



# Lawhon & Associates, Inc.

ENVIRONMENTAL CONSULTING AND ENGINEERING SERVICES

Columbus

Cleveland

Dayton

January 31, 2023

Joan Zbin  
Transportation Division Manager  
Pennoni Associates Inc.  
2 Summit Park Drive, Suite 335  
Independence, Ohio 44131  
330-222-6285 (office)

**Subject: Asbestos Inspection of GEA 00044 14930 (SFN #2800365/PID #115876) South Street Bridge over an Unidentified Stream in Chardon, OH 44024 (L&A 22-0593)**

Joan Zbin:

On January 26, 2023, Mr. Will Arnold, Ohio Environmental Protection Agency (OEPA) Certified Asbestos Hazard Evaluation Specialist (AHES OH #545305) and Mr. Jason Matyac, OEPA (AHES OH #547527) of Lawhon & Associates, Inc (L&A) conducted an asbestos survey of GEA 00044 14930 (SFN #2800365/PID #115876) South Street Bridge over an Unidentified Stream in Chardon, OH 44024. The purpose of the survey was to determine the presence of asbestos-containing materials (ACM) located on the structure.

The survey consisted of an inspection of all accessible areas below the deck of the bridge to determine the presence, location and quantities of asbestos-containing materials. Bulk samples were collected from suspect materials that could potentially be impacted during demolition/renovation work activities. Energized electrical components, utility conduits, and materials encased in concrete were not sampled as part of this effort. A diagram of the bridge and asbestos bulk sampling locations can be found in Appendix B. There were no available bridge plans for review for bridge.

## **Suspect Materials**

L&A did not identify any suspect asbestos containing materials (ACM) while surveying the subject bridge

## **Materials Identified as Asbestos-Containing**

Under the current EPA/NESHAP regulations, materials that contain greater than 1% asbestos are considered to be an asbestos-containing material (ACM). There were no suspect materials sampled, therefore there were no materials found to be Asbestos Containing Material as defined by U.S. EPA/NESHAP regulations.

## **Attachments**

Appendix A contains the Ohio Environmental Protection Agency Certifications for Mr. Will Arnold and Mr. Jason Matyac.


Appendix B contains a Photolog.

Appendix C contains the Ohio Environmental Protection Agency Notification of Demolition and Renovation.

**Summary**

On January 26, 2023, Mr. Will Arnold, Ohio Environmental Protection Agency (OEPA) Certified Asbestos Hazard Evaluation Specialist (AHES OH #545305) and Mr. Jason Matyac (AHES OH #547527) of Lawhon & Associates, Inc (L&A) conducted an asbestos survey of GEA 00044 14930 (SFN #2800365/PID #115876) South Street Bridge over an Unidentified Stream in Chardon, OH 44024. No Asbestos Containing Materials (ACM) were identified in the course of the survey. If you have any questions, please contact Matt Geiger at (614) 481-8600.

Sincerely,



Matt Geiger, AHES 35832  
Project Manager



Will Arnold, AHES 545305  
Environmental Scientist

**APPENDIX A**  
**OHIO ENVIRONMENTAL PROTECTION AGENCY CERTIFICATIONS**



# **The InService Training Network**

## **Asbestos Building Inspector Initial Course**



## **Jason Matyac**

has successfully completed the Asbestos Building Inspector Initial Course and passed by at least 70%  
the course examination for accreditation under Section 206 of the Toxic Substance Control Act, Title II, and Indiana 326 IAC 18-2  
Provided by: The InService Training Network, Inc., 705D Lakeview Plaza Blvd, Worthington, OH 43085 (614) 436-0980

**Course Dates:** July 25 - 27, 2022

**Examination Date:** July 27, 2022

**Course Instructor:**

  
Frank Rowe

**Course Location:** Worthington, Ohio

**Expiration Date:** July 27, 2023

**Certificate Number:** ITNII2038



# **The InService Training Network**

## **Asbestos Management Planner Initial Course**




**Jason Matyac**

has successfully completed the Asbestos Management Planner Initial Course and passed by at least 70%  
the course examination for accreditation under Section 206 of the Toxic Substance Control Act, Title II, and Indiana 326 18-2  
Provided by: The InService Training Network, Inc., 705D Lakeview Plaza Blvd, Worthington, OH 43085 (614) 436-0980

**Course Dates:** July 28 - 29, 2022

**Examination Date:** July 29, 2022

**Course Instructor:**

  
Frank Rowe

**Course Location:** Worthington, Ohio

**Expiration Date:** July 29, 2023

**Certificate Number:** ITNMI2038





**Mike DeWine**, Governor  
**Jon Husted**, Lt. Governor  
**Laurie A. Stevenson**, Director

10/17/2022

Jason Matyac  
Lawhon & Associates, Inc.  
1441 King Ave  
Columbus, OH 43212

RE: Evaluation Specialist  
Certification Number: ES547527  
Expiration Date: 10/17/2023

Dear Jason Matyac:

This letter and enclosed certification card approves your request to be certified as an asbestos Evaluation Specialist. You must present your card upon request at any project site while performing duties. Copies of cards are not acceptable as proof of certification.

This certification may be revoked by the Director of the Ohio Environmental Protection Agency (EPA) for violation of any of the requirements of 3745-22 or 3745-20 of the Ohio Administrative Code.

If you have any questions, please contact the Asbestos Program at 614-644-0226 or by email at [asbestoslicensing@epa.ohio.gov](mailto:asbestoslicensing@epa.ohio.gov).

Sincerely,

Joshua S. Koch  
Manager, Business Operations Support Section  
Ohio EPA - Division of Air Pollution Control



0 • P.O. Box 1049 • Columbus, OH 43216-1049  
4) 644-3020 • (614) 644-3184 (fax)



# **The InService Training Network**

## **Asbestos Building Inspector and Management Planner Refresher Courses**

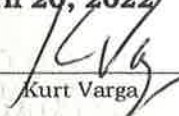


### **William Arnold**

has successfully completed the Asbestos Building Inspector and Management Planner Refresher Courses and passed by at least 70% the course examinations for accreditation under Section 206 of the Toxic Substance Control Act, Title II, and Indiana 326 IAC 18-2  
Provided by: The InService Training Network, Inc., 705D Lakeview Plaza Blvd, Worthington, OH 43085 (614) 436-0980

**Course Dates:** April 20, 2022

**Course Director:**

  
Kurt Varga

**Expiration Date:** April 20, 2023

**Examination Date:** April 20, 2022

**Course Location:** Worthington, Ohio

**Certificate Numbers:** ITNIR7246 & ITNMPR7246

ITN

ITN





**Mike DeWine**, Governor  
**Jon Husted**, Lt. Governor  
**Laurie A. Stevenson**, Director

5/24/2022

William Arnold  
Lawhon & Associates, Inc.  
1441 King Avenue  
Columbus, OH 43212

RE: Evaluation Specialist  
Certification Number: ES545305  
Expiration Date: 6/22/2023

Dear William Arnold:

This letter and enclosed certification card approves your request to be certified as an asbestos Evaluation Specialist. You must present your card upon request at any project site while performing duties. Copies of cards are not acceptable as proof of certification.

This certification may be revoked by the Director of the Ohio Environmental Protection Agency (EPA) for violation of any of the requirements of 3745-22 or 3745-20 of the Ohio Administrative Code.

If you have any questions, please contact the Asbestos Program at 614-644-0226 or by email at [asbestoslicensing@epa.ohio.gov](mailto:asbestoslicensing@epa.ohio.gov).

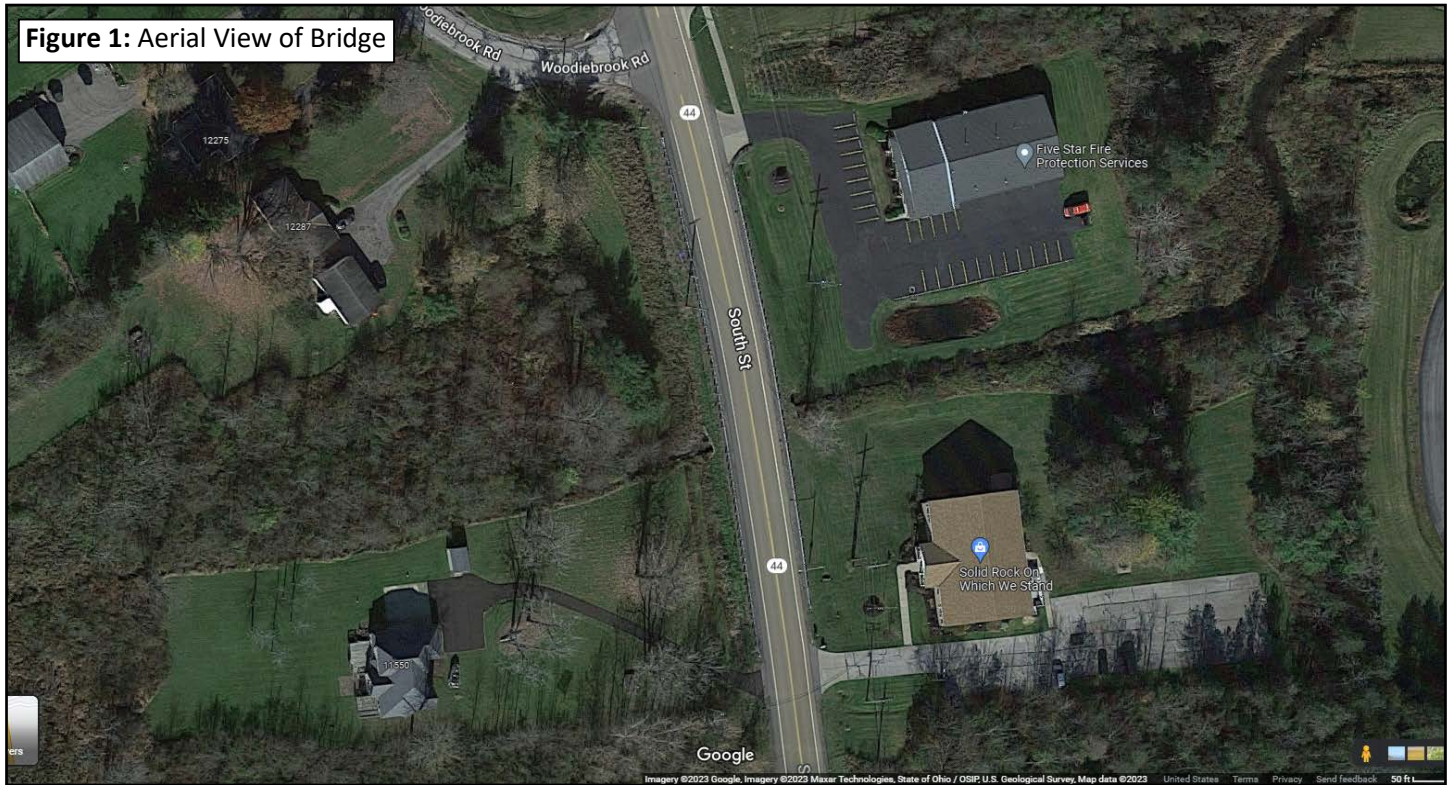
Sincerely,


Joshua S. Koch  
Manager, Business Operations Support Section  
Ohio EPA - Division of Air Pollution Control





**APPENDIX B**  
**PHOTOLOG**





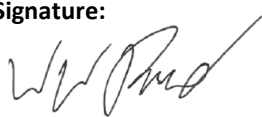

**Lawhon & Associates, Inc.**  
ENVIRONMENTAL CONSULTING AND ENGINEERING SERVICES

Columbus  
Cleveland  
Dayton

**Photo Log**

**Inventory Bridge Number:** GEA 00044 14930  
**Structure File Number:** 2800365  
**Date Sampled:** January 26, 2023  
**Surveyors:** Will Arnold, AHES OH#545305  
 Jason Matyac, AHES OH#547527

**Signature:**

Page 1 of 1

1441 King Avenue | Columbus, Ohio 43212 | P: 614.481.8600 | F: 614.481.8610 | www.lawhon-assoc.com



**APPENDIX C**  
**OHIO ENVIRONMENTAL PROTECTION AGENCY**  
**NOTICE OF DEMOLITION AND RENOVATION**



# Notification of Demolition and Renovation/Abatement

## Section 1: General Information

Division of Air Pollution Control

Work on projects cannot begin until 10 working days after a COMPLETE original notification form, **including payment**, is submitted to Ohio EPA. Instructions and a worksheet for fee calculation are available at [epa.ohio.gov/asbestos](http://epa.ohio.gov/asbestos). This form can be completed, and payment made, at [ebiz.epa.ohio.gov](http://ebiz.epa.ohio.gov). Questions? [asbestos@epa.ohio.gov](mailto:asbestos@epa.ohio.gov) or (614) 466-0061.

Ohio EPA Use Only	Notification #:	Postmarked: / /	Received: / /	<input type="checkbox"/> Hand-Delivered
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### 1) Notification Information (Check all that apply)

<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Revision # (count):	<input type="checkbox"/> Installation	<input type="checkbox"/> Emergency	<input type="checkbox"/> Annual	<input type="checkbox"/> Cancellation	County: Geauga
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### 2) Owner, Asbestos Abatement Contractor, Billing and Fire Department Information

Revised? ☐

Owner		
Name: ODOT District 12		Is this a company? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address: 5500 Transportation Boulevard		Contact Person:
City: Garfield Heights	State: Ohio	Zip: 44125
Email:	Phone: (216) 581-2100	Fax:
Asbestos Abatement Contractor (if applicable)		
Name:		License #: AC
Address:		Expiration Date: / /
City:		Contact Person:
State:	Zip: -	
Email:	Phone: ( ) -	Fax: ( ) -
Billing Contact		
Is this contact associated with the <input type="checkbox"/> Owner, <input type="checkbox"/> Asbestos Abatement Contractor, or <input type="checkbox"/> Demolition Contractor (if not installation)?		
Address:		Contact Person:
City:	State:	Zip: -
Email:	Phone: ( ) -	Fax: ( ) -
Fire Department (if applicable)		
Name:		
Address:		Contact Person:
City:	State:	Zip: -
Email:	Phone: ( ) -	Fax: ( ) -

### 3) Ohio Asbestos Hazard Evaluation Specialist and Evaluation Procedure

Revised? ☐

Evaluation Specialist: Will Arnold	Certification #: ES 545305	Expiration Date: 6/22/2023
Procedure, including analytical methods, employed to detect the presence of and to estimate the quantity of regulated asbestos-containing material (RACM) and Category I and Category II non-friable asbestos-containing material: <input type="checkbox"/> PLM <input type="checkbox"/> Point Count <input type="checkbox"/> TEM <input checked="" type="checkbox"/> Other Method (Explain Below):		
Visual Assessment no suspect materials identified		

### 4) Procedures to be followed should unexpected RACM be discovered (check all that apply)

Revised? ☐

<input checked="" type="checkbox"/> Stop work and keep wet	<input checked="" type="checkbox"/> Evacuate area	<input checked="" type="checkbox"/> Demarcate area	<input checked="" type="checkbox"/> Contact licensed abatement contractor
<input checked="" type="checkbox"/> Contact district office/local air authority			
<input type="checkbox"/> Other (Explain):			

### 5) Planned Demolition (check all that apply)

Revised? ☐

Describe demolition work to be performed and method(s) to be employed, including demolition techniques to be used:	
<input type="checkbox"/> Implosion <input type="checkbox"/> Fire Training <input type="checkbox"/> Wet Methods <input type="checkbox"/> Manual Demolition <input type="checkbox"/> Mechanical Demolition <input type="checkbox"/> Other (Explain):	
Description of affected facility components (include attachment if necessary):	



Mail completed form and payment to:  
Ohio EPA, DAPC – Asbestos  
50 W. Town St., 7<sup>th</sup> Floor or P.O. Box 1049  
Columbus, OH 43216-1049

# Notification of Demolition and Renovation/Abatement

## Section 1: General Information

Continued

### 6) Asbestos Description and Engineering Controls (if asbestos is being abated)

Revised? ☐

For the material listed in each project, describe the type(s) of ACM to be abated, engineering controls and work practices to be used to minimize emissions and ensure proper waste handling:

Type of ACM to be abated:	<input type="checkbox"/> Surfacing	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Other		
Engineering Controls:	<input type="checkbox"/> Wet Methods	<input type="checkbox"/> Glove Bag	<input type="checkbox"/> NPE	<input type="checkbox"/> AFD	<input type="checkbox"/> Other:
Work Practices:	<input type="checkbox"/> Intact Removal	<input type="checkbox"/> Manual	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Other:	

### 7) Asbestos Waste Transporter (if applicable)

Revised? ☐

Transporter #1 Name:		
Address:		Contact Person:
City:	State:	Zip: -
Email:	Phone: ( ) -	Fax: ( ) -
Transporter #2 Name (if applicable):		
Address:		Contact Person:
City:	State:	Zip: -
Email:	Phone: ( ) -	Fax: ( ) -

### 8) Asbestos Waste Disposal Site (if applicable)

Revised? ☐

Name:		
Address:		Contact Person:
City:	State:	Zip: -
Email:	Phone: ( ) -	Fax: ( ) -

### 9) Emergency Demolition (complete if you checked "Emergency" above and "Demolition" for any project)

Revised? ☐

A copy of the issued order, including the following information, **must be attached** to this notification.

Government Official Issuing Order:	Title:
Agency:	Authority of Order (Citation of Code):
Date of Order: / /	Demolition Date: / /

### 10) Emergency Renovation/Abatement (complete if you checked "Emergency" above and "Renovation/Abatement" for any project)

Revised? ☐

Date of Emergency: / /	Time of Emergency: : <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Description of Sudden, Unexpected Event:	
Explanation of how the event caused unsafe conditions or equipment damage:	

### 11) Attestation

Revised? ☐

In accordance with Ohio Administrative Code rule 3745-20-03(A)(4)(p), I certify that at least one person trained as required by paragraph (B) of rule 3745-20-04 of the Administrative Code will supervise the stripping and removal described by this notification. I acknowledge that the submission of false or misleading statements is prohibited by law and I certify that facts contained in this notification are true, accurate, and complete.

Signature:	Date: / /
Name:	Title:
Organization:	



# Notification of Demolition and Renovation/Abatement

## Section 2: Project Address Specific Information

Division of Air Pollution Control

Please complete Section 2 for the address included with this notification. If the project is an "Installation" per OAC 3745-20, complete a separate Section 2 page for each address associated with this notification.

Ohio EPA Use Only Project ID #:

### A. Facility Description

Revised? ☐

Building Name (if applicable): GEA 00044 14930		Site Location (specific): 2.5 Mi N USR 322	
Address: 41°33'29.17"N 81°11'50.74"W		County: Geauga	
City: Chardon	State: OH	Zip: 44024 -	
Building Size (square feet): 400	No. of Floors:	Age: 56	
Present Use: Bridge		Prior Use:	

### B. Type of Operation (check all that apply)

Revised? ☐

<input type="checkbox"/> Demolition	<input checked="" type="checkbox"/> Renovation/Abatement – Type: <input type="checkbox"/> Removal <input type="checkbox"/> Repair <input type="checkbox"/> Encapsulation <input type="checkbox"/> Enclosure
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### C. Asbestos Present (check one)

Revised? ☐

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> No, previously abated	Year Abated:
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### D. Approximate Amount of Asbestos-Containing Materials (complete table below and Section 1 #6 if asbestos is present)

Revised? ☐

	Material to be Removed			Material NOT to be Removed	
	RACM	Non-friable Asbestos-Containing Material		Non-friable Asbestos-Containing Material	
		Category I	Category II	Category I	Category II
Pipes (linear feet)					
Surface area on other facility components (ft²)					
Volume if length or area cannot be measured (ft³)					

### E. Asbestos Abatement Schedule and Abatement Specialist (original notification is required 10 working days prior to the start of work)

Revised? ☐

Setup Date: / /			Abatement Date: / /			Complete Date: / /	
(Shift 1) Time start/end on site	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Abatement Specialist Name:	Certification #: AS			Expiration Date: / /			
(Shift 1) Time start/end on site	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Abatement Specialist Name:	Certification #: AS			Expiration Date: / /			

### F. Demolition Contractor (if applicable)

Revised? ☐

Name:		
Address:		Contact Person:
City:	State:	Zip: -
Email:	Phone: ( ) -	Fax: ( ) -

### G. Demolition Schedule (original notification is required 10 working days prior to the start of work)

Revised? ☐

Start Date: / /	Complete Date: / /
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### H. Project Hold

Revised? ☐

Hold Begin Date: / /	Work Resume Date: / /
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