

# PRE-DEMOLITION ENVIRONMENTAL INSPECTION SUMMARY REPORT

Prepared For:

Detroit Land Bank Authority  
65 Cadillac Square, Suite 3200  
Detroit, MI 48226

Parcel:	14005570
House No:	4336 Clements, Detroit, MI, 48238
Date Inspected:	11-18-14
Inspected By:	Forrest Budd
	A-37627

Building Information			
No. Stories	2 + Attic	Latitude	°42.388224
Year Built	1926	Longitude	°-83.138296
Square Footage	2800 SF		
Basement Square Footage	1400 SF		
Siding	Brick, Wood, Vinyl	Garage	No Garage
Color	Red/Brown	Garage Square Footage	n/a
Roof Shingles	Asphalt Shingles	Garage Siding	n/a
Electric (Gone)	Disconnected	Garage Color	n/a
Gas (Gone)	Disconnected	Garage Shingles	n/a



Site Summary



DG#1	A

A = Contains ACM  
H—Contains Hazardous Materials  
T = Tires  
DG = Demo Group #0-5  
O—Occupied

# Pre-Demolition Environmental Inspection Summary Report

Parcel: 14005570  
House No. 4336 Clements, Detroit, MI, 48238  
Date Inspected: 11-18-14

**TABLE 1**

## HAZARDOUS MATERIALS

<b>Material</b>	<b>Quantity &amp; Units</b>	<b>Location</b>
None Observed	n/a	n/a

## TIRE(s) REPORT

<b>Material</b>	<b>Quantity &amp; Units</b>	<b>Location</b>
None Observed	n/a	n/a

Pre-Demolition Environmental Inspection Summary Report

Parcel:	14005570
House No.	4336 Clements, Detroit, MI, 48238
Date Inspected:	11-18-14

**TABLE 2**  
**SUSPECT ASBESTOS CONTAINING MATERIALS**

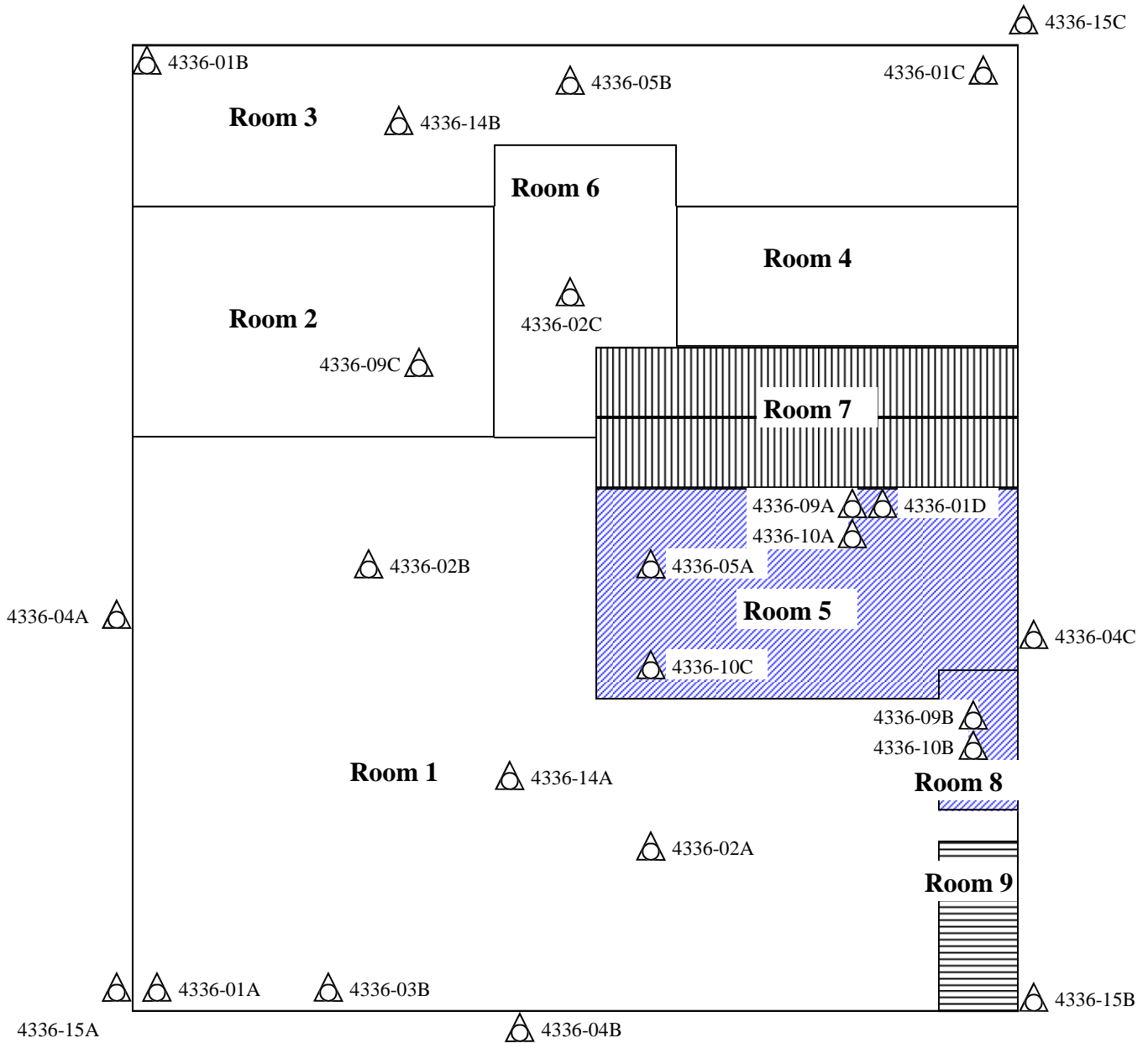
Material #	Material	Material Location	Estimated Quantity	ACM Present
1	Plaster	1st, 2nd Floor	1600 SF	No
2	Textured Ceiling	Rooms 1, 6, 13, 16	1200 SF	No
3	Window Glaze - White	1st, 2nd Floor, Basement, Attic	40 units	No
4	Window/Door Caulk - White	1st, 2nd Floor Windows/Doors	3 Doors, 32 Windows	No
5	Ceiling Tile - 2x4 White/Brown	Room 3, 5, 7	600 SF	No
6	Ceiling Tile - 12x12 White/Brown	Room 11	20 SF	No
<b>7</b>	<b>Duct Insulation - Grey</b>	<b>Rooms 10, 11</b>	<b>60 SF</b>	<b>YES</b>
8	Floor Tile + Mastic - 9x9 Brown	Room 11	600 SF	No
9	Floor Tile - 12x12 Peel & Stick Blue/Grey	Rooms 2, 5, 8 - 1st layer	400 SF	No
<b>10</b>	<b>Linoleum &amp; Paper Backing - Yellow</b>	<b>Rooms 5, 8 - 2nd layer</b>	<b>250 SF</b>	<b>YES</b>
11	Floor Tile - 12x12 Peel & Stick Grey	Room 19 - 1st layer	200 SF	No
12	Floor Tile - 12x12 Peel & Stick Tan	Room 19 - 2nd Layer	200 SF	No
13	Linoleum & Paper Backing - Yellow	Room 19, 7 - 3rd Layer	240 SF	No
14	Vapor Barrier - Grey	1st, 2nd Floor Under Hardwood Floor	2800 SF	No
15	Roof Shingle - Grey	Exterior	2200 SF	No





Table 2 - Is a summary of the materials that were sampled. Materials that test positive for asbestos have been bolded to make identification easier. Quantities that are listed are estimates only. It is the contractor's responsibility to verify all amounts of asbestos identified during the bid process.

Attachment:

Site Drawing

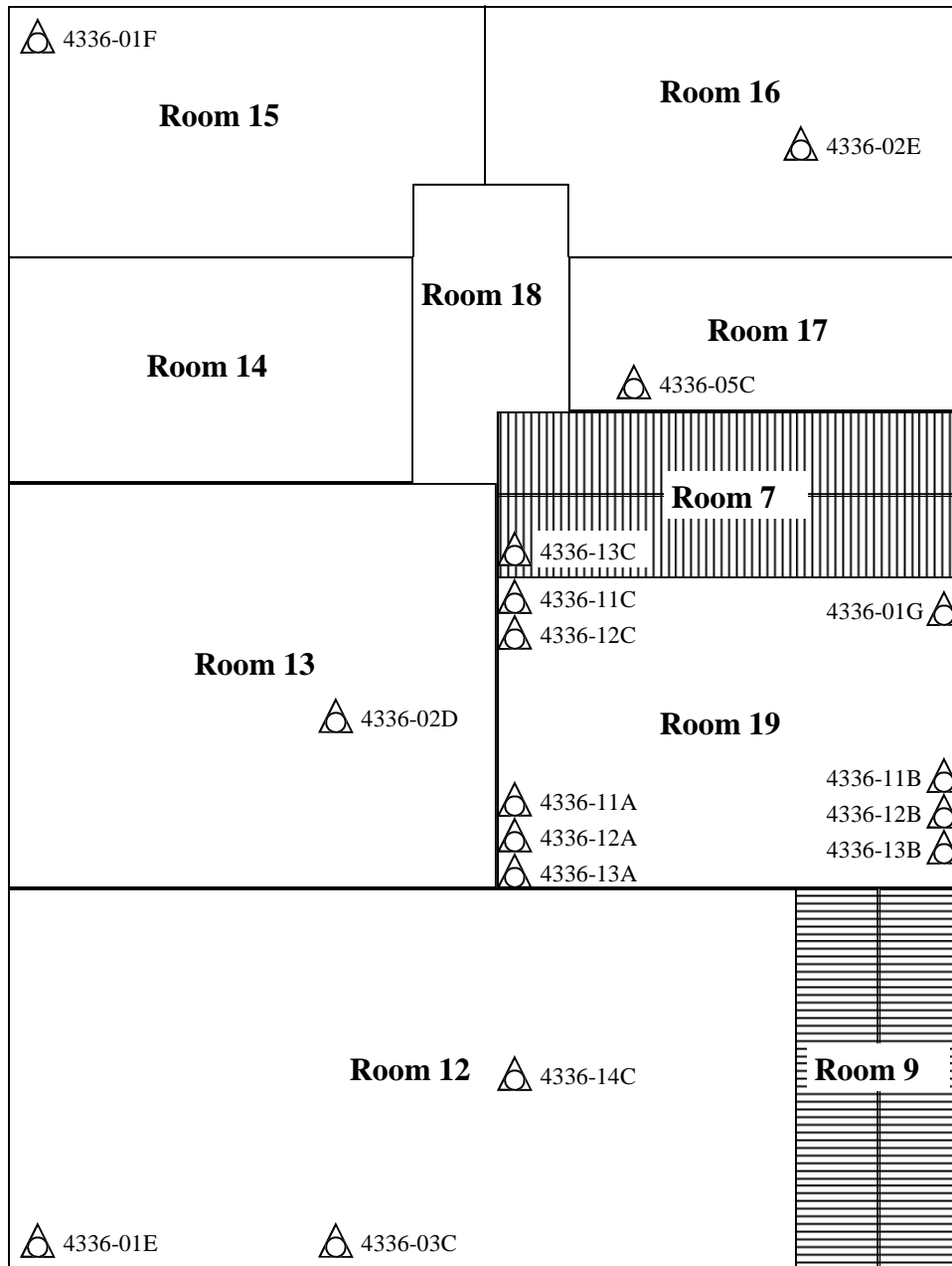
**1st floor**







-   Asbestos containing materials
- HAZ Hazardous materials
-  Sample location
-  Tires

Please Note: This is a rough floor plan only. All items, (doorways, Windows, etc.) may not be included in this illustration. Also, room and component sizes are not drawn to scale.

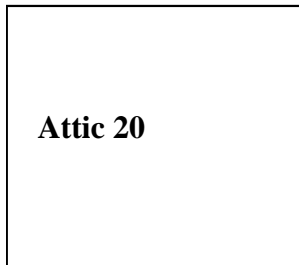
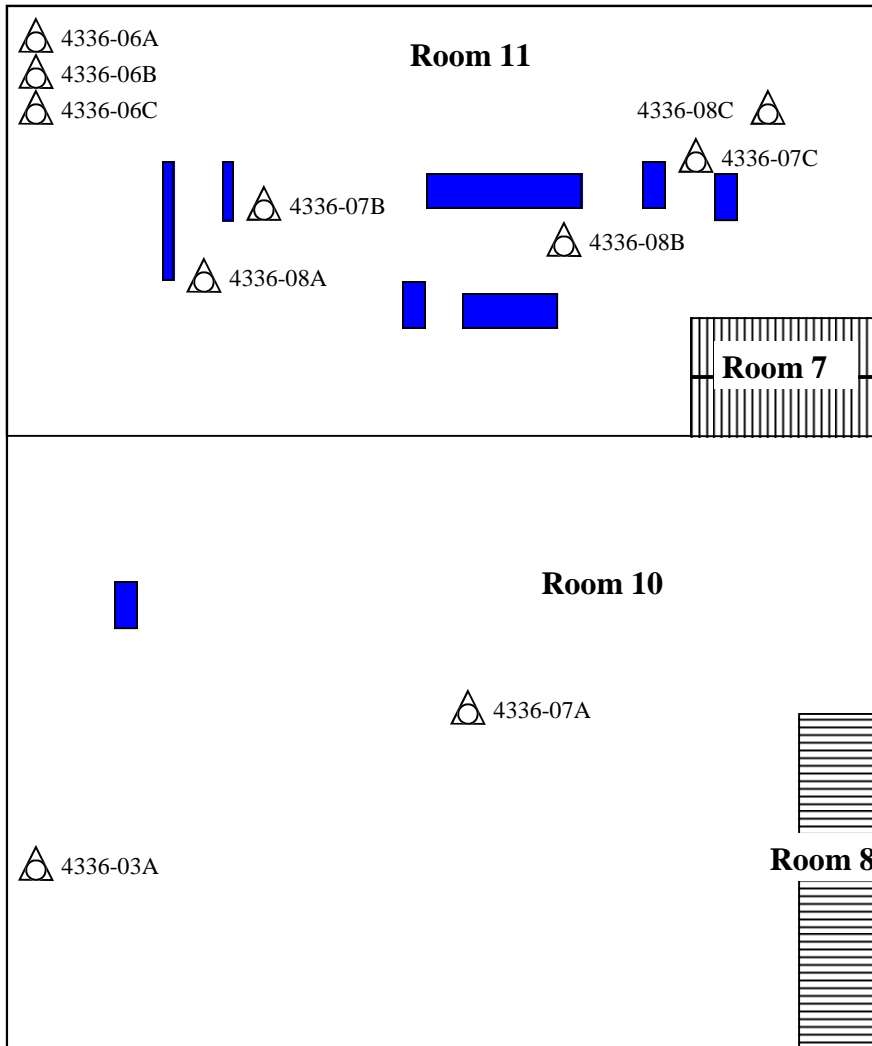
**2nd floor**







-   Asbestos containing materials
- HAZ Hazardous materials
-  Sample location
-  Tires

Please Note: This is a rough floor plan only. All items, (doorways, Windows, etc.) may not be included in this illustration. Also, room and component sizes are not drawn to scale.

### Basement



-   Asbestos containing materials
- HAZ Hazardous materials
-  Sample location
-  Tires

Please Note: This is a rough floor plan only. All items, (doorways, Windows, etc.) may not be included in this illustration. Also, room and component sizes are not drawn to scale.

Attachment:

Site Photographs



## Representative Pictures of Asbestos Containing Materials

Parcel:	14005570
House No.	4336 Clements, Detroit, MI, 48238
Date Inspected:	11-18-14



Duct Insulation, grey



Linoleum & Paper Backing

Attachment:

Laboratory Analytical Results

# ENVIRONMENTAL TESTING LABORATORIES, INC.



38900 HURON RIVER DRIVE, SUITE 200  
ROMULUS, MICHIGAN 48174  
(734) 955-6600  
FAX: (734) 955-6604

To : Environmental Testing And Consulting Inc.  
38900 Huron River Drive  
Romulus, MI 48174

Project Location : Vacant Residence  
4336 Clements, Detroit, MI

Attention : Juanita Jones

Client Project : 14005570

ETC Job : 168583

Report Date : 11/21/2014

Login #	Sample ID	Work Requested	Completed
298945	1A	Asbestos Analysis	11/21/2014
298946	1B	Asbestos Analysis	11/21/2014
298947	1C	Asbestos Analysis	11/21/2014
298948	1D	Asbestos Analysis	11/21/2014
298949	1E	Asbestos Analysis	11/21/2014
298950	1F	Asbestos Analysis	11/21/2014
298951	1G	Asbestos Analysis	11/21/2014
298952	2A	Asbestos Analysis	11/21/2014
298953	2B	Asbestos Analysis	11/21/2014
298954	2C	Asbestos Analysis	11/21/2014
298955	2D	Asbestos Analysis	11/21/2014
298956	2E	Asbestos Analysis	11/21/2014
298957	3A	Asbestos Analysis	11/21/2014
298958	3B	Asbestos Analysis	11/21/2014
298959	3C	Asbestos Analysis	11/21/2014
298960	4A	Asbestos Analysis	11/21/2014
298961	4B	Asbestos Analysis	11/21/2014
298962	4C	Asbestos Analysis	11/21/2014
298963	5A	Asbestos Analysis	11/21/2014
298964	5B	Asbestos Analysis	11/21/2014

This report is intended for use solely by the individual or entity to which it is addressed. This report may not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the Federal Government. It may contain information that is privileged, confidential and otherwise exempt by law from disclosure. If the reader of this information is not the intended recipient or an employee of its intended recipient, you are herewith notified that any dissemination, distribution or copying of this information is strictly prohibited. If you have received this information in error, please notify ETL immediately. Thank you.

**ENVIRONMENTAL TESTING LABORATORIES, INC**

38900 HURON RIVER DRIVE  
 ROMULUS, MICHIGAN 48174  
 (734) 955-6600  
 FAX: (734) 992-2281  
 www.2etil.com

**Bulk Asbestos  
 Chain of Custody**

ETL Project #:

<b>Client:</b> ETC	<b>Contact:</b> Tammy Wall	<b>Project Location/name:</b>  4356 CLEMENTS
	<b>Phone:</b> 734-955-6600	
<b>Address:</b> 38900 W. Huron River Drive	<b>Fax:</b> 734-955-6804	<b>Client Project #:</b> 168583
	<b>E-mail:</b> ras.4s@2etil.com	<b>Date Sampled:</b> 11/18/2014
<b>Please Provide Results:</b> <input checked="" type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Verbal <input type="checkbox"/> Other _____		

**Turnaround Time (TAT):**  RUSH  Same Day  24 hr  48 hr  Standard (3+ days)  Other \_\_\_\_\_

**PLM Instructions**  
(Check all that apply)

<input checked="" type="checkbox"/> PLM EPA600/R-93/116, 1993 (Standard method)	<input checked="" type="checkbox"/> Stop at 1st Positive - <i>Clearly mark Homogenous Group</i>
<input type="checkbox"/> Point Counting: 400 Points*	
<input type="checkbox"/> PLM Non-Building Material (Dust, Wipe, Tape)	<input type="checkbox"/> Soil or Vermiculite Analysis *

\* Additional charge and turnaround may be required

Lab ID	Sample ID	Sample Location	Material Description
298945	1 A-C7		
thru	2 A-E		
298995	↓		
	15 A-C		

		Date	Time
Relinquished (Name/Organization):	Megan Cords	11-19-14	5 am/pm
Received (Name/ETL):	<i>MF</i>	11/20/14	8:30 am/pm
Stereoscopic Analysis (Name/ETL):			am/pm
Sample Login (Name/ETL):			am/pm
Analysis (Name/ETL):			am/pm
QA/QC Review (Name/ETL):			am/pm

<b>Special Instructions:</b>	<b>Remarks:</b>
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# Surfacing materials

Job #: 168593

Building: U336 dorms

Date: 11-18-11

Material no.	Material Description	Sample Letter	Sample Location Need only be room	Material Located throughout bldg (Please List all Rooms)	Quantity	Picture #	
1	Material: Plaster	A	1	1st 2nd Floor	16000 ft	122401	
	Grey, wood lattice	B	3				298945
		C	3				298946
		D	5				298947
		E	12				298948
		F	15				298949
		G	19				298950
2	Material: Textured ceiling	A	1	Rms 1, 6, 13, 16	12000 ft	122404	
	white	B	1				298952
		C	6				298953
		D	13				298954
		E	16				298955
							298956

100 SF = 3 samples

1000 - <5000 = 5 samples

>5000 = 7 samples

**ASBESTOS Material Sampling Summary Sheet**  
**Non-surfacing materials**

Job #: **166 583**

Building: **4336 Chem Rts**

Date: **11-18-14**

Material no.	Material Description	Sample Letter	Sample Location Need only be room	Material Located throughout bldg (Please List all Rooms)	Quantity	Picture #
3	Material: <b>white</b> Description: <b>ceramic tile</b>	A	10	298957 1st 2nd floor	40	122418
		B	1			
		C	12			
4	Material: <b>white</b> Description: <b>ceramic tile</b>	A	Extension	298958 298959 298960 298961 298962	around doors and windows	7 Pails 32 units 500 lbs
		B	" "			
		C	" "			
5	Material: <b>2x4 White Brown</b> Description: <b>ceramic tile</b>	A	5	298963 298964 298965	Rm 3, 5, 7	600 sq ft
		B	3			
		C	17			
6	Material: <b>12x12 White Brown</b> Description: <b>ceramic tile</b>	A	11	298966 298967 298968	Rm 11	20 sq ft
		B	11			
		C	11			
7	Material: <b>Grey</b> Description: <b>Dark wood panel</b>	A	10	298969 298970 298971	Rm 10, 11	60 sq ft
		B	11			
		C	11			
8	Material: <b>9x9 Brown</b> Description: <b>Tile + mortar</b>	A	11	298972 298973 298974	Rm 11	600 sq ft
		B	11			
		C	11			
9	Material: <b>12x12 Blue grey</b> Description: <b>Tile black floor</b>	A	5	298975 298976 298977	Rm 2, 5, 6	400 sq ft
		B	8			
		C	2			
10	Material: <b>yellow</b> Description: <b>long hair fiber bank</b>	A	5	298978 298979 298980	1st Rm 5, 6 2nd	250 sq ft
		B	5			
		C	5			

**ASBESTOS Material Sampling Summary Sheet**  
**Non-surfacing materials**

Job #: 168 583		Building: 4336 Clements			Date: 11/18/14		
Material no.	Material Description	Sample Letter	Sample Location Need only be room	Material Located throughout bldg (Please List all Rooms)	Quantity	Picture #	
11	Material: Tile Description: 12x12 Green	A	19	Rm 9	200 <sup>2</sup> / <sub>4</sub>	122702	
		B	10				
		C	19				
12	Material: Tile Description: 12x12 Tan	A	19	Rm 19	200 <sup>2</sup> / <sub>4</sub>	122702	
		B	19				
		C	19				
13	Material: Insulation & Paper backing Description: Yellow	A	19	Rm 19, 7	240 <sup>2</sup> / <sub>4</sub>	122702	
		B	19				
		C	19				
14	Material: Vapor barrier Description: Grey	A	7	3rd	2800 <sup>2</sup> / <sub>4</sub>	122713	
		B	3				
		C	12				
15	Material: Roof Shingles Description: Grey	A	Center	Roof	2200 <sup>2</sup> / <sub>4</sub>	112316	
		B	N N				
		C	X N				
	Material: Description						
	Material: Description						
	Material: Description						
	Material: Description						

Attachment:

MDEQ Notification of Intent to  
Renovate / Demolish Form EQP 5661



# NOTIFICATION OF INTENT TO RENOVATE/DEMOLISH



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
(MDEQ) AIR QUALITY DIVISION  
NESHAP, 40 CFR Part 61, Subpart M



MICHIGAN DEPARTMENT OF LICENSING AND  
REGULATORY AFFAIRS (LARA), ASBESTOS PROGRAM,  
P.A. 135 OF 1986, AS AMENDED, Section 220 (1-4) or (8)

### DEQ/LARA USE ONLY

Postmark Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Rec'd Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Valid No. \_\_\_\_\_

OK  Send Def Ltr. Date of Def Ltr. \_\_\_\_/\_\_\_\_/\_\_\_\_

FOLLOW UP \_\_\_\_/\_\_\_\_/\_\_\_\_ Spoke w/ \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Notification No. \_\_\_\_\_ Trans No. \_\_\_\_\_

### Calculate LARA Asbestos Project Fee: (1% Project Fee)

Total Project Cost: \_\_\_\_\_ x 0.01 = \_\_\_\_\_

Type of Contractor: \_\_\_\_\_ License No.: \_\_\_\_\_

Licensing Authority: \_\_\_\_\_

### 1. NOTIFICATION:

Date of Notification: \_\_\_\_\_

Date of Revision(s): \_\_\_\_\_

Notification Type:  Original  Revised  Canceled  Annual

#### Mark appropriate boxes: (both DEQ and LARA may apply):

#### DEQ (NESHAP) [260 ln. ft./160 sq. ft. or more is threshold]

Planned Renovation – 10 **working** days notice

Emergency Renovation

Scheduled Demolition – 10 **working** days notice

Intentional Burn – 10 **working** days notice

Ordered Demolition

#### LARA (MIOSHA) [Will not accept annual notifications]

Demo, Reno, Encap. (>10 ln. ft./15 sq. ft.) 10 **calendar** days notice

Emergency Renovation/Encapsulation

### 2. PROJECT SCHEDULE:

**START DATE** **END DATE**

\* Renovation \_\_\_\_\_

+Asb. Removal \_\_\_\_\_

+Demolition: \_\_\_\_\_

Encapsulation: \_\_\_\_\_

**Work Schedule:** Please indicate the anticipated days of the week and work hours for the purpose of scheduling a compliance inspection.

**Days of the Week** **Work Hours**

Asb. Removal: \_\_\_\_\_

Demolition: \_\_\_\_\_

Encapsulation: \_\_\_\_\_

\* Includes setup, build enclosure, asbestos removal, demobilizing, etc.

+Include **only** those dates you are conducting asbestos removal/demo.

Check here if this is a multi-phased project, attach a schedule showing the start/end date of each phase.

### 3. ABATEMENT CONTRACTOR: Internal Project #: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### 4. DEMOLITION CONTRACTOR: Internal Project #: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### 5. FACILITY OWNER: ("Facility" includes Bridges)

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### 6. FACILITY DESCRIPTION:

Facility Name: \_\_\_\_\_

Location Address/Description: \_\_\_\_\_

\_\_\_\_\_ If Apt. # of units: \_\_\_\_\_

City/Twp. \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Nearest Crossroad: \_\_\_\_\_

Size: (sq. ft.) \_\_\_\_\_ No. of Floors: \_\_\_\_\_ Floor No.: \_\_\_\_\_

Age: \_\_\_\_\_ Present Use: \_\_\_\_\_ Prior Use: \_\_\_\_\_

Specific Location(s) in Facility: \_\_\_\_\_

### 7. DISPOSAL SITE:

Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

### 8. WASTE TRANSPORTER 1:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

### WASTE TRANSPORTER 2:

### 9. ORDERED DEMOLITIONS: (See NESHAP regulations for definition of "Ordered Demolition.") A copy of the official Order must accompany this notification.

Gov't Agency Ordering Demo: \_\_\_\_\_

Name/Title of Person Signing Order: \_\_\_\_\_

Date of Order: \_\_\_\_\_ Date Ordered to Begin: \_\_\_\_\_

### 10. IS ASBESTOS PRESENT? Yes No To be removed prior to demolition

**Estimate the amount of asbestos:** Include RACM (Regulated Asbestos Containing Material) to be removed, encapsulated, etc. Also include the amount and type (floor tile, roofing, etc.) of non-friable Category I and/or Category II ACM that **will not** be removed prior to demolition. (**NOTE:** In a demolition, cementitious ACM **cannot** remain in a structure, as it is likely to become regulated in the demolition/handling process. It **must** be removed prior to demolition.)

RACM to be Removed

RACM to be Encapsulated

Non-friable ACM **not** removed prior to demo.

Category I

Category II

Units of Measure

				<input type="checkbox"/> Ln. Ft.	<input type="checkbox"/> Ln. M.
				<input type="checkbox"/> Sq. Ft.	<input type="checkbox"/> Sq. M.
				<input type="checkbox"/> Cu. Ft.*	<input type="checkbox"/> Cu. M.*

\*Volume (cubic ft./meters) should be used only if unable to measure by linear/square measure (example: asbestos has fallen off of surface).

(continued on reverse side)

NOTIFICATION OF INTENT TO RENOVATE/DEMOLISH (continued)

11. PROJECT DESCRIPTION: Complete A) for Renovation (asbestos removal/encapsulation) and/or B) for Demolition:

A) RENOVATION: Mark all surfaces/types of RACM to be removed:

- checkboxes for Piping, Fittings, Boiler(s), Tanks(s), Beam(s), Duct(s), Tunnel(s), Ceiling Tile(s), Mag Block, Other (describe)

Encapsulation (for LARA): Mark surfaces/types to be encapsulated:

- checkboxes for Piping, Fittings, Boiler(s), Tank(s), Beam(s), Duct(s), Tunnel(s), Ceiling Tile(s), Other (describe)

Method of removal: Describe how the asbestos will be removed from the surface (example: glove bag, scrape with hand tools, cut in sections and carefully lower, etc.):

B) DEMOLITION: Describe the method of demolition of facility, bridge, etc., and indicate if complete or partial. If partial, describe which part of facility bridge, etc., will be demolished:

12. ENGINEERING CONTROLS: Describe work practices and engineering controls used to prevent visible emissions before, during, and after removal, and until proper disposal:

13. UNEXPECTED ASBESTOS: Describe the steps you intend to follow in the event that unexpected RACM is found or previously non-friable asbestos becomes friable (crumbled, pulverized, reduced to powder, etc.) and therefore regulated:

14. PROCEDURE(S) USED TO DETECT THE PRESENCE OF ASBESTOS: A) Indicate how you determined whether or not asbestos is in the facility. If analytical sampling was used, describe method of analysis. (The determination of the presence or absence of asbestos must be made prior to submitting a renovation/demolition notification.):

B) Name, address, and phone number of company performing asbestos survey:

C) Name, accreditation number of inspector, and date of inspection:

15. EMERGENCY RENOVATIONS: Date/time of emergency: Describe the sudden, unexpected event:

Explain how the event caused unsafe conditions, and/or would cause equipment damage and/or an unreasonable financial burden:

16. I certify that an individual trained in the provisions of 40 CFR Part 61, Subpart M, will be on-site during the renovation and during demolition involving RACM above the threshold and/or during an ordered demolition. Evidence that this person has completed the required training will be available for inspection at the renovation or demolition site.

Signature of Owner or Abatement Contractor Date

Signature of Owner or Demolition Contractor Date

17. Signature Requirements for Projects with Negative Pressure Enclosures: (required by LARA) Per Section 221(1)(2) of P.A. 135 of 1986, as amended, clearance air monitoring is required for any asbestos abatement project involving 10 linear feet/15 square feet or more of friable material which is performed within a negative pressure enclosure. I (the building owner or lessee) have been advised by the contractor of my responsibility under Act 135 to have clearance air monitoring performed on this project.

Signature of Building Owner or Lessee Date

Signature of Asbestos Abatement Contractor Representative Date

NOTE: It is not mandatory that a signed copy be sent to LARA unless requested. For affected projects, this section of the notification form must be completed, signed, and made part of your records before the project begins.

18. I certify that the above information is correct:

Printed Name of Owner/Operator Date

Signature of Owner/Operator Date

MAILING ADDRESSES/PHONE NUMBERS: (See Item 1 to determine which agency requirements/regulations are applicable to your project.)

For Public Act 135 of 1986, as amended, Section 220 (1-4) or (8), mail to address below. For more info visit: http://www.michigan.gov/asbestos

MIOSHA Asbestos Program LARA, CSHD P.O. Box 30671 Lansing, MI 48909-8171

517.636.4551 (office), 517.322.1713 (fax)

For NESHAP Demolitions/Renovations, 40 CFR, Part 61, Subpart M, please use the e-submittal process. For more information visit http://www.michigan.gov/air, under Air Links click on Asbestos NESHAP Program.

NESHAP Asbestos Program DEQ, AQD P.O. Box 30260 Lansing, MI 48909-7760

517.284.6777 (Office)

Attachment:

Inspection Procedures

# **Pre-Demolition Environmental Inspection Procedures**

## **HAZARDOUS MATERIALS INSPECTION**

A table showing hazardous materials, above the household quantity limitations, found at the house is included as **Table 1: Hazardous Materials**. This table lists non-asbestos materials that may be hazardous and require special handling and disposal requirements. Items that might be in this category include: mercury switches, fluorescent lighting tubes and ballasts, halogen lights, Freon in refrigeration units, pesticides, herbicides, paints, solvents, etc.

Under the Resource Conservation and Recovery Act (RCRA) that addresses hazardous wastes, there is a residential household quantity exclusion. Materials are listed in Table I if they are present in quantities larger than what would typically be expected to be used and disposed in a normal household, and/or may require special handling and disposal requirements, such as: paints, solvents, adhesives, oils, tires, large circuit boards (such as televisions, computers, and security systems), prescription drugs, and syringes. On the other hand, if there were only household sized containers of maintenance, cleaning, non-prescription health and personal hygiene products, radios, and controllers present, as would be found in most homes, these materials would not be listed.

Fluorescent lighting systems have ballasts that have the potential to contain polychlorinated biphenyls (PCBs). Although PCBs are no longer commercially produced in the United States, they may be present in U.S. products that were produced prior to 1979, and may still be commercially available from other countries. Fluorescent bulbs, thermostats, and thermometers may contain mercury and can be treated as Universal Waste, which are streamlined standards for managing common types of hazardous waste.

If obtained, photographs of hazardous materials for the above referenced property are included in **Attachment: Site Photographs**.

## **ASBESTOS CONTAINING BUILDING MATERIAL INSPECTION**

The property was inspected for the presence of asbestos-containing materials (ACMs) in order to meet the requirements of 40 CFR, Part 61, Subpart M, National Emissions Standards for Hazardous Air Pollutants (NESHAP).

### **Asbestos Inspection**

The property was inspected for the presence of suspected ACMs. Typical building materials that may contain asbestos included drywall, plaster, stucco, floor tiles, roofing felt and shingles, ceiling tiles, insulation, pipe insulation, and duct insulation.

### **Sample Collection**

At least two samples of each suspected asbestos containing material identified during the inspection was collected. For surfacing materials (sprayed and/or troweled on) a minimum of three samples were collected for areas that contained less than 1000 square feet of the material; 5 samples were collected for materials 1000 to 5000 square feet, and 7 samples were taken for areas greater than 5000 square feet. A Michigan Accredited Asbestos Inspector collected representative samples of each suspected ACM. Each sample was placed into a sealed plastic bag and labeled. A description of the material and location of the sample collected was recorded in the field notes. The total quantity of each suspected ACM was estimated and recorded in the field notes.

A listing of suspect ACMs at this property that were sampled and sent to the laboratory for analysis is included in **Table 2**. A copy of a floor plan showing sample locations is included in **Attachment: Site Drawing**.

## Pre-Demolition Environmental Inspection Procedures

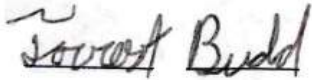
### Laboratory Analysis / Results

Each sample of suspect ACM collected at this property was analyzed for asbestos content using polarized light microscopy (PLM) by a NVLAP and NIST accredited laboratory in accordance with 40 CFR Ch. I (1-1-87 Edition) Part 763, Subpart F, Appendix A, pp. 293-299. Asbestos containing materials are defined as materials that contain greater than one percent (>1%) asbestos.

Each sample collected for analysis was delivered to either IATL (International Asbestos Testing Laboratories), 9000 Commerce Parkway, Suite B, Mt. Laurel, NJ 08054, ETL (Environmental Testing Laboratories), 38900 W. Huron River Drive, Suite 200, Romulus, MI 48174, and/or ACM Engineering & Environmental Services, 26598 US Highway 20 West, South Bend, IN 46628. Laboratory results are included in **Attachment: Laboratory Analytical Results.**

### SIGNATURE

This report was prepared based on the site conditions that existed at the time of the inspection, sample collection, and the laboratory analytical results.



Prepared by: \_\_\_\_\_  
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