

September 4, 2014

Todd Rothstein
AVESTA Housing
307 Cumberland Ave
Portland, Maine 04101

Email: trothstein@avestahousing.org

Dear Mr. Rothstein,

This letter will confirm that AVESTA Housing has contracted with Abatement Professionals Corp of Westbrook, Maine to conduct the asbestos removals for 134 Washington Ave, Portland, Maine. Maine DEP permits were filed and abatement took place on this property from 7/31/2014 to 8/1/2014. We have removed the asbestos from the main house and three sides of the garage. Because of the safety issues and access, one (1) wall on the garage still has the asbestos siding on it. The plan has been that once you begin taking down the main house, we will have a crew on site, to remove the siding on the one remaining side of the garage which we will be able to get to once you have a piece of equipment on site to allow access.

Thank you for selecting Abatement Professionals for this project. We look forward to working with you on future projects.

Sincerely,



Robert W. Rickett, Jr.
President

RWRJ/kan

ENCLOSURES

Asbestos Project Notification

State of Maine
 Department of Environmental Protection
 Lead & Asbestos Hazard Prevention Program
 17 State House Station, Augusta, ME 04333
 TEL (207) 287-2651 FAX (207) 287-6220

FORM N

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Important Notice: The notification submitter must send a complete notification including all applicable fees, postmarked at least 10 calendar days or received by the Department at least 5 working days prior to the start of an asbestos abatement project. This notification must be typewritten or easily legible. An incomplete notification is not acceptable & therefore not of record. See definition of project at Asbestos Management Regulations, 06-096 CMR 425(1)(DDDD)(last amended April 3, 2011). **The notification submitter is responsible for ensuring that the complete notification including any applicable fee is received by the Department.**

| | | | |
|---|---|---|--|
| 1. Project Code APC Project #14-272 (Assigned by notification submitter) | 2. Original Notification <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Facility O&M (Approved Annual) <input type="checkbox"/> Courtesy (Not Subject to the Rule) | 3. Type of Activity <input checked="" type="checkbox"/> Demolition <input type="checkbox"/> Renovation | 4. Waiver <input type="checkbox"/> Non Standard Work Practices <input type="checkbox"/> Emergency <input checked="" type="checkbox"/> Notification Timeframe Waiver <input type="checkbox"/> Approved Annual Non Standard |
|---|---|---|--|

| | |
|--|--|
| 5. Facility Owner Name Avesta Housing Address 270 Cumberland Ave City Portland State ME Zip Contact Todd Rothstein TEL FAX | 6. Asbestos Contractor Name Abatement Professionals Corp Address 590 County Rd Suite #2 City Westbrook State ME Zip 04092 Contact Kyle Rickett TEL 207-773-1276 FAX 207-772-1203 |
|--|--|

| | |
|--|---|
| 7. Facility Location (Where removal is to take place) BLDG Name Residence Floor and/or Rm.# Exterior Physical Address 134 Washington Ave City Portland State ME Zip | 8. Facility Description Present Use Vacant Prior Use Residence BLDG Size No. Floors BLDG Age |
|--|---|

| 9. Asbestos (ACM) Removal | | | Project Totals |
|---------------------------|--------|-------------|---------------------------------|
| ACM Type | Amount | Measurement | |
| Pipe or Pipe Covering | | Linear Feet | Total Square Feet = <u>2100</u> |
| Boiler Covering | | Square Feet | |
| Mudded Fittings | | Linear Feet | |
| Duct Covering | | Square Feet | Total Linear Feet = _____ |
| Gasket Material | | Square Feet | Total Project = <u>2100</u> |
| Floor Tile | | Square Feet | |
| Linoleum | | Square Feet | |
| Mastic | | Square Feet | |
| Ceiling Tiles | | Square Feet | |
| Spray-on | | Square Feet | |
| Siding | 2100 | Square Feet | |
| Transite Paneling | | Square Feet | |
| Roofing/Flashing | | Square Feet | |
| Glues | | Square Feet | |
| Plaster | | Square Feet | |
| Floor Tile by heat | | Square Feet | |
| | | | |

Note: Visual evaluations and air clearances for asbestos abatement projects involving more than 100 square/linear feet, or any combination thereof of must be performed by an independent Asbestos Consultant unless otherwise specified in Asbestos Management Regulations, 06-096 CMR 425) (effective April 3, 2011).

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10. Notification Fees (Required fees must accompany notification)

- \$100.00 = ACM amounts 100 Sq Ft or 100 Ln Ft or any combination but less than 500 Sq Ft or 2500 Ln Ft.
- \$150.00 = ACM amounts more than 500 Sq Ft or 2500 Ln Ft but less than 1000 Sq Ft or 5000 Ln Ft.
- \$300.00 = ACM amounts more than 1000 Sq Ft or 5000 Ln Ft or any combination

11. Notification Fee Not Included

- Single family home exemption
- ACM amount less than 100 Sq Ft or 100 Ln Ft or any combination
- Fees paid quarterly (Non-Scheduled O&M only)
- BGS exemption
- Fee to follow within 3 days (Emergency/Notification Waiver only)

12. Demolition (complete as applicable)

- Ordered demolition (structurally unsound) by State or local government

- All other demolitions

Demolition Dates:

Start

End

Note on Required Notification Fees

If there are not sufficient funds to cover the check or credit card transaction an insufficient funds fee will be assessed by the Department in accordance with State of Maine laws and policies. Until that insufficiency is resolved (by money order or bank check), the Department will not accept any additional checks or credit card transactions from the party including additional checks for other project notifications.

13. Scheduled Dates for Asbestos Project

Project Start Date 7/31/14

Project Completion Date 8/1/14

ACM Removal Dates (from)

ACM Removal Dates (to)

14. Project Work Hours

7:00 AM to 3:30 PM (Show actual hours)

Weekdays (Check all that apply)

M T W T F

Weekend (Check all that apply)

Sat Sun

15. Procedure Used to Detect Presence of Asbestos

Testing Assumed Positive Tested Positive

Method PLM TEM

Sampled By Others
(Print Name)

Company Abatement Professionals

16. Project Clearance

Visual evaluation by: (Air Monitor (if known) and Company)

APC

Air Clearance by: (Air Monitor (if known) and Company)

Note: Whenever building materials are assumed to contain asbestos, signed bulk sampling disclosure forms must be at the asbestos abatement project site and available for review by the Department.

17. Asbestos Abatement Design Consultant of Record

Name Robert Rickett Me Certification Number DC- 0027

Company Abatement Professionals Corp DC Certification Expiration Date 11/2014

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18. Asbestos Abatement Methods and Alternative Work Practices (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Regulated area with containment consisting of 2-layers 4 mil poly on walls & ceiling & 2 layers 6 mil poly on floors | <input type="checkbox"/> Wetting ACM during removal not required |
| <input type="checkbox"/> Regulated area with containment consisting of 1-layer 6 mil poly on walls & ceiling & 2 layers 6 mil poly on floors | <input type="checkbox"/> Exhausting to Ambient Air not feasible |
| <input checked="" type="checkbox"/> Regulated area with Exclusion zone | <input type="checkbox"/> Aggressive Air Clearance not required |
| <input type="checkbox"/> Glovebags (unlimited non-contiguous, contiguous limited to 30 In ft) | <input type="checkbox"/> Visual Clearance only |
| <input type="checkbox"/> Adhesive by grinding or bead blasting | <input type="checkbox"/> Remote Decontamination Unit |
| <input type="checkbox"/> Wrap & cut- TSI in good condition (no containment) | <input type="checkbox"/> Smaller than standard Decontamination Unit |
| <input type="checkbox"/> Intact flooring demo by heavy equipment | <input type="checkbox"/> Shutting down NAM at night |
| <input type="checkbox"/> Roofing removal by mechanical saws/cutters | <input type="checkbox"/> Encapsulation |
| <input type="checkbox"/> Flooring by mechanical equipment/ice scrapers/pry bars | |
| <input type="checkbox"/> Enclosure | |

Note on AHERA School Projects

The Federal Asbestos – Containing Materials in Schools regulation (40 CFR Part 763) commonly referred to as “AHERA” contains specific requirements for asbestos abatement activities that may not be waived by the Department. Among these are air clearance and sample analysis protocols.

19. Waste Transporter (Must be ME DEP licensed Non-Hazardous Waste Transporter)


Name Waste Management
Address Forest Ave
City Portland State Maine Zip 04103
Contact Brian Gordon
TEL FAX

20. Disposal Site

Name Norridgewock
Address 357 Mercer Rd
City Norridgewock State ME Zip
Contact Bryan Gordon
TEL 1-800-244-8290 FAX

21. Certification (Notification Submitted by)

I certify that to the best of my knowledge, the information contained in this notification is true and accurate, and that the asbestos abatement contractor will be/has been contracted to implement work practices as required by 06-096 CMR 425 effective April 3, 2011.



Signature

Kyle Rickett
Print Name

Date 7/30/14

Mailing Address 590 County Rd

City Westbrook State ME Zip 04092

TEL 207-773-1276 FAX 207-772-1203

Remember

Submit completed pages 1 thru 3 of Form N for each original notification.

Submit pages 4 or 5 only as needed.

ME DEP USE ONLY

Postmark/ FAX/ hand-delivered _____
Date Received _____ Check # _____
NESHAP _____ State _____
Waiver _____

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**FORM
N**


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22. Emergency Notification (oral notification must be made within 1 working day of the emergency)

Complete when a waiver to the standard notification period is requested for an emergency asbestos removal project which is necessitated by a sudden, unexpected event such as non-routine failures of equipment or by actions of fire and emergency medical personnel pursuant to duties within their official capacities. Written emergency notification must be received by the Department as soon as possible, but no later than 72 hours after the emergency.

Any required notification fee for the emergency project shall be received no later than 3 days after the emergency notification is submitted.

Detailed Explanation (Include the date and hour on which the emergency occurred)



Signature (Emergency Notification requested by)

Kyle Rickett
Print Name

Date _____

23. Notification Timeframe Waiver Request (must be received by MEDEP at least 24 hours prior to the start of the project)

Complete when a waiver to the standard notification period is requested when reasonable planning & foresight could not have predicted the event & other notification procedures would not suffice to protect public health & the environment. Examples include discovering additional asbestos-containing material during a renovation or demolition for which an asbestos inspection was conducted (e.g., within a wall cavity or plumbing chase), a public health threat exists or will develop (e.g. clean up following a fiber release episode), or unforeseeable circumstance (e.g., boiler & associated piping/valves failure).

Any required notification fee for the notification timeframe waiver project shall be received no later than 3 days after the notification timeframe waiver notification is submitted.

Detailed Explanation Building needs to be demolished



Signature (Notification Waiver requested by)

Kyle Rickett
Print Name

Date 7/30/14

MEDEP Action on Emergency Notification or Notification Waiver Request

APPROVED DISAPPROVED (by) _____ (date) _____

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**FORM
N**

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Request for Non-Standard Work Practices

Provide written justification that presents clear & convincing evidence that the asbestos project is distinctive in some way & the proposed alternative(s) to required work practices will comply with the intent of State law & rules. Written Department approval is required prior to implementation of non-standard work practice(s).

List proposed work practice alternatives

Reasons for Non-Standard Work Practices (Explain in detail, add an attachment if needed)

Design Consultant Sign-off for Non-Standard Work Practices. (If other than the Design Consultant of record, a copy of this request must be forwarded to the original Design Consultant).

Signature _____

Print Name _____

Date _____

Company Abatement Professionals Corp ME Certification Number DC-0027

Address 590 County Rd DC Certification Expiration Date 11/2014

City Westbrook State ME Zip 04092

TEL 207-773-1276 FAX 207-772-1203

MEDEP Action on Request for Non-Standard Work Practices

APPROVED DISAPPROVED (by) _____ (date) _____

