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

F

Reviewed for Code Compliance
Inspections Division
Approved with Conditions
Date: 06/15/16

Revised 2011

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

BIO- 16-100
(Assigned by notification submitter)

2. Original Notification

X Standard
☐ Facility O&M (Approved Annual)
☐ Courtesy (Not Subject to the Rule)

3. Type of Activity

☐ Demolition
X Renovation

4. Waiver

☐ Non Standard Work Practices
☐ Emergency
X Notification Timeframe Waiver
☐ Approved Annual Non Standard

5. Facility Owner

Name Jeff Marxhausen
Address 273 Presumscot Street
City Portland State Maine Zip 04103
Contact Above
TEL 207-400-7247 FAX _____

6. Asbestos Contractor

Name **BIOSafe Environmental**
Address **17 Patrick Drive**
City **Westbrook** State **Maine** Zip **04092**
Contact **Mark Griffeth**
TEL **207-854-5262** FAX **207-854-2609**

7. Facility Location (Where removal is to take place)

BLDG Name Single Family
Floor and/or Rm.# Exterior
Physical Address 5 Merrill Street
City Portland State Maine Zip 04103

8. Facility Description

Present Use Vacant
Prior Use Single Family
BLDG Size 1000 sq/ft No. Floors 2
BLDG Age 1950's

9. Asbestos (ACM) Removal

ACM Type	Amount	Measurement
Pipe or Pipe Covering		Linear Feet
Boiler Covering		Square Feet
Mudded Fittings		Linear Feet
Duct Covering		Square Feet
Gasket Material		Square Feet
Floor Tile		Square Feet
Linoleum		Square Feet
Mastic		Square Feet
Ceiling Tiles		Square Feet
Spray-on		Square Feet
Siding		Square Feet
Transite Paneling	2000	Square Feet
Roofing/Flashing		Square Feet
Glues		Square Feet
Plaster		Square Feet
Floor Tile by Heat		Square Feet

Project Totals

Total Square Feet = 2000
Total Linear Feet = _____
Total Project = 2000

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

- X 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

_X__ All other demolitions

Demolition Dates:

Start TBD

End TBD

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 3-16-2016

Project Completion Date 3-18-2016

ACM Removal Dates (from) 3-16-2016

ACM Removal Dates (to) 3-18-2016

14. Project Work Hours

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

Weekdays (Check all that apply)

____M ____T __X__W __X__T __X__F

Weekend (Check all that apply)

_____Sat _____Sun

15. Procedure Used to Detect Presence of Asbestos

Testing _X__ Assumed Positive _____ Tested Positive

Method _____ PLM _____ TEM

Sampled By _____
(Print Name)

Company _____

16. Project Clearance

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

BIOS, Inc

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

BIOS, Inc

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 **Dana Codrey** Me Certification Number **DC # 0284**

Company **BIOS, Inc** DC Certification Expiration Date **11-30-2016**

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

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

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 **Service Transport Group, Inc**
Address **58 Pyles Lane**
City **New Castle** State **DE** Zip 19720
Contact **Tom Gaudet**
TEL **302-778-5930** FAX **302-778-0446**

20. Disposal Site

Name **Minerva Landfill**
Address **9000 Minerva Road**
City **Waynesburg** State **Ohio** Zip 44688
Contact
TEL **330-866-3435** FAX **330-866-4411**

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.

Signature

Mark Griffeth
Print Name

Date **3-14-2016**

Mailing Address **17 Patrick Drive**
City **Westbrook** State **Maine** Zip **04092**
TEL **207-854-5262** FAX **207-854-5262**

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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CITY OF PORTLAND, MAINE — RESURGAM

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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)

Mark Griffeth
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 ***Real Estate Transaction***

_____

_____

_____

Mark Griffeth
Signature (Notification Waiver requested by)

Mark Griffeth
Print Name

Date _____

MEDEP Action on Emergency Notification or Notification Waiver Request

☐ **APPROVED** ☐ **DISAPPROVED** (by)_____ (date)_____

_____

_____

_____

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Signature (Emergency Notification requested by)

Mark Griffeth
Print Name

Date _____

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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 ***Real Estate Transaction***

Signature (Notification Waiver requested by)

Mark Griffeth
Print Name

Date _____

MEDEP Action on Emergency Notification or Notification Waiver Request

☒ **APPROVED** ☐ **DISAPPROVED** (by) Sandra J Moody (date) 3-15-16

Sdm