. Discrepancy Indication Space:			
	11. Waste Disposal/Recycling Site Owne (Receipt of above Waste Except as N	r or Operator's Cer loted in 10)	tification	
DISPOSAL	Company Name & Address Greenridge Reclamation R.D. #1, Box 716		Signature:	Telephone No. 724-887-9400
DIS	Landfill Road Scottdale, PA 15683 Permit No. 100281		Frinted Name:	_ Date

### SERVICE TRANSPORT GROUP, INC.

P.O. BOX 2132, BRISTOL, PA 19007

PHONE:(877) 999-9559

Νo	91	1418

### WASTE SHIPMENT RECORD

S.T.G. # _

	1. Material Origin Site	Generator: Name/Address //	Generator: Phone #		
	TILTON School	Generator: Name/Address Haverhill 4 Summer S.T	978 374 2509		
	70 Grove ST	4 Sunner S.T	1/8 3/7 63-1		
	Howerlill MA 01830	Haverhill MA 01830			
	2. Removal Contractor: Name/Address		Contractor: Phone #		
	Environmental Compliance Specialists	603-642-9200			
	111 Route 125 Kingston, NH 03848	Contact: Frank Kasabian			
	3. Responsible Agency: Name/Address	4. US DOT Class - FRIABLE ASBESTOS	ONLY		
	U.S. EPA Region I				
	JFK Federal Building	RQ ASBESTOS, 9, NA 2212, PG III			
	Boston, MA 02203-2211				
		Containers	Total Quantity		
둙	Description of Materials     Specify Friable - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1 / - 1	No. /// C Type	Total addition		
ATOR	Friable	14 Bras	1.0		
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E			<u></u>		
5	6. Special Handling Instructions 🔆 24-hou	ir emergency spill response no. 800-424-9300	į		
[	7. Generator Certification:				
	This is to certify that the above named materials are properly classified	d, described, packaged, marked and labeled and are in proper condition	on for transport by highway		
	according to the applicable regulations of the Department of Transportal to the best of my knowledge. If the waste shipment is not as I stated, I s	tion, US E.P., it, and any other state government agency. I certify that the accept the RETURN of the COMPLETE LOAD to the generator's service	e location at the generator's		
	expanse.		٠.		
	*				
1	·				
I I					
	Printed/Typed Name & Title	Signature PAC	Date		
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	Tom Tilton Supervisor	Tam Telton	8-24-01		
	Tom Tiltow Superusor.  8. Transporter 1 (Acknowledgement of Receipt of M.)	Signature PAC Tom Tulton  laterials) "If blank, Transporter 2 serves as sole trans	8-24-01		
	Tom Tilton Supervisor	Tam Titton laterials) "If blank, Transporter 2 serves as sole trans	8-24-01 sporter.		
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PORTER	Tom Tiltow Superusor.  8. Transporter 1 (Acknowledgement of Receipt of M.)	laterials) "If blank, Transporter 2 serves as sole trans Signature:	8-24-01 sporter. Telephone No.		
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### SERVICE TRANSPORT GROUP, INC.

N!	90419	WASTE SHIP	WENT RECORD	S.T.G. #	
	1. Material Origin Site WhitTiER School 256 Concord St. Haverhill 01803	Genera	etor: Name/Address CITY of Havehill Summer ST Javerhill, MA 01830	Generator: Phone # 978 374 2309	
	2. Removal Contractor: Name/Address  Environmental Compliance Specialists, Inc.  111 Route 125  Kingston, NH 03848  Frank Kasabian			603-642-9200	
	3. Responsible Agency: Name/Address U.S. EPA Region I JFK Federal Building Boston, MA 02203-2211		4. US DOT Class - FRIABLE ASBEST RQ ASBESTOS, 9, NA 2212, PG II		
ATOR	5. Description of Materials Specify Friable or Non-Friable ん	n Friable	Containers No. Type 9 Drams	Total Quantity	
SENERA	Non	v Friable	8 Bass		
Ē	6. Special Handling Instructions 24-hour emergency spill response no. 800-424-9300				
U	7. Generator Certification: This is to certify that the above named materials are prescribing to the applicable regulations of the Department	tol Transportation USE i	P. it., and any pihar state poyernment agency. I certify in	at the toregoing is true and corect	
9	This is to certify that the above named meterals are pro- according to the applicable regulations of the Department to the best of my knowledge. If the waste shipment is not expanse.  Printed/Typed Name & Title	tol Transportation, US E.I	P.A., and any other state government agency. I certify the RETURN of the COMPLETE LOAD to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Generator's state of the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to the Complete Load to	eat the foregoing is true and correct	
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TRANSPORTER	This is to certify that the above named meterals are prospected to the applicable regulations of the Department to the best of my knowledge. If the waste shipment is not expanse.  Printed/Typed Name & Title  Penni < Mark Lead So  8. Transporter 1 (Acknowledgement of Recompany Name & Address  9. Transporter 2 (Acknowledgement of Recompany Name & Address  Service Transport Group, inc. P.O. Box 2132  Bristol, PA 19007  Profile	A as I stated, I accept the I	Signature  Signature:  Signature:  Signature:  Signature:  Signature:	### Date ### Date ### Date ### Date ### Telephone No.    Date:   Telephone No.   B77-999-9559	
SITE THANSPORTER	This is to certify that the above named meterals are prospected to the applicable regulations of the Department to the best of my knowledge. If the waste shipment is not expanse.  Printed/Typed Name & Title  Penni C Ma Lead Sa  8. Transporter 1 (Acknowledgement of Recompany Name & Address  Company Name & Address  Service Transport Group, inc. P.O. Box 2132 Bristol, PA 19007  Profile  10. Discrepancy Indication Space:  11. Waste Disposal/Recycling Site Owner (Receipt of above Waste Except as Notes)	eceipt of Materials)  #00534	Signature  Signature:  Printed Name:  Printed Name:  Title:	### Date ### Date ### Date ### Date ### Telephone No.    Date:   Telephone No.   B77-999-9559	
RTER	This is to certify that the above named meterals are proceeding to the applicable regulations of the Department to the best of my knowledge. If the waste shipment is not expanse.  Printed/Typed Name & Title  Penni C Ma Lead Sa  8. Transporter 1 (Acknowledgement of Recompany Name & Address  9. Transporter 2 (Acknowledgement of Recompany Name & Address  Service Transport Group, inc. P.O. Box 2132  Bristol, PA 19007 Profile	eceipt of Materials)  #00534	Signature  Signature:  Printed Name:  Printed Name:  Title:	### Date ### Date ### Date ### Date ### Telephone No.    Date:   Telephone No.   B77-999-9559	

WHITE-Disposal Site - GREEN-S.T.G. - YELLOW-Contractor - PINK-Generator - GOLD - Pick Up Receipt