## EnviroScience Consultants Inc.

Environmental Services · Asbestos Collection & Testing · Consultation

June 15, 1990

Mr. Thomas Psomas
-Manager of Environmental Services
New Milford Public Schools
50 East Street
New Milford, CT 06776

RE: Designated Person for Asbestos Program EnviroScience Consultants' Project #90-0234

BF (cc WF.)

Dear Mr. Psomas,

This is to confirm your engagement of EnviroScience Consultants, Inc., to serve as the Designated Person for the New Milford Public Schools asbestos program.

Enclosed are two executed contracts. Please execute both contracts, retain one for your files, and return one to my attention. Also enclosed is a copy of our letter to you dated May 8, 1990, which will be labeled "Exhibit A" and will be an attachment to the contract.

Thank you for selecting EnviroScience Consultants for your environmental needs.

Yours very truly,

Neal B. Freuden

President

NBF:mlm

Enclosures

## EnviroScience Consultants Inc.

### Environmental Services · Asbestos Collection & Testing · Consultation

May 8, 1990

Exhibit "A"

Mr. Thomas Psomas Manager of Environmental Services New Milford Public Schools 50 East Street New Milford, CT 06776

Dear Mr. Psomas,

It good talking with you again today about the AHERA management plans for the New Milford Public Schools. EnviroScience Consultants is pleased to have been able to perform the AHERA inspections and management planning for the school system and would welcome the opportunity to remain involved in your asbestos program by serving as the Designated Person.

Under AHERA, the Designated Person serves a variety of important functions for the school system. These functions can be basically divided into two broad categories: 1). Periodic surveillance/reinspection of the areas of the schools that contain asbestos, and 2). Special response actions which cannot be predicted well in advance, but which require the services of a trained person. We have provided brief descriptions for your reference of these two services:

1). Periodic surveillance requires checking known or assumed ACBM to determine if the ACBM's physical condition has changed since the last inspection or surveillance. EnviroScience will add to the Management Plans the date of the surveillance and any changes in the condition of the ACBM.

As a Designated Person, EnviroScience Consultants will, in conformity with Section 763.92 (6) AHERA 1987, perform periodic surveillances at least once every six months. The attached form will be used for each surveillance.

2). Special Response Actions: Disturbance of ACBM can cause potential fiber release epsisodes. The Designated Person should be on-site to provide guidance in potential disturbance situations as well to evaluate a setting <a href="mailto:before">before</a> disturbance becomes a reality if this is possible. This type of service is required in the Operations and Maintenance portion of the AHERA Management Plan for each school.

90-2× /900034

### Page 2

As we discussed, our fees for the services provided by a Designated Person would be invoiced differently for each category of service. Our fee for the six month interval Periodic Surveillance service would be invoiced at a flat rate of \$ 600.00. As discussed, we arrived at this fee by estimating that it will take us a total of 12 hours to perform this inspection/reporting function at our standard billing rate of \$50.00 per hour.

Our fee for the Special Response Actions would be invoiced at \$50.00 per hour, portal to portal. We assume that as Manager of Environmental Services, you would contact us when you believed we were needed.

Thank you for the opportunity to submit this proposal.

-Very truly yours,

Neal P. Freuden, M.A., M.B.A. President

NBF/ef enclosures

# PERIODIC SURVEILLANCE REPORT

BUILDING NAME AND LOCATION: NEW MILES HIGH SCHOOL

NAME AND TITLE OF PERSON COMPLETING REPORT: Socreph Vetrano Environmental Consultant

DESCRIPTION OF CHANGES IN THE CONDITION OF THE MATERIALS	West tunnel debris cleaned No other changes noted.	NONE	えるの	NONE	みなる色
DESCRIPTION OF ACEM OR SUSPECTED ACEM AREAS	ACM FITTINGS/ AIRCELL UNDER AUDITORIUM STAGE	Fitting Insulation Above Drop Ceiling	FITTING INSULATION	Yransite Lab	Floor Tile
AREA IDENTIFICATION IN THE MANAGEMENT PLAN	A(a)	A(3>	A (4)	G(4)	د(ج)
LOCATION OF ACEM OR SUSPECTED ACEM AREAS	1962 PIPE Tunners	1970 Building	1970 PIPE TUMPELS	1962 SECTION Classroom 148	Throughout School
SURVEILLANCE : DATE	4-2-4			•	<b>→</b>

SIGNATURE OF PERSON COMPLETING REPORT:

White Verticals

FÜO76A
Schedule A, Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Harlford, CT 06145

Page 1075

TOWNINE GION NAIL	<u> </u>	PACRITY NAME AND ADDRESS .	DATE OF AMP UPDATE
NEW 1		ORD HIGH SCHOOL	4-2-91
		eral Instructions	
	wel:	Provide the name of the school district where the facility is located as the name and address of the facility. Also indicate the date of AMP Update is submitted.	ed as on which
	be p	In an area containing more than one type of ACM, a separate Schedul provided for each material. Please number the pages of each Schedul ng submitted in the upper right hand corner.	le Λ must le Λ
	1.	Asbestos Containing Area: 1962 PIPE TUNNELS	<del></del>
	2.	Type of ACM: Sprayed-on Troweled-on Boiler Lagging Pipe Insulation: ✓ Duct Breeching Tank Other (specify) PIPE FITTING TNSULATION	, ,
	3.	ACM Previously Identified ACM Newly Identified Basis S_	A
	4.	Amount of ACM: 440 sq. ft.	
:	5.,	Friability: High Moderate Low Non-friable	
	6.	Condition: Water Damage High Moderate Low None Physical Damage High Moderate Low None	
		Additional Comments (provide description) Damaged Areas	limited
	•	to specific areas noted on Amp, however, the	dehci's
•		in the west tunnel entrance has been clea	rned.
	7.	Abatement/Remediation Method (Response Action) Removal Enclosure Encapsulation Operation and Maintenance Only	
•	8.	Date for Implementation As Soon as Possible	
· •	9.	Rationale for Abatement/Remediation Method (Response Action) select	ted:
		Existing conditions require operation	2n +
	•	maintenance only.	- · · ·
	•		
•			
•			

FÜO76A Schedule A. Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartford, CT 06145

Page 2 07 5

P.O. BOX 2219, Hartford, CT 05145 DATE OF AMP UPDATE PACETTY NAME AND ADDRESS TOWNTEDION HAME 4-2-91 MIGH MILFORD General Instructions Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted. In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule A being submitted in the upper right hand corner. 1970 PIPE TUNNEUS 1. Asbestos Containing Area:\_ Boiler Lagging\_ Troweled-on\_\_\_ 2. Type of ACM: Sprayed-on\_\_\_ Pipe Insulation Duct Breeching Tank Other (specify) FITTINGS 3. ACM Previously Identified V ACM Newly Identified Basis S sq. ft. 126 4. Amount of ACM:\_ Non-friable\_\_\_\_ LOW V Moderate\_ High\_\_\_ 5. Friability: Condition: High\_ Moderate Water Damage None Physical Damage High\_\_\_\_ Moderate\_\_ Additional Comments (provide description)\_\_\_ materia Abatement/Remediation Method (Response Action) Removal\_\_\_ Enclosure\_\_ Encapsulation\_ Operation and Maintenance Only 🚩 Date for Implementation As Soon Rationale for Abatement/Remediation Method (Response Action) selected:

รบับ76A Schedule A. Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

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## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartlord, CT 06145

Page . 3 0 + 5

P.O. BOX 2219, Hartford, CT 06145 DATE OF AMP UPDATE FACRETY HAME AND ADDRESS . TOWNINEDION HAME 4-2-91 SCHOO HIGH MILFORD General Instructions Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted. In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule A being submitted in the upper right hand corner. Classroom 1970 Addition 1. Asbestos Containing Area:\_ 2. Type of ACM: Sprayed-on\_\_\_ Troweled-on\_ Boiler Lagging Pipe Insulation Duct Breeching Tank Other (specify) ACM FITTINGS 3. ACM Previously Identified V ACM Newly Identified\_ 91 sq. ft. 4. Amount of ACM:\_ Non-friable\_ LOW\_V Moderate\_\_\_ High\_\_\_ 5. Friability: 6. Condition: Low of High\_ \_Moderate\_ Water Damage Low None Physical Damage High\_\_\_ Hoderate\_\_ Additional Comments (provide description)\_ noted. 7. Abatement/Remediation Hethod (Response Action) Removal\_\_\_ Enclosure\_\_ Encapsulation\_\_\_ Operation and Maintenance Only\_\_\_ Date for Implementation As Soon As Possible Rationale for Abatement/Remediation Method (Response Action) selected: continue QS

เชื้อ76A Schedule A, Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartlord, CT 05145

Page 4 of 5

DATE OF AMP UPDATE FACILITY HAME AND ADDRESS . JOWNINEDION HAME 4-2-91 HIGH NEW MILEORD General Instructions Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted. In an area containing more than one type of ACH, a separate Schedule A must be provided for each material. Please number the pages of each Schedule  $\Lambda$ being submitted in the upper right hand corner. 1. Asbestos Containing Area: 1962, Room 148 CHEMISTRY ROOM 2. Type of ACM: Sprayed-on\_\_\_ Troweled-on\_\_ Boiler Lagging Pipe Insulation Duct Breeching Tank Other (specify) TRANSIVE HOOD 3. ACH Previously Identified V ACH Newly Identified Basis S \_\_\_sq. ft. 4. Amount of ACM:\_ High\_\_\_ Moderate\_\_ Low\_\_ Non-friable\_\(\nu\) 5. Friability: 6. Condition: High\_\_\_ Moderate\_\_ Low\_ None 4 Physical Damage High \_\_\_ Moderate \_\_ Low \_\_ None \_\_\_ Additional Comments (provide description)\_ 7. Abatement/Remediation Hethod (Response Action) Removal\_\_\_ Enclosure\_\_ Encapsulation\_\_\_ Operation and Maintenance Only 🗸 SOON AS POSSIBLE Date for Implementation AsRationale for Abatement/Remediation Method (Response Action) selected: 1990\_ AMP MARCH

EXOTEA Schedule A, Asbestos Haterial Summary

Section: 10-292a-7. Regulations of Connecticut State Agencies Rev. 10/89

### BTATE OF CONNECTICUT · Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartford, CT 06145

Page 507 5

TOWNTEGION HAVE		PACRITY NAME AND AL	DRESS	·		DATE OF AMP UPDATE
	ILFORD .	HIGH	SCHOOL			4-2-91
	General Instr	uctions				
	well as the n	ne name of the s ame and address e is submitted.	chool district of the facilit	where the y. Also in	facility is locandicate the date	ted as on which
	he provided for	a containing mor or each material ed in the upper	. Please numb	er the pay	a separate Schedu es of each Schedu	le A must le A
<u>.</u>	1. Asbestos	Containing Area:		7. ScH	DOC BUILDI	<u> </u>
•	2. Type of A	CM: Sprayed-on_ Pipe Insula Other (spec	Troweled- tion' Duct_ ify) FLOOR	Breech	1119 I a // k	
	3. ACH Previ	ously Identified	1 ACH Ne	wly Identi	FledBasis S	^
	4. Amount of	лсм:	7,245	sq. ft	•	: •
		/: High Mo	•			
	6. Condition	•	Moderate	Low	None	·
· ·	Addit	Ional Comments (	provide descri	ption)		<u></u>
•			·			
					•	
	Remova1	/Remediation Met Enclosure and Maintenance	Encapsulation	Action)	·	
•	· .	<pre>Implementation</pre>		N As	POSSIBLE	
			•	hod (Respo	nse Action) selec	ted:
	•	PER	MARCH	1990_	AMP	
•			,			
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### HUAL ASBESTOS MANAGEMENT

v 10/87 tutory Rof. Section 10-292s-7 juistions of Connecticut State Agencies

## STATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hardord, CT 05145

	·	 
TONIUNEGIUN NAME	(2) FACILITY NAME AND ADDRESS	DATE OF INSPECTION

### General Instructions

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted.

Complete <u>each</u> of the following questions below. If the answer to a question is No, no further documentation is necessary. If the answer to a question is Yes, refer to the document, "Guidance for the Completion of the AMP Update" for further instructions.

The Superintendent of Schools and qualified Asbestos Program Coordinator

ักน ร	t sign the Certification statement.
1.	Has the Abatement/Remediation Hethod (Response Action) or Date for Implementation for any asbestos-containing material (ACH) changed since the last approved AHP?
2.	ilas any material been identified as containing asbestos since the last approved AMP?  Yes No
3.	Is any ACH which was reported in the last approved AHP no longer present (Partial removal of an ACH within an asbestos-containing area need not be documented.)  Yes No
4.	Which of the following procedures, as outlined in Sections A and B of the Asbestos Hanagement Program and Remodiation Options (AHPRO), has been changed since the last approved AHP?
	a. Monitor Physical Condition of ACH b. Education of Building Staff and Occupants, Labeling Yes No c. Hinimize Fiber Release d. Hinimize Potential Human Exposure e. Emergency Repair Procedures Yes No Yes No
CEF	RIFICATION
	to Dan Hadaka for this

I certify that the Annual Asbestos Hanagement Plan Update for this facility conforms to the requirements of the Connecticut General Statutes. Sections 10-292a, b. (Public Acts 85-541 and 86-65), and State regulations enacted pursuant thereto.

205), and State regulations
Date :
Date

Signature of Asbestos Program Coordinator

Date

# PERIODIC SURVEILLANCE REPORT

Environmental Consultant BUILDING NAME AND LOCATION: NEW MILEGRA HAINTENBACK NAME AND TITLE OF PERSON COMPLETING REPORT: 2056ph Vehans

· · · · · · · · · · · · · · · · · · ·	DESCRIPTION OF CHANGES IN THE CONDITION OF THE MATERIALS	NONE	ろって		
	DESCRIPTION OF ACEM OR SUSPECTED ACEM AREAS	Boiler Flue Insulation.	Airceur Insulation Fitting Insulation	,	-
	AREA IDENTIFICATION IN THE MANAGEMENT PLAN	A(2)	A(3)		-
	LOCATION OF ACEM OR SUSPECTED ACEM AREAS	Boiler Room	BASEMENT		
	SURVEILLANCE DATE	4-2-91	4-2-91		

SIGNATURE OF PERSON COMPLETING REPORT:

Ţ.

PAGE 1 of 2

Section: 10-292m-7, Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartlord, CT 06145

TOWNIPEDION NAME FACILITY HAME AND ADDRESS . DATE OF AMP UPDATE		P.O. BOX 2219,	Maritiota, C. 1 on 142		
NEW MILFORD NEW MILFORD MAINTENANCE BLDG. 1 7-2-91	IOHTAREBON HAME		MAINTENANCE	BLDG.	DATE OF AMPUPDATE 4-2-9

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted.

In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule A being submitted in the upper right hand corner.

	,
1.	Asbestos Containing Area: BOILER ROOM
2.	Type of ACM: Sprayed-on Troweled-on Boiler Lagging Pipe Insulation: Duct Breeching Tank Other (specify)
3.	ACM Previously Identified ACM Newly Identified Basis S A
	Amount of ACM: 125 sq. ft.
5.	Friability: High Moderate Low Non-friable
6.	Condition: Water Damage High Moderate Low None Physical Damage High Moderate Low None
	Additional Comments (provide description) NO CHANGES
7.	Abatement/Remediation Method (Response Action) Removal Enclosure Encapsulation Operation and Maintenance Only
8.	Date for Implementation CONTINUE
9.	Rationale for Abatement/Remediation Method (Response Action) selected:
	REFER TO MARCH 1990 AMP

PLAN UPDATE FD076A Schedule A, Asbestos Material Summary

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Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Harlford, CT 06145

		1,0,00,00,00			
		FACILITY NAME AND ADDRESS .			DATE OF AMP UPDATE
TOWN/REGION NAME		•	<b>~</b>	_	4-2-91
してい	MILTORD	MAINTENANCE	13020		

### General Instructions

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted.

In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule A being submitted in the upper right hand corner.

Asbestos Con	taining Area:	BAS	SEMENT		<del></del>
Type of ACM:	Sprayed-on_ Pipe Insulati Other (specif	Troweld Dud  Sy)	ed-onBoile ctBreechir	er Lagging_ ng Tank	
ACH Previous	y Identified _	ACM	Newly Identif	ledBa	sis S A
Amount of AC	M:	450 L	in earsy, ft.	•	
Friability:	High Mode	erate	Low Non-fr	lable	
	mage High_ Damage High_				
Addition	al Comments (pr	rovide des	cription)/	Vo Cha	nges
		•			
Removal	mediation Metho	Encapsulat	se Action) ion	·	
Removal Operation an	Enclosure ( d Maintenance (	Encapsulat Only	ion		
Removal_Operation an	Enclosure   d Maintenance (	Encapsulat Only Conv	INUE	se Action)	selected:
Removal_Operation an	Enclosure   d Maintenance ( lementation r Abatement/Rei	Encapsulation Encapsulation	ion iんuを Method (Respon		
Removal_Operation an	Enclosure   d Maintenance ( lementation r Abatement/Rei	Encapsulation	INUE		
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### ANNUAL ASBESTOS MANAGEMENT PI AN UPDATE

ED-076 ุNow ชื่อ/87 Statutory Rol. Section 10-292a-7 Regulations of Connecticut State Agencies

### STATE OF CONNECTICUT Department of Education

### BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartford, CT 06145

(1) TOWINGEGION NAME	(2) FACILITY NAME AND ADDRESS	DATE OF INSPECTION
·		

### General Instructions

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted.

Complete each of the following questions below. If the answer to a question is  $\frac{No}{Yes}$ , refer to the document, "Guidance for the Completion of the

чн	Update" for further instructions.
านร	The Superintendent of Schools and qualified Asbestos Program Coordinator sign the Certification statement.
•	Has the Abatement/Remediation Hethod (Response Action) or Date for Implementation for any asbestos-containing material (ACH) changed since the last approved AMP?  Yes No No
? <b>.</b>	Has any material been identified as containing asbestos since the last approved AMP?  Yes No No
١.	Is any ACH which was reported in the last approved AHP no longer present? (Partial removal of an ACH within an asbestos-containing area need not be documented.)  Yes No
	Which of the following procedures, as outlined in Sections A and B of the Asbestos Hanagement Program and Remodiation Options (AHPRO), has been changed since the last approved AHP?
•	a. Honitor Physical Condition of ACH b. Education of Building Staff and Occupants, Labeling Yes No c. Hinimize Fiber Release d. Hinimize Potential Human Exposure e. Emergency Repair Procedures  Yes No Yes No Yes No
ER	<u>IFICATION</u>
sec	I certify that the Annual Asbestos Hanagement Plan Update for this lity conforms to the requirements of the Connecticut General Statutes, ions 10-292a, b. (Public Acts 85-541 and 86-65), and State regulations ted pursuant thereto.

ame of Superintendent of Schools	•
ignature of Superintendent	Date
	·

Signature of Asbestos Program Coordinator

Date

## Énviroscience Consultants Inc.

### Environmental Services • Asbestos Collection & Testing • Consultation

Mr. Thomas Psomas Manager of Environmental Services New Milford Public Schools 50 East Street New Milford, CT 06776 November 30, 1990

DE: Docionated I

Designated Person for Asbestos Program EnviroScience Consultants Project ≠90-0234 PC2

Dear Mr. Psomas:

Enclosed is the report generated from the asbestos reinspections carried out on October 30, 1990. The necessary forms are filled out for each school. The Superintendent of Schools must fill out and sign the ED-076 form pertaining to each school. This is the form with the space provided at the bottom for the Superintendent's signature.

Regarding the state memo dated September 25, 1990, the memo was probably sent because the state had not yet begun to review the Asbestos Management Plans for the New Milford Public School System. They become fairly backed-up with paperwork to review, and they continue to send out notices for "outstanding" school systems even though the paperwork may be in their building. If you have proof of AMP submittal, no further action is necessary. If you do not have proof, the management plans should be resent.

With regard to your question about verification that newly damaged ACBM found by the designated person was indeed repaired, there are work order forms at the end of the Asbestos Management Plans for each school. The necessary forms should be completed and filed. There should be a permanent file on hand at each school documenting all updates and revisions for the State to review, if necessary.

I hope this has answered all of your questions. Should you have any other problems regarding this matter, please do not hesitate to contact us.

Sincerely,

Joseph Vetrano

Ænvironmental Consultant

Reviewed by:

Daniel Brack, IHIT, CHCM

Director of Technical Services

### EnviroScience Consultants Inc.

Environmental Services · Asbestos Collection & Testing · Consultation

On October 30, 1990, EnviroScience Consultants performed routine asbestos inspections for the New Milford School System under the Designated Person Periodic Surveillance program as described in the AHERA regulations. The inspections were conducted in order to update the condition of known asbestos containing building materials (ACBM) noted on the most recent asbestos management plans and identify areas where corrective measures may be required. The March, 1990, New Milford Asbestos Management Plans were referenced during the October 30th inspections.

The following buildings were inspected: the New Milford Schools Maintenance Euilding, the Lillis Administration Building, the Hill and Plain, Northville, and Pettibone Elementary Schools, the Schagticoke Middle School, and New Milford High School. The inspection involved the visual reassessment of any ACBM or assumed ACBM listed in the Asbestos Management Plan (AMP) for each school. The date of the inspection as well as the location of the area was noted along with the change in the condition of the ACBM (if any). The reinspection forms are included with this report.

The schools in which the condition of ACBM or asssumed ACBM differed since the last inspection were the High School, the Pettibone Elementary School, and the Hill and Plain Elementary School.

In the High School, five square feet of asbestos-containing pipe elbow insulation was found on the dirt floor at the entrance to the west pipe tunnel. This debris should be wetted and removed with accompanying HEPA vacuuming of the surrounding area. No other change in ACBM or assumed ACBM was found in the New Milford High School.

In the Pettibone School, less than three square feet of asbestos pipe insulation debris was found on the floor of the basement hall under the kitchen. This material should be wetted and removed and the surrounding area HEPA-vacuumed. No other change in ACBM or assumed ACBM was found in the Pettibone School.

The Hill and Plain Elementary School contains two areas in which corrective measures should be applied. The first area involves the pipe tunnel behind boiler number two. ACM debris was noted on the floor approximately seventy-five feet into this tunnel. There was approximately 25 square feet of this material. The debris should be removed and surrounding area HEPA-vacuumed. The second area noted was on the building exterior. Several of the asbestos containing transite soffits are becoming detached from the eaves on the right of the main school entrance. These should be carefully reattached. No other change in ACBM or assumed ACBM was found in the Hill and Plain Elementary School.

66 Cedar Street, Newington, Connecticut 06111

### Page 2

During the reinspection procedure, several items in the March 1990 Management Plans were found to need further clarification. One such item involved the classification of the ACM pipe insulation in the basement hall under the kitchen of the Pettibone School. The quantity of the asbestos on the pipes in the basement hall, some 600 linear feet of it, was included in the March, 1990, AMP as part of the total material in the 1955 pipe tunnel wing - approximately 2680 linear feet of material. This shall be revised. The basement hall under the kitchen will be given its own area designation on the management plan update. On the March, 1990, AMP, the basement area was considered homogeneous with the pipe tunnels since they were on the same elevation.

Another item involved the two air handling rooms located on the roof of the New Milford High School. None of the previous asbestos management plans on record mentioned the air handling rooms. The room containing the AC1 / AC2 air conditioning units contained 21 ACM insulated pipe fittings on fiberglass insulated plumbing. One fitting on AC unit 1 was damaged and is in poor condition. All other fittings in the room are in fair condition. Also present in room AC1 / AC2 are approximately 30 sf of assumed asbestos containing canvas vibration isolators. This material is in fair condition. The other air handling room, containing Heating/Ventilation units 1-6, contains approximately 40 ACM fittings on fiberglass insulated plumbing. All fittings are in fair condition. This room also contains approximately 50 sf of vibration isolator material, which is in fair condition.

# PERIODIC SURVEILLANCE REPORT

Envisoomental Lillis Administration Building NAME AND TITLE OF PERSON COMPLETING REPORT: \_\_\_\_\_\_\_\_ BUILDING NAME AND LOCATION:

1	DESCRIPTION OF CHANGES IN THE CONDITION OF THE MATERIALS	NONE						
	DESCRIPTION OF ACEM OR SUSPECTED ACEM AREAS	Floor Tile				,		,
	AREA IDENTIFICATION IN THE MANAGEMENT PLAN	. د(ء)						
	LOCATION OF ACEM OR SUSPECTED ACEM AREAS	Throughout Building					***************************************	
	SURVEILLANCE DATE	J-2-91			•			

SIGNATURE OF PERSON COMPLETING REPORT:

..PLAN UPDAIL FÜO76A Schedule≈A, Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies
Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT

Page 10/1

Rev. 10/89 P.O. BOX 2219, Hartford, CT 06145 DATE OF AMP UPDATE FACILITY HAME AND ADDRESS . TOWNINEDION NAME BULLDING 4-2-91 LILLIS NEW MILFORD General Instructions Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted. In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule  $\Lambda$ being submitted in the upper right hand corner. Throughout. 1. Asbestos Containing Area:\_ Troweled-on\_ Boiler Lagging 2. Type of ACM: Sprayed-on\_ Pipe Insulation Duct Breeching Tank TILE Other (specify) FLOOR ACM Previously Identified \_\_\_\_ ACM Newly Identified \_\_\_ Basis S\_\_\_ A\_\_ 5800 4. Amount of ACM:\_\_ Moderate\_\_\_ Low\_\_\_ Non-friable\_ High\_\_\_ 5. Friability: Condition: High\_\_\_\_ .Moderate\_ Low Water Damage Physical Damage High\_\_\_ Moderate\_ None 4 Low\_ Additional Comments (provide description)\_ Inspection Abatement/Remediation Method (Response Action) Removal Enclosure Encapsulation Operation and Maintenance Only SOON AS POSSIBLE Date for Implementation\_\_\_ Rationale for Abatement/Remediation Method (Response Action) selected: Condition Good 50c continued

### ANNUÁL ASBESTOS MANAGEMENT PIAN UPDATE

ED-076 New 10/87 Statutory Ref. Section 10-2922-7 Regulations of Connecticut State Agencies

#### STATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Harriord, CT 06145

(1) TOWWAEGION NAME	(2) FACILITY NAME AND ADDRESS		DATE OF WISI	ECTION
.,,		`		

### General Instructions

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted.

Complete each of the following questions below. If the answer to a question is No, no further documentation is necessary. If the answer to a question is Yes, refer to the document, "Guidance for the Completion of the AMP Update" for further instructions.

· The Superintendent of Schools and qualified Asbestos Program Coordinator must sign the Certification statement.

	•
1.	Has the Abatement/Remediation Hethod (Response Action) or Date for Implementation for any asbestos-containing material (ACH) changed since the last approved AMP?  YesNo
2.	Has any material been identified as containing asbestos since the last approved AMP?  Yes No No
3.	Is any ACH which was reported in the last approved AHP no longer present? (Partial removal of an ACH within an asbestos-containing area need not be documented.)  Yes No No
4.	Which of the following procedures, as outlined in Sections A and B of the Asbestos Hanagement Program and Remodiation Options (AHPRO), has been changed since the last approved AHP?
	a. Honitor Physical Condition of ACH b. Education of Building Staff and Occupants, Labeling Yes No c. Hinimize Fiber Release d. Hinimize Potential Human Exposure e. Emergency Repair Procedures

#### CERTIFICATION

**"特别中国国际的** 

I certify that the Annual Asbestos Hanagement Plan Update for this facility conforms to the requirements of the Connecticut General Statutes. Sections 10-292a, b. (Public Acts 85-54) and 86-65), and State regulations enacted pursuant thereto.

Name of Superintendent of Schools	
Signature of Superintendent .	Date
Name of Asbestos Program Coordinator	
Signature of Asbestos Program Coordinator	Date

# PERIODIC SURVEILLANCE REPORT

ENVIRONMENTAL E CEMENTARY NAME AND TITLE OF PERSON COMPLETING REPORT: Soseoh Vehano HILL and PLAIN BUILDING NAME AND LOCATION:

DESCRIPTION OF CHANGES IN THE		noted, Areas where soffits were noted as coming unaffached in 10/90 have been reaffached,	3000C	
DESCRIPTION OF ACEM OR SUSPECTED ACEM AREAS	PIPE FITTING INSULATION	Transite Soffits	F1001 7.16	
AREA IDENTIFICATION IN THE MANAGEMENT PLAN	A(a)	c(3)	c(4)	
LOCATION OF ACEM OR SUSPECTED ACEM AREAS	1962 Pipe Tunnels	Building Extoior	Throughout	
SURVEILLANCE	4-2-91	4-2-4।	4-2-91	

SIGNATURE OF PERSON COMPLETING REPORT:

PLAN UPDATE FÜO76A Schedule A, Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartford, CT 05145

Page 10+3

DATE OF AMP UPDATE FACILITY NAME AND ADDRESS . TOWNINEDION NAME 4-2-91 ELEMENTARY PLAIN NEW MILFORD General Instructions Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted. In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule A being submitted in the upper right hand corner. RPE . 1. Asbestos Containing Area: 1962 2. Type of ACM: Sprayed-on\_\_\_ Troweled-on\_\_ Boiler Lagging\_\_\_ Pipe Insulation\_\_\_ Duct\_\_\_ Breeching\_\_\_ Tank\_ Other (specify) ACM Newly Identified Basis S A 3. ACM Previously Identified \_\_\_ sq. ft. 4. Amount of ACM:\_\_\_ Moderate Low Non-friable\_ High\_\_\_ 5. Friability: Condition: Water Damage High Moderate Low None None Water Damage Additional Comments (provide description) Physical documented in October 1990 Abatement/Remediation Method (Response Action) Removal\_\_\_Enclosure\_\_\_Encapsulation\_\_\_ Operation and Maintenance Only\_\_\_\_ Date for Implementation As Soon As Possible Rationale for Abatement/Remediation Method (Response Action) selected: CONDITIONS

เชื่อ76A Schedule A. Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

#### BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartford, CT 06145

Page 2 of 3

	T.O. DOX LETY HEROO, O.	DATE OF AMPURDATE
TOWNINEDION HAME	PACETY HAVE AND ADDRESS	
NEW MILT	FORD, CT HILL and PLAIN ELEMENTAR	
	General Instructions	
	Provide the name of the school district where the facility well as the name and address of the facility. Also indicate the AMP Update is submitted.	ris located as the date on which
	In an area containing more than one type of ACH, a separate be provided for each material. Please number the pages of each being submitted in the upper right hand corner.	e Schedule A must h Schedule A
	1. Asbestos Containing Area: Transile Soffits along be	ilding exterior
	2. Type of ACM: Sprayed-on Troweled-on Boiler Laggt Pipe Insulation: Duct Breeching 1 Other (specify)	
	3. ACH Previously Identified ACH Newly Identified	Basis S A
	4. Amount of ACM: <u>4400</u> sq. ft.	,
	5. Friability: High Moderate Low Non-friable_	<del>-</del>
	6. Condition: Water Damage High Moderate Low None None None	, -
	Additional Comments (provide description) Pane	ls noted
	as unattached in October 19	go have
•	been reattached .	
	7. Abatement/Remediation Method (Response Action) Removal Enclosure Encapsulation Operation and Maintenance Only	
•	8. Date for Implementation As Soon As Possible	
	g. Rationale for Abatement/Remediation Hethod (Response Actio	on) selected:
	Existing Conditions allows	194
	04 M to reduce distarban	ce per
	Sune 1990 AMP	
•		,

FÖO76A Schedule A. Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartlord, CT 06145

Page 3 of 3

DATE OF AMP UPDATE FACRITY HAME AND ADDRESS . TOWNINGOION HAME 4-2-91 ELEMENTARY NEW MILFORD General Instructions Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted. In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule A being submitted in the upper right hand corner. Throughout 1. Asbestos Containing Area:\_ Boiler Lagging Troweled-on\_ 2. Type of ACH: Sprayed-on\_ Pipe Insulation Duct Breeching Tank FLOOR TILE Other (specify)\_ ACM Newly Identified\_ ACM Previously Identified \_\_ \_sq. ft. 4. Amount of ACM: Non-friable<u></u> Moderate\_\_\_ Low\_\_\_ High\_ Friability: Condition: .Moderate\_ Low High\_ Water Damage None 2 Physical Damage High\_\_\_ Moderate\_\_\_ Low\_ Additional Comments (provide description) 7. Abatement/Remediation Hethod (Response Action) Removal\_\_\_ Enclosure\_\_ Encapsulation\_ Operation and Maintenance Only\_ As Date for Implementation <u>HS</u> Rationale for Abatement/Remediation Method (Response Action) selected:

### ANNUAL ASBESTOS MANAGEMENT PIAN UPDATE

ED-076 New 10/87 Statutory Ref. Section 10-2922-7 Regulations of Connecticut State Agencies

#### STATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartford, CT 06145

•			
(I) TOWINGEOUN NAME	(2) FACILITY NAME AND ADDRESS		DATE OF INSPECTION
		·	•

### General Instructions

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted.

Complete each of the following questions below. If the answer to a question is No, no further documentation is necessary. If the answer to a question is Yes, refer to the document, "Guidance for the Completion of the AMP Update" for further instructions.

The Superintendent of Schools and qualified Asbestos Program Coordinator

เบก 2	t sign the Certification statement.
۱.	Has the Abatement/Remediation Hethod (Response Action) or Date for Implementation for any asbestos-containing material (ACH) changed since the last approved ARP?  Yes No
2.	Has any material been identified as containing asbestos since the last approved AMP?  Yes No No
3.	Is any ACH which was reported in the last approved AHP no longer present? (Partial removal of an ACH within an asbestos-containing area need not be documented.)  Yes No
4.	Which of the following procedures, as outlined in Sections A and B of the Asbestos Management Program and Remodiation Options (AMPRO), has been changed since the last approved AMP?
•	a. Monitor Physical Condition of ACH b. Education of Building Staff and Occupants, Labeling Yes No Y
CER	TIFICATION

I certify that the Annual Asbestos Hanagement Plan Update for this facility conforms to the requirements of the Connecticut General Statutes, Sections 10-292a, b, (Public Acts 85-541 and 86-65), and State regulations

lame of Superintendent of Schools	
Signature of Superintendent	Date

Signature of Asbestos Program Coordinator

Date

# PERIODIC SURVEILLANCE REPORT

ELEMENTARY NORTHUILLE BUILDING NAME AND LOCATION: \_

ENVIRONMENTAL CONSULTANT NAME AND TITLE OF PERSON COMPLETING REPORT:

			L.			
	DESCRIPTION OF CHANGES IN THE CONDITION OF THE MATERIALS	NONE	≥ Nov			
	DESCRIPTION OF ACEM OR SUSPECTED ACEM AREAS	300 SF BREECHUNG/ Flue INSULATION	10,000 SF F600R			
	AREA IDENTIFICATION IN THE MANAGEMENT PLAN	A(1)	c(4)			
	LOCATION OF ACEM OR SUSPECTED ACEM AREAS	Boiler Room	Thoughout School		 	
	SURVEILLANCE DATE	4-2-91	4-2-91			

SIGNATURE OF PERSON COMPLETING REPORT:

עניוחטער: אספרס וחס עעוועמרערונויו PLAN UPDATE ED076A Schedule A. Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

### **BTATE OF CONNECTICUT** Department of Education BUREAU OF GRANTS PROCESSING

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SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartford, CT 06145

		DATE OF AMP UPDATE
OWITHEDION HAME	PACEITY HAME AND ADDRESS .	- 1 //- 1 al
	NORTHVILLE ELEMENTARY S	SCHOOL 7 02 11
NEW MILFORD	NOCKTHUICC - LOUISIANIA	

### General Instructions

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AMP Update is submitted.

In an area containing more than one type of ACM, a separate Schedule A must be provided for each material. Please number the pages of each Schedule A being submitted in the upper right hand corner.

	Asbestos Containing Area: BOILER ROOM
	Type of ACM: Sprayed-on Troweled-on Boiler Lagging Pipe Insulation Duct Breeching / Tank Other (specify)
3.	ACM Previously Identified ACM Newly Identified Basis S A
4.	
5.	Friability: High Moderate Low Non-friable
6.	Water Damage High Moderate Low None None None
	Additional Comments (provide description) NO CHANGES
7.	Abatement/Remediation Method (Response Action)  Removal Enclosure Encapsulation  Operation and Maintenance Only V
8.	Date for Implementation CONVINUE
9.	Rationale for Abatement/Remediation Method (Response Action) selected:
	REFER TO MARCH 1990 AMP
	·
٠	

PLAN UPDATE
F0076A
Schedule A, Asbestos Haterial Summary

Section 10-292a-7, Regulations of Connecticut State Agencies Rev. 10/89

### BTATE OF CONNECTICUT Department of Education

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BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Harlord, CT 06145

			P.O. BOX	2219, Haniota, Ct 06145		
TOWNINEGE	SHAN HO		FACRITY NAME AND ADDRESS .		Sallan	DATE OF AMPUPDATE  4-2-9
	_	MILFORD	HORTHVILLE	ELEMENTARY	SCHOOL	9-04 11
		<u>General Instru</u>	<u>ictions</u>			
		well as the na the AMP Update	ame and address of the e is submitted.	district where the fa e facility. Also indi	cate the date	OU MILICII
•		be provided for being submitte	or each material. Pled in the upper right		or each schedu	le A must le A
,ee		1Asbestos (	Containing Area:	Broughout Sch	100	
	:	2. Type of A	CM: Sprayed-on Pipe Insulation_ Other (specify)_	Troweled-onBoller DuctBreeching TloosTLE	Tank	
		3. ACM Previ	ously Identified	ACM Newly Identifie	dBasis S	· ^
			ACM: 10,		/	
		5. Friability	y: High Moderat	e Low Non-fria	ble <u>/</u>	
		6. Condition Water Physi	: Damage High cal Damage High	ModerateLowN ModerateLowN	lone /	
		Addit	ional Comments (provi	de description) \( \subseteq \)	<u> </u>	HANGES
	•					
		Removal	/Remediation Method ( EnclosureEnca _and Maintenance Only	psulation		•
	•	8. Date for	Implementation	CONZINAE	<del></del>	
		9. Rationale	for Abatement/Remedi	ation Method (Response	Action) sele	cted:
			REFER	TO MARCH	1990 Ar	19
						•

### AKNUAL ASBESTOS MANAGEMENT PI NU UPDATE

ED-076 New 10/87 Statutory Rof. Section 10-292s-7 Regulations of Connecticut State Agencies

## STATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT P.O. BOX 2219, Hartlord, CT 06145

(1) TOWWREGION NAME	(2) FACILITY NAME AND ADDRESS	DATE OF INSPECTION

### General Instructions

Provide the name of the school district where the facility is located as well as the name and address of the facility. Also indicate the date on which the AHP Update is submitted.

Complete each of the following questions below. If the answer to a question is  $\frac{No}{r}$ , no further documentation is necessary. If the answer to a question is  $\frac{No}{r}$ , refer to the document, "Guidance for the Completion of the App Undate" for further instructions.

dne:	stion is <u>Yes</u> , refer to the document, "Guidance for the com Update" for further instructions.	precion or the
វេបា \$	The Superintendent of Schools and qualified Asbestos Prog t sign the Certification statement.	ram Coordinator
١.	variable material (Non)	Date for changed since Yes No
2.	Has any material been identified as containing asbestos s approved AMP?	Ince the last YesNo
3.	Is any ACH which was reported in the last approved AMP no (Partial removal of an ACH within an asbestos-containing documented.)	longer present? area need not be Yes No
4.	Which of the following procedures, as outlined in Section Asbestos Management Program and Remodiation Options (AMPR changed since the last approved AMP?	s A and B of the O), has been
•	a. Monitor Physical Condition of ACM b. Education of Building Staff and Occupants, Labeling c. Minimize Fiber Release d. Minimize Potential Human Exposure e. Emergency Repair Procedures	Yes No Yes No Yes No No Yes No
CER.	TIFICATION	
Sec	I certify that the Annual Asbestos Hanagement Plan Update ility conforms to the requirements of the Connecticut Gene tions 10-292a, b, (Public Acts 85-541 and 86-65), and Stat cted pursuant thereto.	181 3141464
Nam	e of Superintendent of Schools	
		Date
Sig	nature of Superintendent	Dutt

Signature of Asbestos Program Coordinator

Name of Asbestos Program Coordinator

Date

# PERIODIC SURVEILLANCE REPORT

Scrool ELEMENTARY BUILDING NAME AND LOCATION: PETTIBONE

ENVIRONMENTAL CONSULTANT 

DESCRIPTION OF CHANGES IN THE CONDITION OF THE MATERIALS	SANE	ACM Debris Noted From October 1990 Inspection removed t	AONE.	35,05,	ひらん	当なると
DESCRIPTION OF ACEM OR SUSPECTED ACEM AREAS	Aircell Insulation ACM Fithnes	Aircell Insulation	Fitting Insulation 10st Aircell Insulation	Fitting Insulation	Transite Heater Boxes	Floor Tile
AREA IDENTIFICATION IN THE MANAGEMENT PLAN	A(2)	4 (2)	A(3)	A (4)	c(s)	(%)>
LOCATION OF ACEM OR SUSPECTED ACEM AREAS	1955 Tunders	BASEMENT HALL UNDER KITCHEN	1958 Tunnels	1962 Tunnels	1955 School Section	Throughout School
SURVEILLANCE DATE	4-2-91					

SIGNATURE OF PERSON COMPLETING REPORT:

Caspil Verson

PLAN UPDATE
F0076A
Schedule A, Asbestos Haterial Summary

Section 10-292a-7. Regulations of Connecticut State Agencies Rev. 10/89

## BTATE OF CONNECTICUT Department of Education BUREAU OF GRANTS PROCESSING SCHOOL FACILITIES UNIT

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•		P.	O. BOX 2219, H	artford, CT 06145		
TOWNINEGION NAME		PACILITY NAME AND A	DDRESS .			DATE OF AMP UPDATE
NEW M	IL FORD	PETT	BONE	ELEMENTAR	√ SCHDON	4-2-91
	well as the n	ne name of the	school dist of the fac	rict where the fac ility. Also indic	ility is loca ate the date	ated as on which
	In an are be provided f being submitt	containing moor each materia	l. Please right hand	•	of each Sched	ıle Λ must ıle Α
	1. Asbestos	Containing Area	: <u>1959</u>	5 TUNNELS	S	
•	2. Type of A	Pipe Insul	ation <u>' 🗸</u> D	led-onBoiler uctBreeching_	lank	•
•		•		M Newly Identified	Basis	S A
	4. Amount of	ACM:	2680	sxlft.		
	5. Friabilit	v: High M	oderate	Low Non-friab	1e	
	6. Condition Water Physi	Damage Hid	h Moder h Moder	ate Low No	one one	
	Addit	ional Comments	(provide de	scription) <u>Da</u>	maged reg	ions
٠.	lio	riled to sp	jecific_	areas through	ghout tu	nnels.
	Removal	Remediation Me Enclosure and Maintenanc	Encapsula	nse Action) tion	•	· .
		[mplementation_			sible.	
	9. Rationale	for Abatement/	Remediation	Method (Response	Action) sele	cted:
	<u> </u>	samaged As	eas .	quite ina	ccessible	<del></del>
•	<u> Impras</u>	tical to	<u>Intitio</u>	ate a ma	intenance	clean
	_up.	vake	step:	s to L	imit dis	dusbance and
	Surth	er damage	<u>,</u>			<del></del>
·		<u> </u>				
-		·		•		