



July 1, 2024

David James
 Consultant Contract Manager
 Ohio Department of Transportation District 4
 2088 South Arlington Road
 Akron, Ohio 44306
 (Office) 330-786-3100

Subject: Asbestos Inspection of SUM 00480 07450 R Interstate Route 480 Bridge over Stow Road (SFN #7710534 / PID 111186) in Hudson, Ohio 44236. L&A Project No: 24-0045 Task 7

Mr. David James,

On June 24, 2024, Mr. Matt Geiger, Ohio Environmental Protection Agency (OEPA) Certified Asbestos Hazard Evaluation Specialist (AHES OH #35832) and Mr. Will Arnold (AHES OH #545305) of Lawhon & Associates, Inc (L&A) conducted an asbestos survey SUM 00480 07450 L 480 Interstate Route Bridge over Stow Road (SFN #7710445 / PID 111186) in Hudson, Ohio 44236. 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 of the bridge to determine the presence, location, and quantities of ACM. 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 bridge plans available for review. This document is not to be construed as a remediation design, and any contractors bidding on the work should conduct their own field verification of locations and quantities of any identified ACM prior to bidding.

Suspect Materials

The materials suspected of containing asbestos identified during the survey, along with an indication of their friability, are presented in Table 1.

Table 1: Suspected Materials

Material	Locations	Friability
Paint on Concrete	Above/Below Deck	Non-Friable
Preformed Expansion Pad	Above Deck	Non-Friable
Parapet Expansion Pad	Above Deck	Non-Friable
Reflector Mastic	Above Deck	Non-Friable

Sample Descriptions, Locations and Results

Sample descriptions, locations, and asbestos content, as determined by Polarized Light Microscopy (PLM), are presented in Table 2.

Table 2: Sample Descriptions, Locations and Results

Sample #	Sample Description and Location	Asbestos %
20240624-1	Paint on Concrete – Above Deck, North Side, Middle	No Asbestos Detected
20240624-2	Paint on Concrete – Below Deck, East Side, North Abutment	No Asbestos Detected
20240624-3	Paint on Concrete – Below Deck, East Side, South Abutment	No Asbestos Detected
20240624-4	Preformed Expansion Pad – North Side, West End	No Asbestos Detected
20240624-5	Preformed Expansion Pad – North Side, West End	No Asbestos Detected
20240624-6	Preformed Expansion Pad – North Side, East End	No Asbestos Detected
20240624-7	Parapet Expansion Pad – North Side, West End	No Asbestos Detected
20240624-8	Parapet Expansion Pad – North Side, Middle	No Asbestos Detected
20240624-9	Parapet Expansion Pad – North Side, East End	No Asbestos Detected
20240624-10	Reflector Mastic – North Side, Middle	No Asbestos Detected
20240624-11	Reflector Mastic – North Side, Middle	No Asbestos Detected
20240624-12	Reflector Mastic – North Side, Middle	No Asbestos Detected

Materials Identified as Asbestos-Containing

Under the current EPA/NESHAP regulations, materials that contain greater than 1% asbestos are considered to be an ACM. None of the materials sampled were found to be ACM as defined by U.S EPA/NESHAP regulations.

Attachments

Appendix A contains the Ohio Environmental Protection Agency Certifications for Mr. Matt Geiger and Mr. Will Arnold.

Appendix B contains the Bulk Sample Diagram.

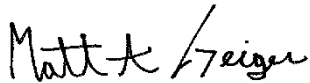
Appendix C contains the laboratory results and chain-of-custody documentation for the asbestos bulk samples collected.

Appendix D contains the partially completed Ohio Environmental Protection Agency Notification of Demolition and Renovation Form filled out per ODOT direction and guidance dated July 1, 2023. The Owner and/or selected demolition/renovation contractor is responsible for completion and submission of the final notification form.

Summary

On June 24, 2024, Mr. Matt Geiger, Ohio Environmental Protection Agency (OEPA) Certified Asbestos Hazard Evaluation Specialist (AHES OH #35832) and Mr. Will Arnold (AHES OH #545305) of L&A conducted an asbestos survey of SUM 00480 07450 L Interstate Route 480 Bridge over Stow Road (SFN #7710534 / PID 111186) in Hudson, Ohio 44236. The purpose of the survey was to determine the presence of asbestos-containing materials (ACM) located on the structure. This document is not to be construed as a remediation design, and any contractors bidding on the work should conduct their own field verification of locations and quantities of ACM prior to bidding. No 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

State of Ohio
Environmental Protection Agency
Asbestos Program

Asbestos Hazard Evaluation Specialist

**Matthew A
Geiger**



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



Certification Number Expiration Date

ES35832

10/14/24

DOB: 10/1/93

Card not Valid
if Altered

The InService Training Network

Asbestos Building Inspector and Management Planner Refresher Courses



Matthew Geiger

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: February 21, 2024

Examination Date: February 21, 2024

Course Instructor:


Frank Rowe

Course Location: Worthington, Ohio

Expiration Date: February 21, 2025

Certificate Numbers: ITNIR7560 & ITNMPR7560





Mike DeWine, Governor
Jon Husted, Lt. Governor
Anne M. Vogel, Director

5/28/2024

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

RE: Evaluation Specialist
Certification Number: ES545305
Expiration Date: 6/22/2025

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.

Sincerely,

Brandon M. Schwendeman

Brandon Schwendeman
Manager, Business Operations Support Section
Ohio EPA - Division of Air Pollution Control

50 West Town Street • Suite 700 • P.O. Box 1045
epa.ohio.gov • (614) 644-3020 • (614) 644-3020

State of Ohio
Environmental Protection Agency
Asbestos Program

Asbestos Hazard Evaluation Specialist

William Arnold



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

Certification Number **Expiration Date**

ES545305 **6/22/25**

DOB: 1/11/97
Card not Valid if Altered

The InService Training Network

Asbestos Building Inspector and Management Planner Refresher Courses



Will 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: February 21, 2024

Examination Date: February 21, 2024

Course Instructor: 
Frank Rowe

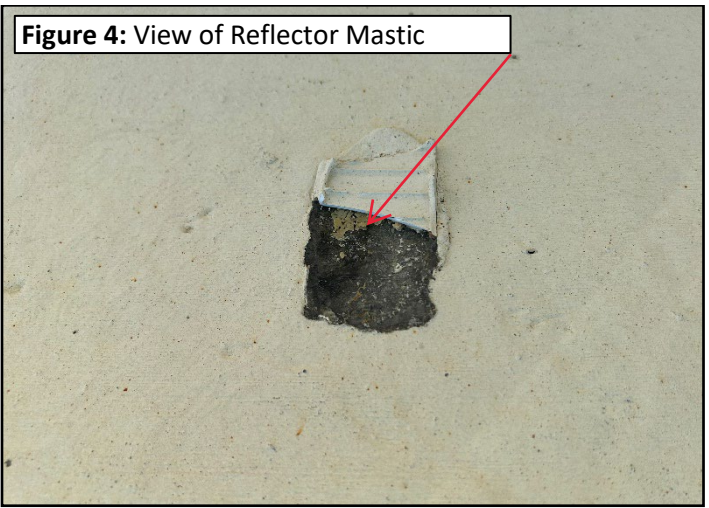
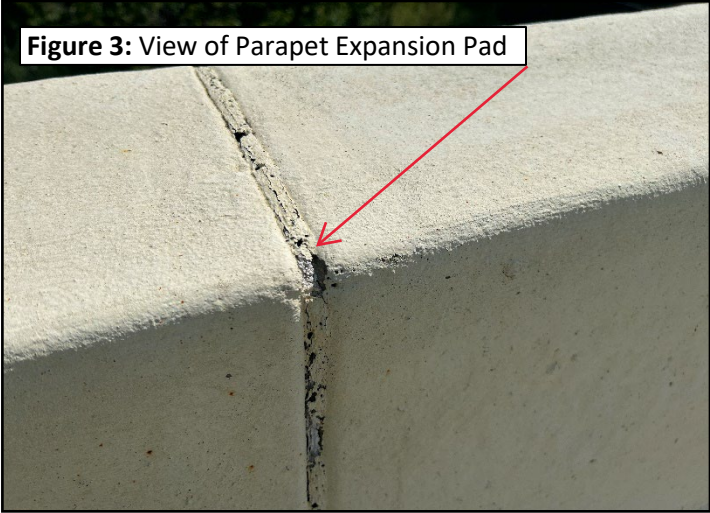
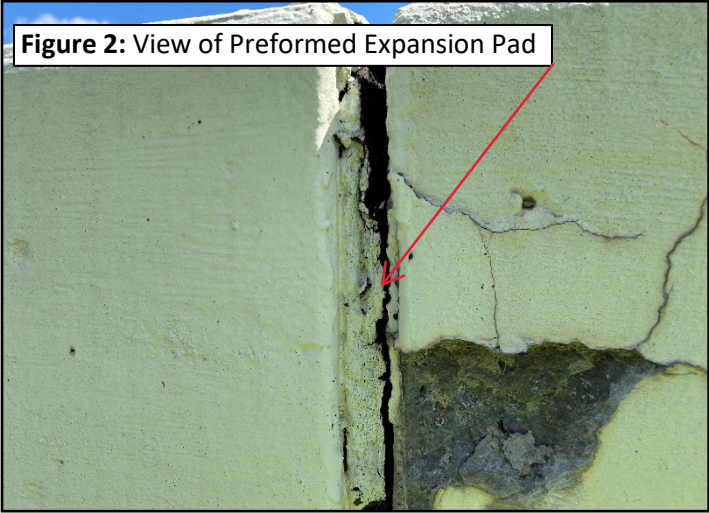
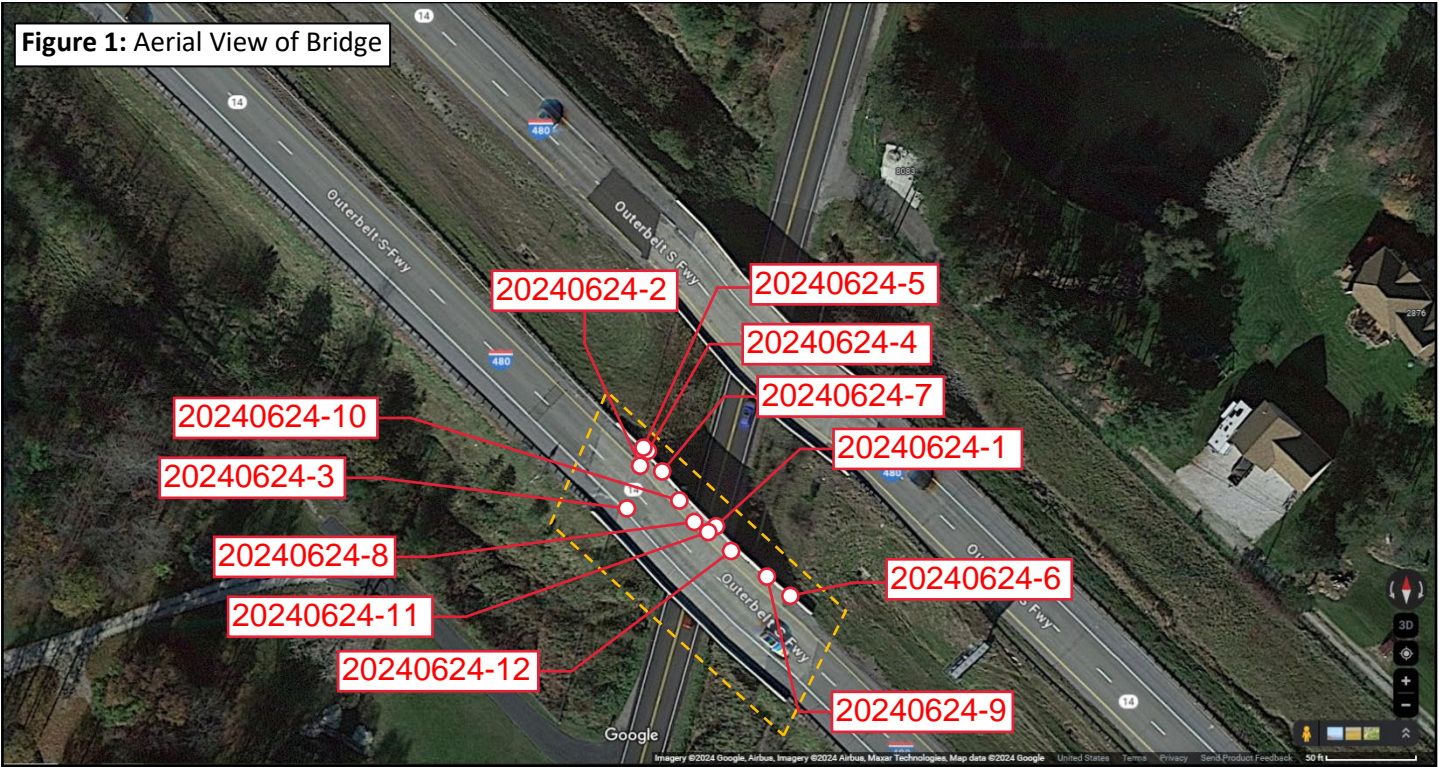
Course Location: Worthington, Ohio

Expiration Date: February 21, 2025

Certificate Numbers: ITNIR7559 & ITNMPR7559



APPENDIX B
BULK SAMPLE DIAGRAM



Lawhon & Associates, Inc.
 ENVIRONMENTAL CONSULTING AND ENGINEERING SERVICES
 Columbus
 Cleveland
 Dayton
 Cincinnati

Bulk Sample Diagram
Inventory Bridge Number: SUM 00480 07450 R
Structure File Number: 7710534
Date Sampled: June 24, 2024
Surveyors: Will Arnold, AHES #545305
 Matt Geiger, AHES #35832
Signature:
 Matt Geiger Will Arnold

Page 1 of 2

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

Figure 5: View of Bridge Facing North East



Figure 6: View of West Abutment




Figure 7: View On Deck Facing South East



Figure 8: View of East Abutment




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

Columbus
Cleveland
Dayton
Cincinnati

Bulk Sample Diagram

Inventory Bridge Number: SUM 00480 07450 R
Structure File Number: 7710534
Date Sampled: June 24, 2024
Surveyors: Will Arnold, AHES #545305
Matt Geiger, AHES #35832

Signature:


Page 2 of 2

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

APPENDIX C
LABORATORY RESULTS AND CHAIN OF CUSTODY



The Identification Specialists

Analysis Report
prepared for
Lawhon & Associates, Inc.

Report Date: 6/28/2024

Project Name: SUM-00480-07450-R

Project #: 24-0045 Task 7

SanAir ID#: 24035334



NVLAP LAB CODE 600227-0

11709 Chesterdale Road | Cincinnati, Ohio 45246
888.895.1177 | 513.438.6006 | IAQ@SanAir.com | SanAir.com



SanAir ID Number
24035334
FINAL REPORT
6/28/2024 2:49:21 PM

Name: Lawhon & Associates, Inc.
Address: 1441 King Ave
Columbus, OH 43212
Phone: 614-481-8600 ext. 142

Project Number: 24-0045 Task 7
P.O. Number:
Project Name: SUM-00480-07450-R
Collected Date: 6/24/2024
Received Date: 6/26/2024 10:00:00 AM

Dear Matt Geiger,

We at SanAir would like to thank you for the work you recently submitted. The 12 sample(s) were received on Wednesday, June 26, 2024 via UPS. The final report(s) is enclosed for the following sample(s): 20240624-1, 20240624-2, 20240624-3, 20240624-4, 20240624-5, 20240624-6, 20240624-7, 20240624-8, 20240624-9, 20240624-10, 20240624-11, 20240624-12.

These results only pertain to this job and should not be used in the interpretation of any other job. This report is only complete in its entirety. Refer to the listing below of the pages included in a complete final report.

Sincerely,

A handwritten signature in black ink that reads "Maureen Y. Haley". The signature is written in a cursive, flowing style.

Maureen Y. Haley
Asbestos Laboratory Manager
SanAir Technologies Laboratory

Final Report Includes:
- Cover Letter
- Analysis Pages
- Disclaimers and Additional Information

Sample conditions:
- 12 samples in Good condition.



SanAir ID Number
24035334
 FINAL REPORT
 6/28/2024 2:49:21 PM

Name: Lawhon & Associates, Inc.
Address: 1441 King Ave
 Columbus, OH 43212
Phone: 614-481-8600 ext. 142

Project Number: 24-0045 Task 7
P.O. Number:
Project Name: SUM-00480-07450-R
Collected Date: 6/24/2024
Received Date: 6/26/2024 10:00:00 AM

Analyst: Pinkerton, Sid

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non-fibrous	
20240624-1 / 24035334-001 Paint on Concrete, Above Deck, North Side, Middle	White Non-Fibrous Homogeneous		100% Other	None Detected
20240624-2 / 24035334-002 Paint on Concrete, Below Deck, West End, North	White Non-Fibrous Homogeneous		100% Other	None Detected
20240624-3 / 24035334-003 Paint on Concrete, Below Deck, West End, South	Various Non-Fibrous Heterogeneous		100% Other	None Detected
20240624-4 / 24035334-004 Reformed Expansion Pad, North Side, West End	Black Fibrous Homogeneous	80% Cellulose	20% Other	None Detected
20240624-5 / 24035334-005 Reformed Expansion Pad, North Side, West End	Black Fibrous Homogeneous	80% Cellulose	20% Other	None Detected
20240624-6 / 24035334-006 Reformed Expansion Pad, North Side, East End	Black Fibrous Homogeneous	80% Cellulose	20% Other	None Detected
20240624-7 / 24035334-007 Parapet Expansion Pad, North Side, West End	Tan Non-Fibrous Homogeneous		100% Other	None Detected
20240624-8 / 24035334-008 Parapet Expansion Pad, North Side, Middle	Tan Non-Fibrous Homogeneous		100% Other	None Detected
20240624-9 / 24035334-009 Parapet Expansion Pad, North Side, East End	Tan Non-Fibrous Homogeneous		100% Other	None Detected
20240624-10 / 24035334-010 Reflector Mastic, North Side, Middle	Yellow Non-Fibrous Homogeneous		100% Other	None Detected

Analyst: *Sidney Pinkerton*

Approved Signatory: *Johnathan Wilson*

Analysis Date: 6/27/2024

Date: 6/28/2024



SanAir ID Number
24035334
 FINAL REPORT
 6/28/2024 2:49:21 PM

Name: Lawhon & Associates, Inc.
Address: 1441 King Ave
 Columbus, OH 43212
Phone: 614-481-8600 ext. 142

Project Number: 24-0045 Task 7
P.O. Number:
Project Name: SUM-00480-07450-R
Collected Date: 6/24/2024
Received Date: 6/26/2024 10:00:00 AM

Analyst: Pinkerton, Sid

Asbestos Bulk PLM EPA 600/R-93/116

SanAir ID / Description	Stereoscopic	Components		Asbestos Fibers
	Appearance	% Fibrous	% Non-fibrous	
20240624-11 / 24035334-011 Reflector Mastic, North Side, Middle	Yellow Non-Fibrous Homogeneous		100% Other	None Detected
20240624-12 / 24035334-012 Reflector Mastic, North Side, Middle	Yellow Non-Fibrous Homogeneous		100% Other	None Detected

Analyst: *Sidney Pinkerton*

Approved Signatory: *Johnathan Wilson*

Analysis Date: 6/27/2024

Date: 6/28/2024

Disclaimer

The final report cannot be reproduced, except in full, without written authorization from SanAir. This report is the sole property of the client named on the SanAir Technologies Laboratory chain-of-custody (COC). Results in the report are confidential information intended only for the use by the client named on the COC. Neither results nor reports will be discussed with or released to any third party without our client's written permission to assure that parts of the report are not taken out of context and to maintain client confidentiality. The information provided in this report applies only to the samples submitted in the condition they were received at the laboratory and is relevant only for the date, time, and location of sampling. Samples were received in good condition unless otherwise noted on the report. Fibers smaller than 5 microns cannot be seen with this method due to scope limitations. The accuracy of the results is dependent upon the client's sampling procedure and information provided to the laboratory by the client, which includes the project name, project number, po number, sample collection dates, special instructions, samples collected by, sample numbers, sample identifications/ location, sample type, selected analysis type, and total area or volume that may affect the validity of the results. SanAir assumes no responsibility for the sampling procedure and will provide evaluation reports based solely on the sample and information provided by the client. SanAir assumes no responsibility or liability for the manner in which results are used or interpreted. This report does not constitute and shall not be used to claim product certification, approval, or endorsement by NVLAP, NIST, AIHA LAP, LLC or any other agency of the U.S. government. Samples are held for a period of 60 days.

Polarized- light microscopy is not consistently reliable in detecting asbestos in floor covering and similar non-friable organically bound materials. Quantitative transmission electron microscopy is currently the only method that can be used to determine if this material can be considered or treated as non-asbestos containing.

Asbestos Accreditations, Licenses, or Certificates

NVLAP Lab Code 600227-0

State of Rhode Island Department of Health, Certification Number: PLM00144, TEM00144

State of West Virginia Bureau for Public Health, Analytical Laboratory Number: LT000637

1441 King Avenue
 Columbus, OH 43212
 Phone: (614) 481-8600
 Fax: (614) 481-8610

24035334

Sent To: San AIR

No. 5337

VIA: UPS

Page 1 of 1

Date: 06/24/2024

Turn around:
3-day

ASBESTOS BULK SAMPLE CHAIN-OF-CUSTODY RECORD

Project Name: <u>SUM-00480-07450-R</u>	Project No.: <u>24-0045 Task 7</u>	Project Contact: <u>Matt Geiger</u>	Sampler (print): <u>[Signature]</u>	Signature <u>[Signature]</u>
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Sample I.D. No.	Homog. Area No.	Sample / Homogeneous Area Description	Sample Location	Remarks
<u>Z0240624-1</u>	<u>1</u>	<u>Paint on Concrete</u>	<u>Above Deck, North side, Middle</u>	
<u>-2</u>	<u>1</u>	<u> </u>	<u>Below Deck, West End, North</u>	
<u>-3</u>	<u>1</u>	<u> </u>	<u> South</u>	
<u>-4</u>	<u>2</u>	<u>Perforated Expansion pad</u>	<u>North Side, West End</u>	
<u>-5</u>	<u>2</u>	<u> </u>	<u>West End</u>	
<u>-6</u>	<u>2</u>	<u> </u>	<u>East End</u>	
<u>-7</u>	<u>3</u>	<u>Parquet Expansion Pad</u>	<u>North Side, West End</u>	
<u>-8</u>	<u>3</u>	<u> </u>	<u>Middle</u>	
<u>-9</u>	<u>3</u>	<u> </u>	<u>East End</u>	
<u>-10</u>	<u>4</u>	<u>Reflector Mastic</u>	<u>North Side, Middle</u>	
<u>-11</u>	<u>4</u>	<u> </u>	<u> </u>	
<u>-12</u>	<u>4</u>	<u> </u>	<u> </u>	

SAMPLE ANALYSIS BY EPA METHOD 600/R-93/116 UNLESS OTHERWISE NOTED. Stop 1st Positive Analyze All Samples
 POINT COUNT FRIABLES AND NOB'S 3% OR LESS ASBESTOS.

Relinquished by: (signature) <u>[Signature]</u>	Date / Time <u>6/24/24 17:00</u>	Received by: (signature) <u>RMB</u>	Date / Time <u>6/24/24 10:00 am</u>	Relinquished by: (signature)	Date / Time	Received by: (signature)	Date / Time
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APPENDIX D
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. This form can be completed, and payment made, at ebiz.epa.ohio.gov. Questions? 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: Summit
--	--	---------------------------------------	------------------------------------	---------------------------------	---------------------------------------	----------------

2) Owner, Asbestos Abatement Contractor, Billing and Fire Department Information

Revised?

Owner

Name: ODOT District 4	Is this a company? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
-----------------------	--

Address: 2088 S. Arlington Road	Contact Person: Ed Deley (DEC)
---------------------------------	--------------------------------

City: Akron	State: Ohio	Zip: 44306
-------------	-------------	------------

Email: Ed.Deley@dot.ohio.gov	Phone: 330-786-3100	Fax:
------------------------------	---------------------	------

Asbestos Abatement Contractor (if applicable)

Name:	License #: AC	Expiration Date: / /
-------	---------------	----------------------

Address:	Contact Person:
----------	-----------------

City:	State:	Zip: -
-------	--------	--------

Email:	Phone: () -	Fax: () -
--------	--------------	------------

Billing Contact

Is this contact associated with the Owner, Asbestos Abatement Contractor, or 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: () -
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3) Ohio Asbestos Hazard Evaluation Specialist and Evaluation Procedure

Revised?

Evaluation Specialist: Matt Geiger	Certification #: ES 35832	Expiration Date: 10/14/2024
------------------------------------	---------------------------	-----------------------------

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: PLM Point Count TEM Other Method (Explain Below):

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):

Notification of Demolition and Renovation/Abatement

Section 1: General Information

Continued

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

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): SUM 00480 07450 R		Site Location (specific): 2.63 Mi E Of Sr 91 [41°16'36.26"N 81°24'36.06"W]	
Address: I.R. 480 Bridge over Stow Road		County: Summit	
City: Hudson	State: OH	Zip: 44236 -	
Building Size (square feet): 4,284	No. of Floors: 1	Age: 59	
Present Use: Bridge		Prior Use: Bridge	

B. Type of Operation (check all that apply) Revised?

<input checked="" type="checkbox"/> Demolition	<input type="checkbox"/> Renovation/Abatement – Type: <input type="checkbox"/> Removal <input type="checkbox"/> Repair <input type="checkbox"/> Encapsulation <input type="checkbox"/> Enclosure
--	--

C. Asbestos Present (check one) Revised?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> No, previously abated	Year Abated: _____
------------------------------	--	--	--------------------

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 (ft ²)						
Volume if length or area cannot be measured (ft ³)						

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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