

**CITY OF WOONSOCKET
FINANCE DEPARTMENT**

**INVITATION TO BID:
DEMOLITION OF BUILDINGS - BID #5925 - LOCATED AT:**

**80 River Street
113 River Street
515-517 Gaskill Street**

Sealed proposals in duplicate, enclosed in an envelope labeled, and addressed to the Finance Director, City of Woonsocket, 169 Main Street, P. O. Box B, Woonsocket, RI 02895, will be received until **2 PM on Tuesday, October 1, 2019**, at which time they will be publicly opened and read in the 2nd floor conference room at City Hall. The Instructions to Bidders and other Contract Documents are available on the City website at www.woonsocketri.org.

This contract is intended to provide for **Demolition and Removal** of all unsafe structures, any and all building components, including foundation walls, basement floor, and all contents within and on the property at the above listed sites in the City of Woonsocket, Rhode Island.

A certified check payable to the City of Woonsocket or bid bond in the amount of 5% of the bid price, must accompany each proposal. The certified check or bonds will be returned to all but the successful bidder upon execution of the contract. The bidder's check/bond will be returned upon acceptance of a Performance and Payment Bond by the City.

A Performance and Payment Bond for the entire project with a satisfactory surety company will be required of the successful bidder. Successful bidder shall file an application and be issued a Demolition Permit with the Building Inspection Department, prior to any demolition work commencing.

This project is a federally assisted CDBG program activity subject to Davis Bacon prevailing wage labor rates and requirements.

In accordance with Rhode Island General Law 44-1-6, nonresident contractors are subject to a 3% withholding of the contract price to secure payment of any sales tax, use tax, and/or income tax withheld that may be due the State of Rhode Island.

The Finance Department, through its Director, reserves the right to accept or reject any or all bids or proposals; to waive any technicality to any bid or part thereof submitted; to accept any bid or option or

comparison thereof; to contract in part or in whole; and to accept the bid deemed to be in the best interest of the City of Woonsocket.

No bidder may withdraw its bid within sixty (60) days after the actual time and date of the bid opening thereof. WBE, MBE and Section 3 contractors are encouraged to submit a bid.

Contact the City of Woonsocket Construction Supervisor, Thomas Koback, at (401) 767-9233 with any questions.


Christine Chamberland
Christine Chamberland, Finance Director

**CITY OF WOONSOCKET
RHODE ISLAND**

FINANCE DEPARTMENT

INVITATION TO BID # 5925

DEMOLITION:

**80 River Street
113 River Street
515-517 Gaskill Street**

**DEPARTMENT OF PLANNING
BUILDING INSPECTION DIVISION**

September.....2019

City of Woonsocket

Demolition

**Project Documents
Table of Contents**

Invitation to Bid

Bond Requirements & Technical Specifications

Bid Proposal Forms (by site)

Non-collusion Affidavit of Prime Bidder

Statement of Bidder's Qualifications

**CITY OF WOONSOCKET
RHODE ISLAND
FINANCE DEPARTMENT**

SECTION 1

GENERAL PROVISIONS:

Wherever in this agreement the word 'Building Official' is used, it shall be and is mutually understood to refer to the Building Official of the City of Woonsocket, acting either directly or through any assistant having general charge of the work, or through any assistant or inspector having immediate charge of the work, or through any assistant or inspector having immediate charge of a portion thereof, limited by the particular duties entrusted to them.

Whenever the word 'Contractor' is used herein, it shall be and is mutually understood to refer to the party or parties of the second part to this agreement, or the legal representative of said party or parties.

The proposal shall include all labor, tools, equipment and materials necessary for the complete demolition and removal of all building construction materials, including the foundation walls, basement floor, and all contents within the structure and on the property. All work is to be performed in strict accordance with the guidelines as set forth in the Technical Specifications. Special provisions may apply to specific sites and they will be clarified on the bid proposal sheet.

Successful bidder must mobilize a crew to begin work within fourteen (14) working days after being awarded requested work.

Work hours are from 7 am to 4 pm Monday through Friday, excluding holidays. Any work by a contractor that is necessary after normal work hours will be billed following the Engineering Division policy in the 'Permit Manual' A copy of the manual can be obtained on the following web site
http://www.ci.woonsocket.ri.us/perm_sched.htm.

Any deviations from the original specifications shall be noted by the bidder.

The City assumes no responsibility for any changes in conditions between bid award and contract start date.

SECTION 2

TECHNICAL SPECIFICATIONS:

Contractor shall:

- Obtain all local and/or State permits required to perform required work.
- Evaluate the building for asbestos and/or other materials considered to be hazardous. Should any hazardous materials be located, the removal shall be in accordance with all applicable Federal, State and Local rules and regulations.
- Provide Certified Payroll(s), if so directed.
- Excavate to remove sewer and water utilities in accordance with Engineering Division requirements.
- Provide all labor, equipment and tools necessary to properly disconnect utilities, including necessary trench boxes.

- Provide all safety barrels, cones, construction signs and steel plates as needed or as directed by the City.
- Supply any required police details for traffic control as directed by the Woonsocket Police Department.
- Backfill excavation with clean suitable bank run gravel.
- Finish grade excavation to ensure that no surface water will runoff onto adjacent properties and provide necessary erosion control.
- Slope sites 6 inches per foot or less if required.
- Maintain a clean worksite at all times. Remove all construction debris during operations each day and load into dumpsters for proper disposal. No demolition debris shall be buried on site.
- Provide documentation and a signed manifest as proof of proper disposal of debris.
- Supply water to wash down debris for dust control.
- Assume responsibility for damages caused to water pipes, gas pipes, electrical wires, conduits, sewers, storm water drains, and any public or private property, that occurred as a result of the contracted work. Should adjacent property be damaged in any manner, the Contractor shall immediately contact the Building Official, Brad Ward at (401)767-9246 or (401)767-9238. All damage to said areas shall be repaired immediately.
- Repair damaged landscape areas and any gouging of adjacent roadway caused by tracked equipment.
- Provide and install temporary hot patch (2" thick) on all excavated trenches.
- Remove and dispose of material and/or debris, which has washed into, flowed into or been placed in water courses, ditches, gutters, drains, catch basins, pavement areas or anywhere else, during the progress of the work.

SECTION 3

LOCATION OF UNDERGROUND STRUCTURE:

The locations provided on furnished plans for existing sewers, water pipes, storm drainage, gas, electric mains and other conduits are intended to be approximate only. The City will not be responsible for any omission, nor for any errors in locations due to incomplete or faulty records. The contractor must obtain a 'Dig Safe' number from Dig Safe System, Inc. at 1-888-344-7233.

SECTION 4

SUB-CONTRACTORS:

No portion of the work shall be sub-let to any sub-contractor without first giving the Building Inspection Division due notice in writing of such intention. No sub-contractor shall be employed who is unsatisfactory to the Building Official.

SECTION 5

COMPETENT WORKMEN/LICENSES:

Contractor shall provide a 'Competent Person', as defined by the US Department of Labor Occupational Safety & Health Administration (OSHA), for the location of the proposed work. The contractor shall employ only competent and efficient laborers, operators and tradesmen for every kind of work, and whenever, in the opinion of the City Engineer, any person is unfit to perform their task, or does their work contrary to directions, or conducts themselves improperly, the contractor must discharge that person immediately and not employ that person again on the work.

All equipment operators and workers performing work at the proposed location shall hold the appropriate State of Rhode Island licenses for their responsibilities.

An OSHA ten (10) hour construction safety program is required for all on-site employees.

SECTION 6
SAFETY:

All Federal, State and Local safety regulations shall be followed.

The contractor shall assume responsibility for risks and casualties of every description, for loss or injury to persons and property arising out of the nature of the work, from the action of the elements or from any unforeseen or unusual difficulty.



Department of Health
Tower Capital Hill
Providence, RI 02903-0267
TTY: 311
www.health.ri.gov

Date: February 1, 2012

To: Rhode Island City and Town Building Officials

From: David Spink, Asbestos Control Program Manager

Re: Building Demolition

Federal Law (40 CFR 61 NESHAP Act) and State Regulations (R23-24.5-ASB Rules and Regulations for Asbestos Control) require that an applicant for a demolition permit present an asbestos survey or approved asbestos abatement plan as part of the application process to obtain a demolition permit. These regulations also require that all friable asbestos be abated prior to the demolition of the structure.

Prior instructions from this Office stated that this inspection must be performed by an individual that is certified through the Model Accreditation Plan of the Federal AHERA act (40 CFR 763) and licensed by This Department to provide those inspections.

As further clarification, and as a result of several recent incidents, this office is providing this additional guidance to local building officials.

Any asbestos surveys/inspections presented to obtain demolition permits that do not contain sample results should be referred to this office (stephan.madonagh@health.ri.gov, 222-7746) and the permit should be either denied or held under consideration until a determination is made by this office regarding the appropriateness of the survey/inspection.

Asbestos was used in over four thousand consumer products in the US and this includes many building components. Licensed Asbestos Inspectors are never allowed to make a presumption of non-asbestos content of building products. In the absence of testing, all suspect materials must be assumed positive for the presence of asbestos. An inspector's experience is not sufficient justification to preclude proper collection and analysis of suspected building materials. The Only acceptable reason to exclude suspect asbestos-containing material from the abatement process is laboratory analysis per approved methodology by a licensed, certified laboratory.

DEMOLITION PERMITS
PROCEDURE FOR DISCONNECTING, REMOVING, PLUGGING
OF
WATER, SEWER, STORM DRAINAGE

- 1) The Engineering Division will be responsible for confirming water and/or sewer and/or storm drainage have been properly disconnected and/or plugged. Once confirmed, Engineering Division Personnel will sign for Public Works Department.
- 2) The contractor will be responsible for obtaining a permit through the Engineering Division and notifying the Engineering Division and Water Division 24 hours prior to digging to disconnect and/or remove and/or plug any water and/or sewer and/or storm drainage.

SEWER

- 1) Sewer laterals will be dug at the back of the sidewalk area, on the owner's property.
- 2) Ties to the existing laterals can be found in the Engineering Division Office.
- 3) The lateral will be cut with a pipe cutter or saw. The end will then be capped with a **FERNCO QWIK CAP**, or a similar kind.
- 4) A 2 x 4 piece of lumber will be placed at the end of the plug for locating purposes.
- 5) The other cut end of the pipe will then be plugged with concrete.
- 6) New ties to the capped end will be taken by Engineering Personnel.

STORM DRAINAGE

Storm drain lines shall be bulkheaded if the following conditions exist:

- 1) The pipe drains into a city-owned line.
- 2) The pipe is considered "PRIVATE".
- 3) The pipe only takes from the property in which demolition is to take place.
- 4) Permission to connect the pipe, to a city-owned line, was never given.
- 5) It is found that the pipe is connected into the sanitary sewer system.
- 6) Future use of the drain line will not be needed.

All open ends of pipe shall be bulkheaded. Bulkheading will be performed based on the type of pipe material.

WATER

- 1) The property owner must formally request that the service be shut at the curb-stop by the Water Division.
- 2) Personnel from the Water Division will take a final meter reading and remove any City-owned meters.
- 3) A Master Plumber in the State of Rhode Island and the excavating contractor shall obtain an excavation permit through the Engineering Division, so the service can be disconnected at the curb-stop.
- 4) Said permit shall make the contractor responsible for permanently repairing the sidewalk to City of Woonsocket specifications.
- 5) Disconnection shall be done by the Master Plumber and witnessed by the Water Division.

Disconnection must be done as follows:

- A) The service must be completely disconnected by cutting the tubing/piping at approximately 6" (six inches) from the end of the curb-stop and pulling the free end of the tubing/piping that leads to the building away from the curb stop. The 6" (six inch) piece will then be crimped.

It is understood that there are times that these procedures cannot be followed, due to public safety. The Building Inspector, or his authorized agent or representative, may take steps other than outlined to have any water and/or sewer and/or storm drainage disconnected and/or plugged and/or removed, to insure public safety. If the contractor knows of any other reason that these procedures cannot be followed at the demolition site, then it is the contractor's responsibility to make them known to the Engineering Division.

CITY OF WOONSOCKET, RI
BUILDING INSPECTION DEPARTMENT

**PROCEDURE TO DEMOLISH A BUILDING OR STRUCTURE
OR PORTION THERE OF;**

1. All owners and/or Corporations of the property must **sign** the permit with his or her name and address and telephone number (Notary may be required)
2. On the back of the permit sheet a sign off by the Electric Co, the Telephone Co, the Gas Company, and public works for water and sewer disconnects must be signed to assure removal or disconnection of these services. If there is only sub electric & water feeds, a licensed electrician or plumber shall do the work and sign the permit. **RIGL 23-27.3-116.1**
3. A **performance bond** in the amount of the job must be posted in the City Clerk's Office.
 - a. An insurance certificate in the amount of \$100,000.00 must be posted in this office. **RIGL 23-27.3-116.8**
 - b. The city shall be put on the certificate as well as the owner.
4. A Dig-Safe number 1-888-344-7233 must be obtained and posted on the permit.
5. No building or structure is to be razed or demolished unless, and until provisions are made for the rodent eradication of the building or structure. The General acceptance standard for compliance is that baiting has been accomplished. **RIGL 23-27.3-116.2**
6. Federal and State, (RI Dept of Health), regulations require that prior to the demolition of a building or structure, it must be thoroughly inspected for the presence of friable and non-friable asbestos containing material. A letter must be submitted to this office from a **qualified person** (registered with the state) that this inspection has been performed and that the building is free of or has asbestos material. If asbestos is found, an abatement program shall be provided to this office.
7. Demolition fee must then be paid in the inspection office and is based on the total fee for the demolition of the structure. A copy of signed contract from Demolition Company **must be supplied**.
 - a. If any portion of the existing foundation or structure acts as a retaining wall for sloped or adjacent properties, accommodations must be made and approved of, prior to the commencement of any work to either replace existing or reconstruct existing to the Building officials approval. It may require a stamped engineers plan. If not, complete removal from site of the foundation, footings and all debris is required. The final grade shall be clean, smooth with grass planted and maintained during growth. Ensure no run off on any adjacent properties or city streets.
8. When all the above is completed the permit will be mailed to you. If this is an emergency then the Building Official may grant one, if this office is given a written request and state the emergency to start the job.
9. When all the demolition work has been completed and the site inspected to the satisfaction of the Building Official or his designee a release will be issued to you for you to obtain your bond form the City Clerk.

ASBESTOS REPORTING FORM

DEFINITION: SPOT REPAIR: Any removal, repair, encapsulation, enclosure or other disturbance which encompasses: (1) up to ten (10) linear feet of asbestos from piping and/or (2) up to twenty five (25) square feet of asbestos from any surfaces other than pipes. Large projects divided into smaller segments are not Spot Repairs.

I HEREBY CERTIFY THAT: (CHECK ONE).

_____ a. No asbestos in any amount will be disturbed by work to be performed under permit or contract.

OR

_____ b. Asbestos is present but such amounts to be disturbed are such that the proposed work falls under the definition of SPOT Repair.

OR

_____ c. Asbestos is present in amounts to be disturbed greater than that defined in Spot Repair. I have enclosed a certified copy of the DOH approved abatement plan and a certified copy of the license of the asbestos contractor who shall undertake the work.

Date

Signature

Name of premises

Printed name, & Title

Location of premises

Company, Corp., Owner, etc.

FOR OFFICE USE ONLY

Company address

PERMIT NO.

Company phone number

DATE OF
ISSUANCE

To continue to achieve the goals of the City of Woonsocket's Blight Reduction Program and receive the lowest and best responsible bids, we must be creative with the competitive bidding process. To simplify the program, we have divorced, cut and capped all utilities. Asbestos inspections have been conducted and DOH approved Abatement Plans are provided.

Please note that we are requesting that bids be submitted for each of the three properties individually.

Alternate #1 is a request for all three properties together if awarded as one contract.

Alternate #2 is a request for 80 River Street & 113 River Street if awarded as one contract.

Contracts will require compensation based on Davis Bacon prevailing wage rates. Certified payrolls are to be submitted on the U.S. Department of Labor WH-347 Payroll Form.

CITY OF WOONSOCKET
RHODE ISLAND
FINANCE DEPARTMENT

BID PROPOSAL
80 River Street, Plat 14I Lot 11

The undersigned bidder shall hold their bid prices for a period of (60) sixty days from the bid opening date.

DESCRIPTION

TOTALS

Complete demolition of a 66' x 62' wood framed one story building with a penthouse. (Note: all utilities have been divorced, cut and capped by the City)

\$ _____

Complete demolition and removal of all asphalt and concrete from the lot.

\$ _____

Removal and proper disposal of all building materials, building components, foundation walls, basement floor and all contents within the structure and on the property.

\$ _____

Special Provisions:

Contractor shall exercise best management practices to minimize and prevent debris and sediment from entering the waterway. The rear side of this structure sits directly above the river. Any building materials that may fall into the water are to be removed immediately.

\$ _____

Miscellaneous materials, as approved

cost plus 10%

Police detail, as approved
(contact Sgt. Phil Kamer of the Traffic Division at 401-265-0941)

cost plus 10%

TOTAL PRICE:

\$ _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

BY (person): _____

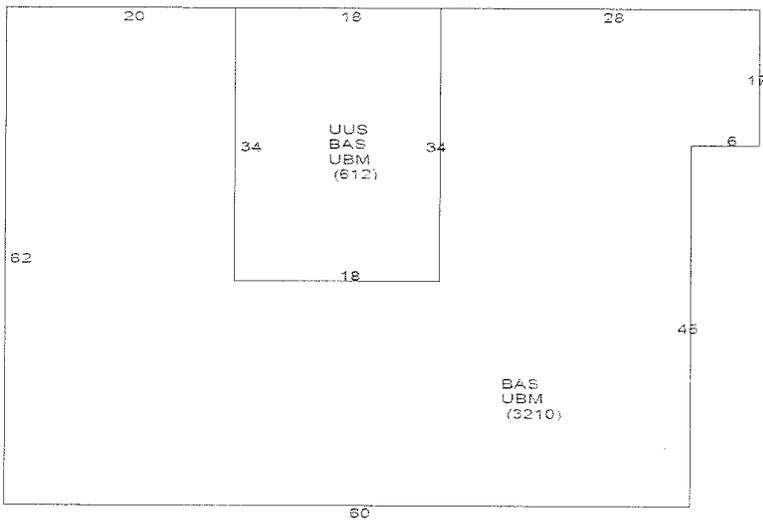
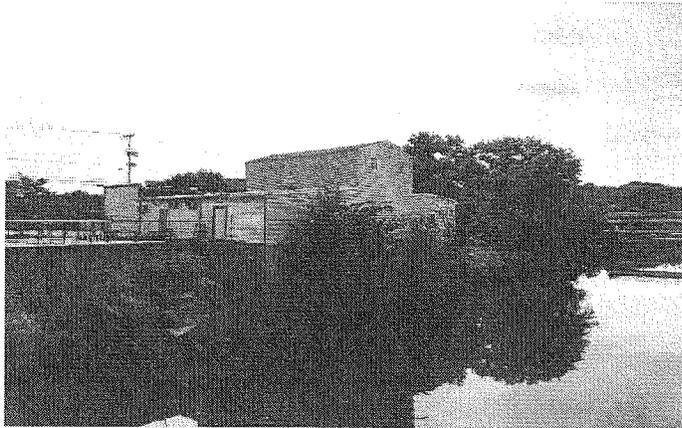
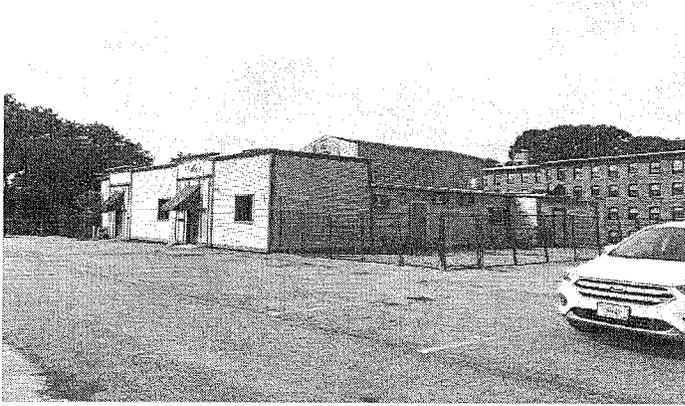
SIGNATURE: _____

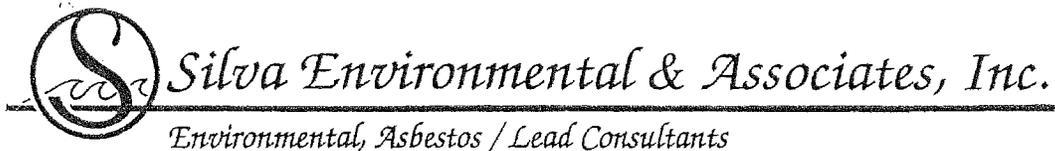
TELEPHONE NUMBER: _____

FAX NUMBER: _____

E-MAIL ADDRESS: _____

80 River Street





ASBESTOS ABATEMENT PLAN AND PROCEDURES

FOR

CITY OF WOONSOCKET
DEMO VACANT STRUCTURE
ROOF AND FLASHING
80 RIVER ST.
WOONSOCKET, RI 02895

OWNER/CONTACT

TOM S. KOBACK
CITY OF WOONSOCKET
169 MAIN STREET
WOONSOCKET, RI 02895

PREPARED BY:

SILVA ENVIRONMENTAL & ASSOCIATES, INC.

M. FRANK SILVA, PRESIDENT
INDUSTRIAL HYGIENIST
45 TRANSIT STREET, WARWICK, R.I. 02889
TEL: 401-732-3976

R.I. CERTIFICATION NO.:
AAC-085PD, AAC-085IS, AAC-085MP

JOB NO.: 57341

AUGUST 12, 2019

TABLE OF CONTENTS

I. INTRODUCTION

- 1.1 Project Description
- 1.2 RI Dept. of Health Forms ASB-16B, ASB-16, ASB-16A

II. PLAN OF ACTION

- 2.1 Barrier Maintenance
- 2.2 Description of ACBM and Work Practices

III. INTERIM OPERATIONS & MAINTENANCE

- 3.1 Actions taken to prevent inadvertent exposure by unauthorized individuals
- 3.2 Monitoring and Maintaining the above actions

IV. CLEARANCE AIR SAMPLING

- 4. 1. In-Process Air Sampling
- 4. 2. Final Air Clearance

V. Exhibits

- 1. Annotated Floor Plans
- 2. Bulk Sample - Certificate of Analysis
- 3. Pre-Abatement Air Samples

Section I. Introduction

This abatement plan is for the removal of **roof material including flashing** from a Vacant structure located at 80 River St., Woonsocket RI, is submitted for approval by the Rhode Island Department of Health as specified in Rules and Regulations for Asbestos Control (R23-24.5-ASB) dated January, 1986, Subpart C.1.2 and amended September 2012.

I.1 Project Description

This plan involves the Abatement of approximately three thousand and eighty six square feet (**3086 sf**) of ACM in form of rood and flashing ACM, from a vacant structure located at 80 River St., Woonsocket. All asbestos abatement activity shall follow the RI Rules & Regulations for Asbestos Control (Sec. B.8.6 & B.8.8)

GENERAL NOTE

We believe that the quantities of materials described above to be approximately correct, however the contractor is responsible for the removal of all identified material type regardless of stated quantities.

All abatement work will be performed by a State of Rhode Island licensed asbestos abatement contractor.

**RHODE ISLAND DEPARTMENT OF HEALTH
NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN**

Facility: Vacant Structure

Address: 80 River St.

City/Town: Woonsocket Zip: 02895 Amendment Phase No: _____

Abatement Plan Written By: M Frank Silva Certification No: AAC-085 PD

Summary of specific waivers/variances being requested: Final and During removal air samples

Type of Asbestos Abatement Removal Enclosure Encapsulation
 Demolition Glovebag Asphalt Roofing
 Other (specify) _____

Is this plan being submitted in response to a Notice of Violation and/or a Notice of Requirement to Submit an Asbestos Abatement Plan? Yes No

If yes, Indicate Notice/Building Evaluation No(s): _____
Contractor: To be selected License No: LAC-

Estimated Starting Date: ASAP

Pre-Abatement Sampling Information

Bulk Samples Collected By: M. Frank Silva Certification No: AAC-085IS

Bulk Samples Analyzed By: ProScience Analytical Certification No: AAL-093

Air Samples Analyzed By: Silva Environmental Certification No: AAL-084A1

Clearance Air Sampling Information

Air Samples to be Collected By: Silva Environmental

Air Samples to be Analyzed By: Silva Environmental Certification No: AAL-84A1

CERTIFICATION

I certify that: this asbestos abatement plan is prepared and submitted under the provisions of Section 23-24.5-6 of the RI Asbestos Control Act and Parts A and C of the RI Rules and Regulations for Asbestos Control; all abatement/management activities performed in conjunction with this plan must be in compliance with the specifications prescribed in this plan (when approved) and the most current revision of all applicable federal and state regulations; and the asbestos abatement/management activities described in this plan must be performed by a RI licensed asbestos abatement contractor.

Certified by: [Signature] Title: Planning Director
(Signature of Building Owner or Agent)
Steven Lima Date: 8/29/19
(Typed/Printed Name of Certifier)

Subscribed and sworn before me this 29th day of August, 2019
[Signature] My Commission Expires: 6/28/21

(Notary Public)

AFFIX NOTARY SEAL HERE



Department of Health

Three Capital Hill
Room 296
Providence, RI 02908-5097

401-222-5960
RI Relay 711
www.health.ri.gov

September 4, 2019

City of Woonsocket
Tom Koback
169 Main Street
Woonsocket, RI 02895

Plan Number: 83369

Dear Tom Koback :

This is in reference to the asbestos abatement plan which you submitted for:
Vacant Structure 80 River St Woonsocket, RI 02895.
The above referenced asbestos abatement plan is hereby approved as conforming with Part C of the
Rhode Island Rules and Regulations for Asbestos Control.

A review of your request for a waiver of pre-abatement, in-process, and clearance air sampling (Personal
air sampling will be completed in lieu of clearance air sampling) as described in section 2.2 has been
approved by this office.

Please note that a licensed asbestos abatement contractor shall submit an ASB-22 start work notification
at least 10 working days before any on-site work begins at a planned asbestos project. In addition, a
licensed site supervisor shall notify this office by telephone when the licensed asbestos contractor begins
site preparation.

A "Confirmation of Receipt of Asbestos for Disposal" must be forwarded to this office within five (5)
working days of receipt.

If you have any further questions concerning the above referenced asbestos abatement plan, please
contact Erin Ferreira, 222-7777.

Sincerely,

Bonnie Cassani-Brandt
Asbestos, Lead, and Radon Program Manager
Center for Healthy Homes and Environment

[StandardPlanApprovalWithWaiver_cb1]

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Office of Occupational & Radiological Health

APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN

1. Building Owner's Name: City of Woonsocket Owner Address and Phone number
169 Main Street
City/Town: Woonsocket
Zip: 02895
2. Application Prepared By: M Frank Silva Tele No.: (401) 639-2577
(Area Code, No., Ext.)
- RI certification No: AAC-085 PD 3. Person to be contacted regarding this application:
Tom Koback
Telephone No: (401) 732-3976 Name: Tom Koback
(Area code, No., Ext.) Telephone No: (401) 639-2577
(Area Code, No., Ext.)
4. Location where abatement work will be performed:
Name (if applicable): Vacant structure
Street: 80 River St.
City/Town: Woonsocket, RI Zip: 02895
-
5. Is this application being submitted in response to a "Notice of Requirement to Submit an Asbestos Abatement plan"? Yes No
If Yes, what is the due date for submittal of Abatement plan? _____
(Mo.) (Day) (Yr.)
Evaluation Number on the Notice: _____
-
6. Contractor who will be performing abatement work (if selected):
Name: To be Selected R.I. License No.: LAC-_____

7. Estimated Starting Date of Abatement Work: ASAP
(Month) (Day) (Year)

8. Estimated Completion Date of Abatement Work: two weeks from the start date
(Month) (Day) (Year)

9. Type of Asbestos Abatement: (Check all that apply)
 Removal Enclosure
 Encapsulation Demolition
 Operations and Maintenance Only
 Other (Specify) _____

10. Type of Building: School
 Privately Owned Building
 Publicly Owned Building
 Residence
 Other (Specify) _____

11. Building Access: Public Access (\geq 25% of Building Area)
 Limited Public Access (< 25% of Building Area)
 No Public Access

12. Bulk Sample Collection and Analysis:

A). Person collecting bulk samples:
Name: M. Frank Silva RI Certification No.: AAC 0851S

B). Sampling Methodology:
 EPA AHERA Sampling requirements [40 CFR 763.86].

EPA's Asbestos Containing Material in School Buildings: A Guidance Document (EPA-405/2-78-014) or Guidance for Controlling Asbestos Containing Materials - 1985 Edition (EPA-560-5-85-024)

Other (Specify) _____

C). Laboratory performing the analysis of the bulk samples

Name: ProScience Analytical RI Certification No.: AAL-093

D). Analytical Methodology:

EPA Interim Method for the Determination of Asbestos in Bulk Insulation Samples [PLM method only].

Other (Specify) _____

13. Pre-Abatement Air Sample Collection and Analysis:

A). Person collecting pre-abatement air samples:

Name: N/A Affiliation: _____

B). Laboratory performing analysis of pre-abatement air samples.

Name: N/A RI Certification No.: AAL- _____

C). Methodology used in the collection and analysis of pre-abatement samples:

NIOSH Method 7400 [Most Current Revision]

OSHA 29 CFR 1926.1101 – Appendix A & B

Other (Specify) _____

14. A. Indicate how the regulated asbestos containing material (RACM) will be removed from the abatement site. If a hauler or broker will be used to transport the RACM to a disposal site, they must also be identified.

The materials shall be containerized and transported to an authorized facility

B. Provide the name and location of the authorized asbestos waste facility to which the removed material will be transferred for disposal (if known).

Not known at the present time

15. Person designated as compliance monitor for abatement work.

Name: Silva Environmental

Affiliation: Silva Environmental

16. In-Process & Clearance Air Sampling:

- A. Describe on an attachment the type, number and location of air samples that will be collected outside the work area during the abatement project.
- B. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fibers per cubic centimeter) is exceeded outside the work area during the abatement project.
- C. Describe on an attachment the type, number and location of air samples that will be collected as part of the final clearance testing.
- D. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fiber per cubic centimeter) is exceed during final clearance testing.

See Section IV

17. A separate and fully completed Form ASB-16A must be submitted for each area to be abated. List below the entry in Item 1 from each attached ASB-16A.

Roof and Flashing (see Exhibit I)

18. I certify that this plan was prepared by me and I am responsible for its content.

Signature: _____ Date 08/12/2019
(Month) (Day) (Year)

Affiliation: Silva Environmental

19. ASBESTOS ABATEMENT PLAN APPLICATION FEE:

- | | |
|--|--------|
| <input type="checkbox"/> Operation & Maintenance Only | \$ 75 |
| <input type="checkbox"/> Up to One (1) NESHAP Unit | \$ 75 |
| <input type="checkbox"/> Between One (1) & Ten (10) NESHAP Units | \$ 300 |
| <input checked="" type="checkbox"/> Between Ten (10) & Fifty (50) NESHAP Units | \$ 600 |
| <input type="checkbox"/> Over Fifty (50) NESHAP Units | \$ 900 |

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Office of Occupational & Radiological Health

APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN

SUPPLEMENTAL INFORMATION: AREA DESCRIPTION AND PROPOSED REMEDY

BUILDING LOCATION: 80 River St, Woonsocket

INSTRUCTIONS: All items on this form must be addressed. All references to attachments must be clearly identified. All attachments must be marked with the specific item numbers on this form to which they pertain.

- (1) Area Location/Identification (Room Name/No., Evaluation Number, etc.):

Roof and Flashing

- (2) Attach a description of each type (e.g. pipe, ceiling, etc.) of regulated asbestos containing material (RACM) in this area, including condition, location, quantity and asbestos content. Attach a copy of the laboratory report(s) for all samples. (NOTE: All laboratory reports must include the name of the building(s) and the location(s) of the sample(s).

See Exhibit II

- (3) Attach a current scale drawing of this area, showing direction of North and East, which has been clearly annotated to show the type, location and quantity of all RACM in this area. This drawing must include a legend which acts as a guide to the scale, symbols and nomenclature used in the drawing. If a master plan or multiple drawings are provided, indicate the specific location(s) and drawing number(s) which depict this area. The location of the decontamination chamber must also be so indicated on the appropriate drawing(s).

See Exhibit I

(4) PROPOSED REMEDIES:

- A). Attach a description of the interim Operations and Maintenance Plan that will be implemented in accordance with C.1.2 (b).

See Section III

(4) PROPOSED REMEDIES (cont.):

B). Will any portion of this area be abated by use of B.8 work procedures?

Yes No

If Yes, indicate below which RACM in this area will be abated by use of the following B.8 work procedures:

B.8.2 & B.8.3	[REMOVAL]	_____
B.8.2 & B.8.4	[ENCAPSULATION]	_____
B.8.2 & B.8.5	[ENCLOSURE]	_____
B.8.6	[DEMOLITION]	<u>Roof and Flashing</u>
B.8.7	[GLOVEBAG]	_____
B.8.8	[ASPHALT ROOFING]	<u>Roof and Flashing</u>

C). Are you requesting any waivers to the above selected B.8 procedure for any of the abatement activities in this area?

Yes No

If yes, attach a detailed description of the waivers requested you are proposing to utilize. All items must be keyed to the specific section(s) of the regulations for which waivers are requested. **See Section II**

During removal and Final air samples

D). Are you proposing alternative procedures under B.11 for any of the abatement activities in this area?

Yes No

If yes, attach a detailed description of the alternate procedures requested you are proposing to utilize. Alternate procedures must include a justification for not following specific section(s) of the regulations and be as protective of public health.

E). Will any RACM remain in this area after abatement?

Yes No Beyond scope of inspection

If Yes, attach a description of the RACM that will remain and the details of the on-going Operations and Maintenance Plan that will be implemented in accordance with C.1.2(b).

AGENCY USE ONLY

Section II Plan of Action

2.1 Barriers and Maintenance

All polyethylene barriers inside the work area, in the worker decontamination enclosure system and at critical barriers (i.e. barrier tape) installed to demarcate the work area shall be inspected continuously while asbestos removal work is in progress.

Any damage and/or defects in the barrier system shall be repaired immediately upon discovery.

At any time during the abatement activities, after barriers have been erected if visible material is observed outside of the work area or if damage occurs to barriers, work shall immediately stop. Repairs will be made to the barriers and debris and/or residue shall be cleaned up using appropriate HEPA vacuuming and wet mopping procedures or other appropriate methods as determined by the project I.H.

2.2 Description of ACBM

This plan involves the Abatement of approximately three thousand and eighty six square feet (**3086 sf**) of ACBM in form of **roof material including flashing** ACBM, from a vacant structure located at 80 River St., Woonsocket. All asbestos abatement activity shall follow the RI Rules & Regulations for Asbestos Control (Sec. B.8.6 & B.8.8)

All asbestos abatement activity shall follow the RI Rules & Regulations for Asbestos Control (Sec. B.8.6, B.8.8).

The removal will follow procedure **B.8.8** for removal category I Nonfriable ACM-Asphalt Roofing products.

We are requesting a waiver for any air sampling during removal as well as final air samples.

Section III Interim Operations and Maintenance Plan

- 1) The Building owner is aware of the presence and locations of the ACM on this building. The building is presently vacant and locked. The building owner will continue to deny access through these methods until asbestos abatement activities begin. Immediately following abatement the structure will be razed.

- 2) The Manager for the project has been supplied with a listing of the location and category of all identified ACBM for this project, as well as sample results for suspect materials that have been identified as non-asbestos containing.

Section IV Air Sampling

4. 1. During the Asbestos abatement activities the Abatement workers exposure will be sampled per the required OSHA personal air sampling protocol. **We are requesting a waiver for any other air sampling during removal.**

Final Air Clearance

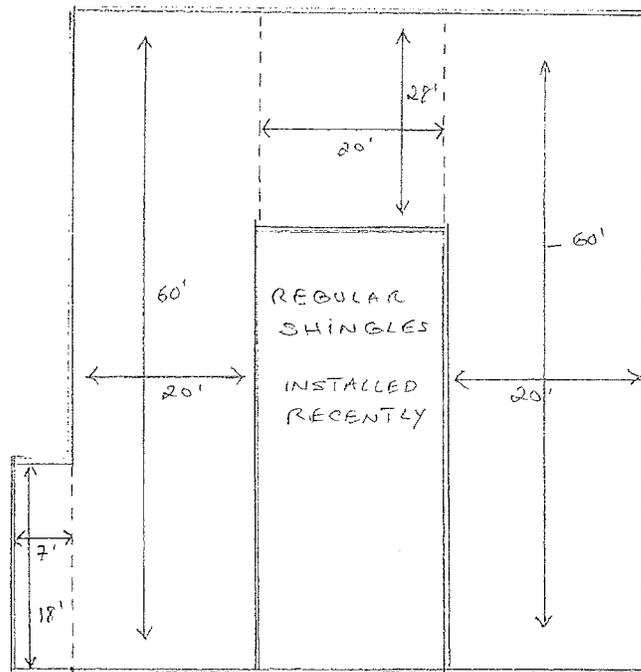
- 4.2 We are requesting a waiver of the requirement to collect clearance (final) air sampling. In lieu of collection of clearance air samples the asbestos abatement workers personal air samples will be used. The building is vacant and no occupancy is planned following the removal of the asbestos containing materials. The building will be released to the demolition contractor immediately upon the total removal of the asbestos materials.

Note: IF any re-occupancy of the structure is required prior to demolition, the Industrial Hygienist for the project will be notified and will perform final air sampling per N.I.O.S.H. 7400 methods. The results must be at or below the RI DOH NOEL of 0.01 f/cc. Should any of the final samples indicate a higher value, the Contractor shall take appropriate actions, including re-cleaning the work area, prior to collection of the next set of clearance air samples. Re-occupancy will be allowed only after the area has reached the NOEL clearance level of 0.01 f/cc.

EXHIBIT I
ANNOTATED FLOOR PLANS

80 RIVER ST. WOODSOCKET

ROOF AREA (TAR)



Handwritten signature or initials

EXHIBIT II
BULK SAMPLES
CERTIFICATE OF ANALYSIS



ProScience Analytical Services, Inc

M. Frank Silva
Silva Environmental & Associates, Inc.
45 Transit St.
Warwick, RI 02889

July 19, 2019

Dear M. Frank Silva,

The enclosed analytical results have been obtained by using EPA 600/R-93/116 or EPA 600/M4-82-020. Calibrated Visual Estimate (CVE) is used by ProScience for the determination of the percentage of asbestos and other components in the sample. Point Counting is recommended when the sample contains less than 10% asbestos by CVE. Friable materials found to be less than 1% by CVE are automatically point counted (400 points) at no additional charge. ProScience recommends further analysis by a gravimetric method for non-friable materials that are less than 1% by CVE.

The Quality Control data related to the samples analyzed is available upon client's written request. ProScience Analytical Services Inc., assumes no responsibility for potential sample contamination that may have occurred during the sample collection process or erroneous data provided by the client. Unless otherwise indicated, all samples were received in acceptable condition.

The enclosed results may not be used under any circumstances as product endorsement by any US government agency including NIST/NVLAP.

All Laboratory records are retained for at least three years unless otherwise directed in writing by the client. The actual samples are retained for a period of two months and written request is necessary in order to be retained for a longer period of time. All analytical results and records are considered strictly confidential and will not be released under any circumstances to anyone except the actual client. The analytical results included in this report apply only to the items tested. This report may not be reproduced except in its entirety, without the permission of ProScience Analytical Services, Inc., Laboratory Director.

If you have any questions please contact the Laboratory Manager or the Laboratory Director.

Sincerely,

Sophetra Ken, Optical Asbestos Manager

Aimee Cormier, Laboratory Director

Enclosure: Version 2
LAB BATCH ID: B 116859 CLIENT PROJECT ID: 57341
Client Ref: City of Woonsocket, 80 River St., Woonsocket
CT ID# PH-0209; MA ID# AA000156; ME ID# LB-055; NVLAP Lab Code 200090-0; RI ID # AAL-093;
VT ID# AL016876

ProScience Analytical Services, Inc.

Client Name: Silva Environmental & Associates, Inc.
 PO #: N/A
 Client Project #: 57341
 Client Reference: City of Woonsocket, 80 River St., Woonsocket
 Method: EPA/600/R-93/116

Batch: B116859
 Date Sampled: 7/16/2019
 Date Received: 7/18/2019
 Date Analyzed: 7/19/2019
 Date of Report: 7/19/2019

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-001	Tan	<1	0	0	0	0	0	0	0	0	0	0	0	100
Description: 12x12 Floor Tile														
Location: Electric Room														
Comments: Recommend TEM Analysis. Is asbestos present? Yes. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-002	Black	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Mastic for Above														
Location: Electric Room														
Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-003	Blue	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: 12x12 Floor Tile - Top Layer														
Location: N/A														
Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-004	Blue	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: 12x12 Floor Tile - Bottom Layer														
Location: N/A														
Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-005	Yellow	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Mastic for Both Tile Above														
Location: N/A														
Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-006	White	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Plaster w/Popcorn Type														
Location: N/A														
Comments: Is asbestos present? No. Analyzed: Yes														

ProScience Analytical Services, Inc.

Client Name: Silva Environmental & Associates, Inc.
 PO #: N/A
 Client Project #: 57341
 Client Reference: City of Woonsocket, 80 River St., Woonsocket
 Method: EPA/600/R-93/116

Batch: B116859
 Date Sampled: 7/16/2019
 Date Received: 7/18/2019
 Date Analyzed: 7/19/2019
 Date of Report: 7/19/2019

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-007	Multil	0	0	0	0	0	0	2	0	68	0	0	0	30
Description: Ceiling Tile (Small Holes)														
Location: N/A														
Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-008	Black	5	0	0	0	0	0	0	0	25	0	0	0	70
Description: Main Roof Roofing Material														
Location: N/A														
Comments: Is asbestos present? Yes. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-009	Black	10	0	0	0	0	0	0	0	20	0	0	0	70
Description: Main Roof Flashings														
Location: N/A														
Comments: Is asbestos present? Yes. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-010	Black	0	0	0	0	0	0	15	0	0	0	0	0	85
Description: Roof Shingles														
Location: N/A														
Comments: Is asbestos present? No. Analyzed: Yes														

Asbestos Codes: CHR = Chrysotile, AMO = Amosite, CRO = Crocidolite, ACT = Actinolite, TRE = Tremolite, ANT = Anthophyllite
 Non-Asbestos Codes: FBG = Fiberglass, MNW = Mineral Wool, CEL = Cellulose, HAR = Hair, SYN = Synthetic, OTH = Other, NON = Non-Fibrous Minerals

Note: To create a unique lab sample ID, use the Batch # and the Sample ID (example: [Batch #] - [Sample ID]).

* All results are in percentage.

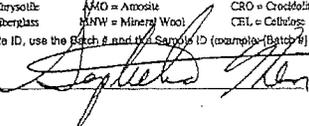
Analyst: Sophelra Ken 

EXHIBIT III
PRE-ABATEMENT AIR SAMPLES
CERTIFICATE OF ANALYSIS

Note: We are requesting a waiver for this item; vacant dwellings.

CITY OF WOONSOCKET
RHODE ISLAND
FINANCE DEPARTMENT

BID PROPOSAL
113 River Street, Plat 14M Lot 423

The undersigned bidder shall hold their bid prices for a period of (60) sixty days from the bid opening date.

DESCRIPTION

TOTALS

Complete demolition of a 30' x 60' wood framed two story building.
(Note: all utilities have been divorced, cut and capped by the City)

\$ _____

Complete demolition and removal of all concrete from the lot.

\$ _____

Removal and proper disposal of all building materials, building
components, foundation walls, basement floor and all contents within
the structure and on the property.

\$ _____

Special Provisions:

Contractor shall exercise the best management practices to minimize and prevent
debris from falling onto the abutting garage. After seeking approval from the owner,
provisions shall be taken to protect the rubber roof membrane on the garage.

\$ _____

Front and left foundation walls are to remain in place to prevent damage to
the abutting property and the general public walk.

Miscellaneous materials, as approved

cost plus 10%

Police detail, as approved
(contact Sgt. Phil Kamer of the Traffic Division at 401-265-0941)

cost plus 10%

TOTAL PRICE:

\$ _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

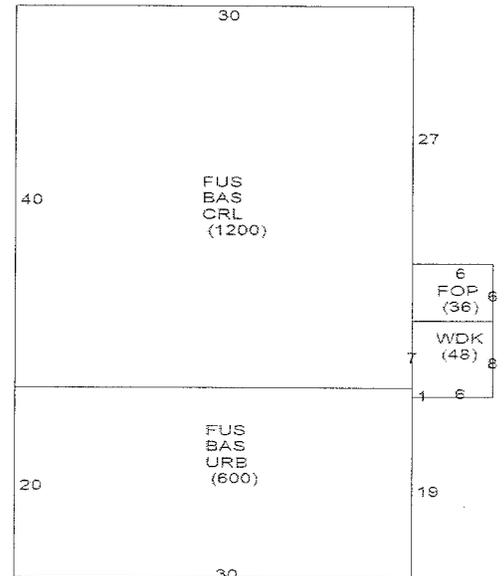
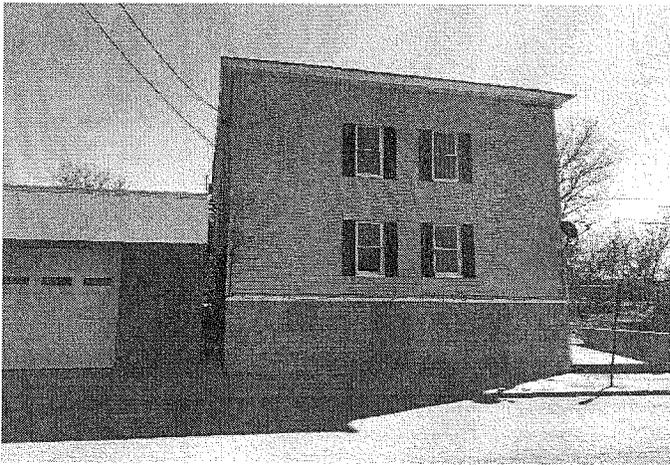
BY (person): _____

SIGNATURE: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

113 River Street



 *Silva Environmental & Associates, Inc.*
Environmental, Asbestos / Lead Consultants

May 28, 2019

Mr. Tom S. Koback, Construction Supervisor
City of Woonsocket
169 Main Street
Woonsocket, RI 02895

Re: Structure schedule for total demolition located at 113 River Street, Woonsocket.

Dear Mr. Koback:

Please be advised that the vacant structure owned by the City of Woonsocket schedule for total demolition, located at 113 River Street, Woonsocket, was inspected by Silva Environmental & Associates, Inc. accredited inspector for asbestos.

The following suspected material were collected and analyzed for asbestos content:

RS-001. Linoleum, 1st Floor common Hallway - **Negative**
RS-001.1. Mastic Associated, 1st Floor common Hallway - **Negative**
RS-002. Plaster, Skim, Right apartment - **Negative**
RS-002.1. Plaster base, Right apartment - **Negative**
RS-003. Plaster (Fine) 2nd Floor right - **Negative**
RS-004. Plaster (Rough) 2nd Floor right - **Negative**
RS-005. Linoleum, Stairs to 2nd floor - **Negative**
RS-005.1. Mastic associated to 2nd Floor - **Negative**
RS-006. Linoleum, Common Hallway Landing - **Negative**
RS-006.1. Mastic associated to Common Hallway Landing - **Negative**
RS-007. Roofing material - **Negative**

Note: The total of eleven (11) was collected. See attached laboratory report.

No other visual suspect materials were found in the property mentioned above however in the course of demolition, if any suspect material is found, should be assumed to contain asbestos until sampling and laboratory analysis proves otherwise.

This letter serves as notification that a demolition permit can be issued by the City of Woonsocket Permit Division.

Thank you for the opportunity to serve your needs. If you have any questions regarding this letter, please call me at (401) 732-3976 or my cell (401) 413-1142.

Sincerely
Silva Environmental & Associates, Inc.


M. Frank Silva, President
Industrial Hygienist
Rhode Island State Certifications:
AAC-085PD, AAC-085IS, AAC-085MP

BULK SAMPLES RESULTS
(ASBESTOS)



ProScience Analytical Services, Inc

M. Frank Silva
Silva Environmental & Associates, Inc.
45 Transit St
Warwick, RI 02889

May 23, 2019

Dear M. Frank Silva,

The enclosed analytical results have been obtained by using EPA 600/R-93/116 or EPA 600/M4-82-020. Calibrated Visual Estimate (CVE) is used by ProScience for the determination of the percentage of asbestos and other components in the sample. Point Counting is recommended when the sample contains less than 10% asbestos by CVE. Friable materials found to be less than 1% by CVE are automatically point counted (400 points) at no additional charge. ProScience recommends further analysis by a gravimetric method for non-friable materials that are less than 1% by CVE.

The Quality Control data related to the samples analyzed is available upon client's written request. ProScience Analytical Services Inc., assumes no responsibility for potential sample contamination that may have occurred during the sample collection process or erroneous data provided by the client. Unless otherwise indicated, all samples were received in acceptable condition.

The enclosed results may not be used under any circumstances as product endorsement by any US government agency including NIST/NVLAP.

All Laboratory records are retained for at least three years unless otherwise directed in writing by the client. The actual samples are retained for a period of two months and written request is necessary in order to be retained for a longer period of time. All analytical results and records are considered strictly confidential and will not be released under any circumstances to anyone except the actual client. The analytical results included in this report apply only to the items tested. This report may not be reproduced except in its entirety, without the permission of ProScience Analytical Services, Inc., Laboratory Director.

If you have any questions please contact the Laboratory Manager or the Laboratory Director.

Sincerely,

Sophetra Ken, Optical Asbestos Manager
Aimee Cormier, Laboratory Director

Enclosure: Version 2
LAB BATCH ID: B 115958 CLIENT PROJECT ID: 57304
Client Ref: City of Woonsocket, 113 River St., Woonsocket
CT ID# PH-0209; MA ID# AA000156; ME ID# LB-055; NVLAP Lab Code 200090-0; RI ID # AAL-093;
VT ID# AL016876

ProScience Analytical Services, Inc.

Client Name: Silva Environmental & Associates, Inc.
 PO #: N/A
 Client Project #: 57304
 Client Reference: City of Woonsocket, 113 River St., Woonsocket
 Method: EPA 600/8-93-010

Batch: B115958
 Date Sampled: 5/20/2019
 Date Received: 5/22/2019
 Date Analyzed: 5/23/2019
 Date of Report: 5/23/2019

Sample ID	Color	Asbestos %						Non-Asbestos %							
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON	
RS-001	Multi	0	0	0	0	0	0	2	0	20	0	0	0	78	
Description: Linoleum Location: 1st Floor Common Hallway Comments: Is asbestos present? No Analyzed: Yes															

Sample ID	Color	Asbestos %						Non-Asbestos %							
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON	
RS-002	White	0	0	0	0	0	0	0	0	0	5	0	0	95	
Description: Plaster Skim Location: Right Apt. Comments: Is asbestos present? No Analyzed: Yes															

Sample ID	Color	Asbestos %						Non-Asbestos %							
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON	
RS-003	White	0	0	0	0	0	0	0	0	0	0	0	0	100	
Description: Plaster (Fine) Location: 2nd Fl. Right Comments: Is asbestos present? No Analyzed: Yes															

Sample ID	Color	Asbestos %						Non-Asbestos %							
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON	
RS-004	White	0	0	0	0	0	0	0	0	0	5	0	0	95	
Description: Plaster (Rough) Location: 2nd Fl. Right Comments: Is asbestos present? No Analyzed: Yes															

Sample ID	Color	Asbestos %						Non-Asbestos %							
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON	
RS-005	Yellow	0	0	0	0	0	0	0	0	15	0	5	0	80	
Description: Linoleum Location: Stairs to 2nd Floor Comments: Is asbestos present? No Analyzed: Yes															

Sample ID	Color	Asbestos %						Non-Asbestos %							
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON	
RS-006	tan	0	0	0	0	0	0	0	0	0	0	0	0	100	
Description: Linoleum Location: Common Hallway Landing Comments: Is asbestos present? No Analyzed: Yes															

ProScience Analytical Services, Inc.

Client Name: Silva Environmental & Associates, Inc.
 PQ #: N/A
 Client Project #: 57304
 Client Reference: City of Woonsocket, 113 River St., Woonsocket
 Method: EPA/609/R-93/116

Batch: B115958
 Date Sampled: 5/20/2019
 Date Received: 5/22/2019
 Date Analyzed: 5/23/2019
 Date of Report: 5/23/2019

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-007	Multi	0	0	0	0	0	0	0	0	35	0	0	0	65
Description: Red-brown Material Location: D/A Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-001.1	Tan	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Mastic assoc. w/RS 001 Location: 1st Floor Common Stairway Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-002.1	Tan	0	0	0	0	0	0	0	0	0	5	0	0	95
Description: Plaster Base assoc. w/RS 002 Location: High Apt Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-005.1	Brown	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Mastic assoc. w/RS 005 Location: Stairs to 2nd Floor Comments: Is asbestos present? No. Analyzed: Yes														

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
RS-006.1	Yellow	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Mastic assoc. w/RS-006 Location: Common Hallway Landing Comments: Is asbestos present? No. Analyzed: Yes														

CHR - Chrysotile AMO - Amosite CRO - Crocidolite ACT - Actinolite TRE - Tremolite ANT - Anthophyllite FBG - Fibrous Brucite
 MNW - Microfibrillar Wollastonite CEL - Cellulose HAR - Harbingerite SYN - Synchroite OTH - Other NON - Non-Asbestos Materials

Note: To ensure accuracy, please refer to the full report for the full list of results and the full EPA/609/R-93/116 Method.

* All results are in percentage.

Analyst: Dan *[Signature]* For.

CITY OF WOONSOCKET
RHODE ISLAND
FINANCE DEPARTMENT

BID PROPOSAL
515-517 Gaskill Street, Plat 19B Lot 324

The undersigned bidder shall hold their bid prices for a period of (60) sixty days from the bid opening date.

DESCRIPTION

TOTALS

Complete demolition of a 72' x 40' wood framed one story duplex with a stucco exterior. (Note: all utilities have been divorced, cut and capped by the City)

\$ _____

Complete demolition and removal of all concrete from the lot.

\$ _____

Removal and proper disposal of all building materials, building components, foundation walls, basement floor and all contents within the structure and on the property.

\$ _____

Miscellaneous materials, as approved

cost plus 10%

Police detail, as approved
(contact Sgt. Phil Kamer of the Traffic Division at 401-265-0941)

cost plus 10%

TOTAL PRICE:

\$ _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

BY (person): _____

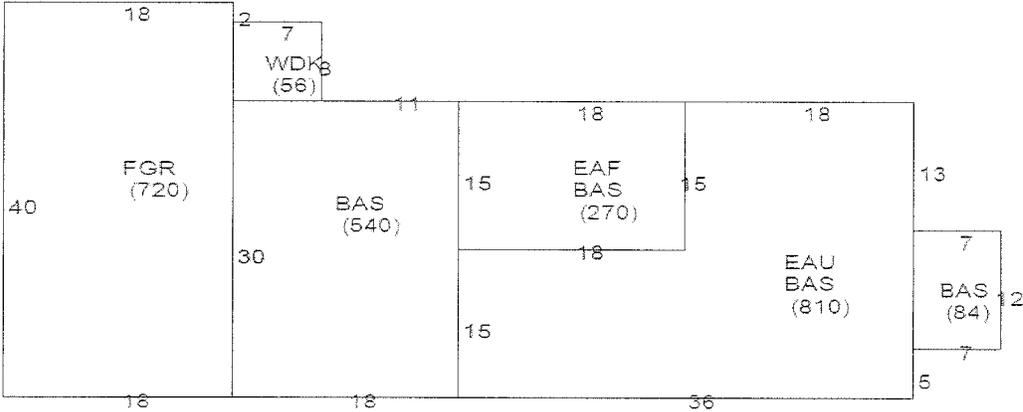
SIGNATURE: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

E-MAIL ADDRESS: _____

515-517 Gaskill Street





ASBESTOS ABATEMENT PLAN AND PROCEDURES

FOR

CITY OF WOONSOCKET

DEMO VACANT DUPLEX
ASBESTOS INTERIOR WALL
515-517 GASKILL ST.
WOONSOCKET, RI 02895

OWNER/CONTACT

TOM S. KOBACK
CITY OF WOONSOCKET
169 MAIN STREET
WOONSOCKET, RI 02895

PREPARED BY:

SILVA ENVIRONMENTAL & ASSOCIATES, INC.

M. FRANK SILVA, PRESIDENT
INDUSTRIAL HYGIENIST
45 TRANSIT STREET, WARWICK, R.I. 02889
TEL: 401-732-3976

R.I. CERTIFICATION NO.:
AAC-085PD, AAC-085IS, AAC-085MP

JOB NO.: 57340

AUGUST 12, 2019

TABLE OF CONTENTS

I. INTRODUCTION

- 1.1 Project Description
- 1.2 RI Dept. of Health Forms ASB-16B, ASB-16, ASB-16A

II. PLAN OF ACTION

- 2.1 Barrier Maintenance
- 2.2 Description of ACBM and Work Practices

III. INTERIM OPERATIONS & MAINTENANCE

- 3.1 Actions taken to prevent inadvertent exposure by unauthorized individuals
- 3.2 Monitoring and Maintaining the above actions

IV. CLEARANCE AIR SAMPLING

- 4.1. In-Process Air Sampling
- 4.2. Final Air Clearance

V. Exhibits

- 1. Annotated Floor Plans
- 2. Bulk Sample - Certificate of Analysis
- 3. Pre-Abatement Air Samples

Section I. Introduction

This abatement plan is for the removal of the plaster on the North Wall of a Vacant Duplex located at 515-517 Gaskill St., Woonsocket RI, is submitted for approval by the Rhode Island Department of Health as specified in Rules and Regulations for Asbestos Control (R23-24.5-ASB) dated January, 1986, Subpart C.1.2 and amended September 2012.

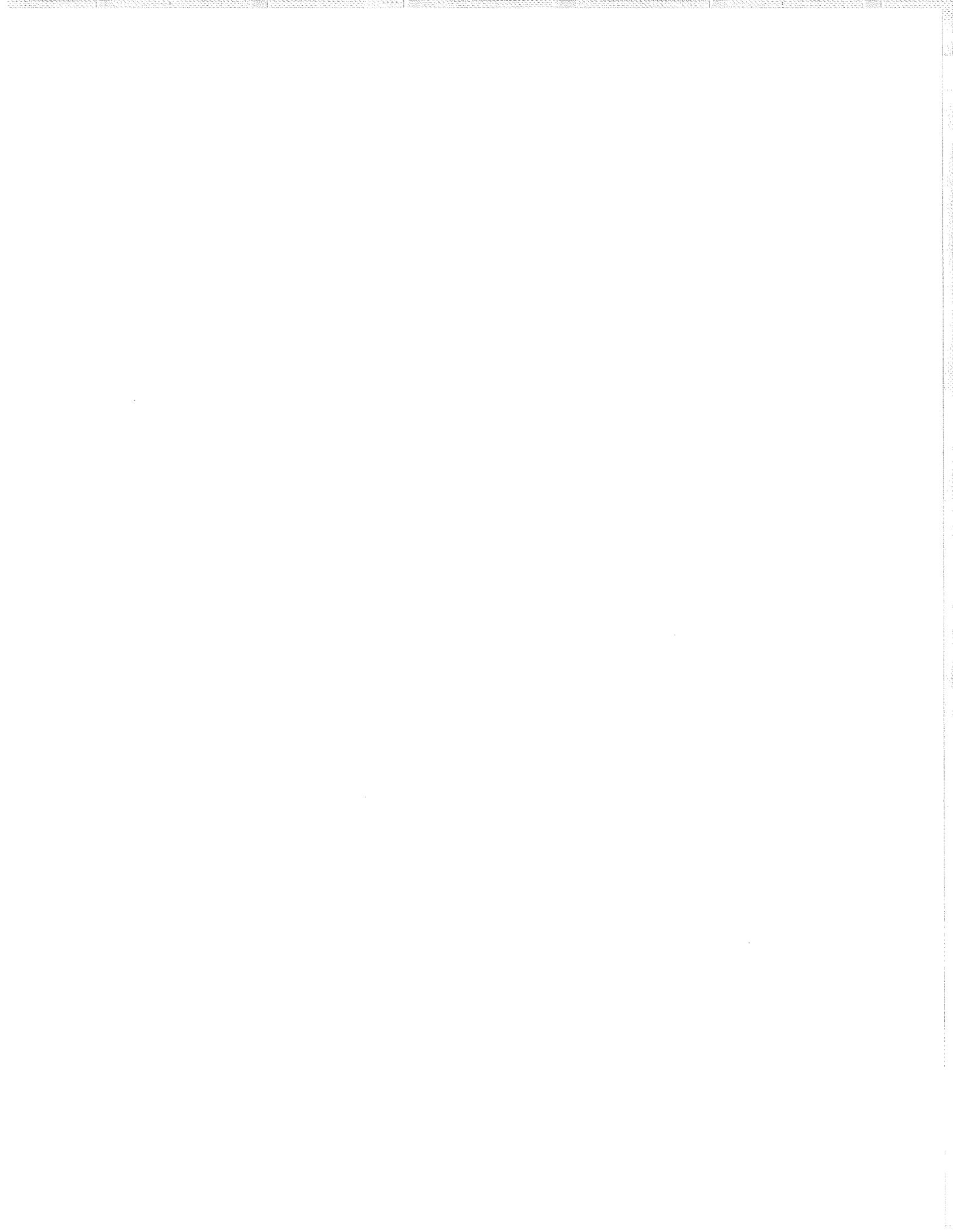
1.1 Project Description

This plan involves the Abatement of approximately seventy five square feet (75 sf) of ACM in form of wall plaster with a skim coat, from a vacant duplex located at 515-517 Gaskill St., Woonsocket. All asbestos abatement activity shall follow the RI Rules & Regulations for Asbestos Control (Sec. B.8.2, B.8.3 & B.8.6)

GENERAL NOTE

We believe that the quantities of materials described above to be approximately correct, however the contractor is responsible for the removal of all identified material type regardless of stated quantities.

All abatement work will be performed by a State of Rhode Island licensed asbestos abatement contractor.



**RHODE ISLAND DEPARTMENT OF HEALTH
NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN**

Facility: Vacant Duplex
Address: 515-517 Gaskill St.
City/Town: Woonsocket Zip: 02895 Amendment Phase No: _____
Abatement Plan Written By: M Frank Silva Certification No: AAC-085 PD
Summary of specific waivers/variances being requested: Final air samples

Type of Asbestos Abatement (X) Removal () Enclosure () Encapsulation
() Demolition () Glovebag () Asphalt Roofing
() Other (specify) _____

Is this plan being submitted in response to a Notice of Violation and/or a Notice of Requirement to Submit an Asbestos Abatement Plan? () Yes (X) No

If yes, Indicate Notice/Building Evaluation No(s): _____
Contractor: To be selected License No: LAC-
Estimated Starting Date: ASAP

Pre-Abatement Sampling Information

Bulk Samples Collected By: M. Frank Silva Certification No: AAC-085IS
Bulk Samples Analyzed By: ProScience Analytical Certification No: AAL-093
Air Samples Analyzed By: Silva Environmental Certification No: AAL-084A1

Clearance Air Sampling Information

Air Samples to be Collected By: Silva Environmental
Air Samples to be Analyzed By: Silva Environmental Certification No: AAL-84A1

CERTIFICATION

I certify that: this asbestos abatement plan is prepared and submitted under the provisions of Section 23-24.5-6 of the RI Asbestos Control Act and Parts A and C of the RI Rules and Regulations for Asbestos Control; all abatement/management activities performed in conjunction with this plan must be in compliance with the specifications prescribed in this plan (when approved) and the most current revision of all applicable federal and state regulations; and the asbestos abatement/management activities described in this plan must be performed by a RI licensed asbestos abatement contractor.

Certified by: [Signature] Title: Planning Director
(Signature of Building Owner or Agent)
Steven Lima Date: 8/29/19
(Typed/Printed Name of Certifier)

Subscribed and sworn before me this 29th day of August, 2019
[Signature] My Commission Expires: _____
(Notary Public)

AFFIX NOTARY SEAL HERE

FORM ASB-16B (11/2003) REPLACES FORM ASB-16B (3/92)

WHICH IS OBSOLETE
SUSAN DICOLELLA
Notary Public, State of Rhode Island
My Commission Expires June 28, 2021



Department of Health

Three Capitol Hill
Room 266
Providence, RI 02908-5097

401-222-5960
RI Relay 711
www.health.ri.gov

September 4, 2019

City of Woonsocket
Tom Koback
169 Main Street
Woonsocket, RI 02895

Plan Number: 83368

Dear Tom Koback :

This is in reference to the asbestos abatement plan which you submitted for: Vacant Duplex 515-517 Gaskill St Woonsocket, RI 02895.

It is our understanding that, since this is a demolition and pre-abatement air sampling has not been performed, the requirements of Paragraph B.4.4(a) and Part B.4.2 of the Rules and Regulations for Asbestos Control will be adhered to. Please note that references to OSHA 29 CFR 1926.58(FI) should be amended to read OSHA 29 CFR 1926.1101.

The above referenced asbestos abatement plan is hereby approved as conforming to Part C of the Rhode Island Rules and Regulations for Asbestos Control.

Please note that a licensed asbestos abatement contractor shall submit an ASB-22 start work notification at least 10 working days before any on-site work begins at a planned asbestos project. In addition, a licensed site supervisor shall notify this office by telephone when the licensed asbestos contractor begins site preparation.

A "Confirmation of Receipt of Asbestos for Disposal" must be forwarded to this office within five (5) working days of receipt.

The above referenced asbestos abatement plan is hereby approved as conforming to Part C of the Rhode Island Rules and Regulations for Asbestos Control.

If you have any further questions concerning the above referenced asbestos abatement plan, please contact Erin Ferreira, 222-7777.

Sincerely,

Bonnie Cassani-Brandt
Asbestos, Lead, and Radon Program Manager
Center for Healthy Homes and Environment

Cc: M Silva
[5LdemoASB22]

State of Rhode Island and Providence Plantations

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Office of Occupational & Radiological Health

APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN

1. Building Owner's Name: City of Woonsocket Owner Address and Phone number
169 Main Street
City/Town: Woonsocket
Zip: 02895
2. Application Prepared By: M Frank Silva Tele No.: (401) 639-2577
(Area Code, No., Ext.)
3. Person to be contacted regarding this application:
RI certification No: AAC-085 PD
Telephone No: (401) 732-3976 Name: Tom Koback
(Area code, No., Ext.) Telephone No: (401) 639-2577
(Area Code, No., Ext.)
4. Location where abatement work will be performed:
Name (if applicable): Vacant Duplex
Street: 515-517 Gaskill St
City/Town: Woonsocket, RI Zip: 02895
-
5. Is this application being submitted in response to a "Notice of Requirement to Submit an Asbestos Abatement plan"? Yes No
If Yes, what is the due date for submittal of Abatement plan? _____
(Mo.) (Day) (Yr.)
Evaluation Number on the Notice: _____
-
6. Contractor who will be performing abatement work (if selected):
Name: To be Selected R.I. License No.: LAC- _____

7. Estimated Starting Date of Abatement Work: ASAP
(Month) (Day) (Year)

8. Estimated Completion Date of Abatement Work: One week from the start date
(Month) (Day) (Year)

9. Type of Asbestos Abatement: (Check all that apply)
 Removal Enclosure
 Encapsulation Demolition
 Operations and Maintenance Only
 Other (Specify) _____

10. Type of Building: School
 Privately Owned Building
 Publicly Owned Building
 Residence
 Other (Specify) _____

11. Building Access: Public Access ($\geq 25\%$ of Building Area)
 Limited Public Access ($< 25\%$ of Building Area)
 No Public Access

12. Bulk Sample Collection and Analysis:
A). Person collecting bulk samples:
Name: M. Frank Silva RI Certification No.: AAC 085IS
B). Sampling Methodology:
 EPA AHERA Sampling requirements [40 CFR 763.86].
 EPA's Asbestos Containing Material in School Buildings: A Guidance Document (EPA-405/2-78-014) or Guidance for Controlling Asbestos Containing Materials - 1985 Edition (EPA-560-5-85-024)
 Other (Specify) _____
C). Laboratory performing the analysis of the bulk samples
Name: ProScience Analytical RI Certification No.: AAL- 093
D). Analytical Methodology:
 EPA Interim Method for the Determination of Asbestos in Bulk Insulation Samples [PLM method only].
 Other (Specify) _____

13. Pre-Abatement Air Sample Collection and Analysis:

A). Person collecting pre-abatement air samples:

Name: N/A Affiliation: _____

B). Laboratory performing analysis of pre-abatement air samples.

Name: N/A RI Certification No.: AAL-_____

C). Methodology used in the collection and analysis of pre-abatement samples:

NIOSH Method 7400 [Most Current Revision]

OSHA 29 CFR 1926.1101 – Appendix A & B

Other (Specify) _____

14. A. Indicate how the regulated asbestos containing material (RACM) will be removed from the abatement site. If a hauler or broker will be used to transport the RACM to a disposal site, they must also be identified.

The materials shall be containerized and transported to an authorized facility

B. Provide the name and location of the authorized asbestos waste facility to which the removed material will be transferred for disposal (if known).

Not known at the present time

15. Person designated as compliance monitor for abatement work.

Name: Silva Environmental

Affiliation: Silva Environmental

16. In-Process & Clearance Air Sampling:

- A. Describe on an attachment the type, number and location of air samples that will be collected outside the work area during the abatement project.
- B. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fibers per cubic centimeter) is exceeded outside the work area during the abatement project.
- C. Describe on an attachment the type, number and location of air samples that will be collected as part of the final clearance testing.
- D. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fiber per cubic centimeter) is exceeded during final clearance testing.

See Section IV

-
17. A separate and fully completed Form ASB-16A must be submitted for each area to be abated. List below the entry in Item 1 from each attached ASB-16A.

North Wall (see Exhibit I)

-
18. I certify that this plan was prepared by me and I am responsible for its content.

Signature: _____ Date 08/12/2019
(Month) (Day) (Year)

Affiliation: Silva Environmental

19. ASBESTOS ABATEMENT PLAN APPLICATION FEE:

- | | |
|---|--------|
| <input type="checkbox"/> Operation & Maintenance Only | \$ 75 |
| <input checked="" type="checkbox"/> Up to One (1) NESHAP Unit | \$ 75 |
| <input type="checkbox"/> Between One (1) & Ten (10) NESHAP Units | \$ 300 |
| <input type="checkbox"/> Between Ten (10) & Fifty (50) NESHAP Units | \$ 600 |
| <input type="checkbox"/> Over Fifty (50) NESHAP Units | \$ 900 |

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Office of Occupational & Radiological Health

APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN

SUPPLEMENTAL INFORMATION: AREA DESCRIPTION AND PROPOSED REMEDY

BUILDING LOCATION: 515-517 Gaskill St. Woonsocket

INSTRUCTIONS: All items on this form must be addressed. All references to attachments must be clearly identified. All attachments must be marked with the specific item numbers on this form to which they pertain.

- (1) Area Location/Identification (Room Name/No., Evaluation Number, etc.):

North wall

- (2) Attach a description of each type (e.g. pipe, ceiling, etc.) of regulated asbestos containing material (RACM) in this area, including condition, location, quantity and asbestos content. Attach a copy of the laboratory report(s) for all samples. (NOTE: All laboratory reports must include the name of the building(s) and the location(s) of the sample(s).)

See Exhibit II

- (3) Attach a current scale drawing of this area, showing direction of North and East, which has been clearly annotated to show the type, location and quantity of all RACM in this area. This drawing must include a legend which acts as a guide to the scale, symbols and nomenclature used in the drawing. If a master plan or multiple drawings are provided, indicate the specific location(s) and drawing number(s) which depict this area. The location of the decontamination chamber must also be so indicated on the appropriate drawing(s).

See Exhibit I

(4) PROPOSED REMEDIES:

- A). Attach a description of the interim Operations and Maintenance Plan that will be implemented in accordance with C.1.2 (b).

See Section III

FORM ASB-16A (11/2003)

REPLACES FORM ASB-16 (03/92)

WHICH IS OBSOLETE

(4) PROPOSED REMEDIES (cont.):

B). Will any portion of this area be abated by use of B.8 work procedures?
 Yes No

If Yes, indicate below which RACM in this area will be abated by use of the following B.8 work procedures:

B.8.2 & B.8.3	[REMOVAL]	<u>Wall Plaster/with Skim Coat</u>
B.8.2 & B.8.4	[ENCAPSULATION]	_____
B.8.2 & B.8.5	[ENCLOSURE]	_____
B.8.6	[DEMOLITION]	<u>Wall Plaster/with Skim Coat</u>
B.8.7	[GLOVEBAG]	_____
B.8.8	[ASPHALT ROOFING]	_____

C). Are you requesting any waivers to the above selected B.8 procedure for any of the abatement activities in this area?

Yes No

If yes, attach a detailed description of the waivers requested you are proposing to utilize. All items must be keyed to the specific section(s) of the regulations for which waivers are requested. **See Section II**

During removal and Final air samples

D). Are you proposing alternative procedures under B.11 for any of the abatement activities in this area?

Yes No

If yes, attach a detailed description of the alternate procedures requested you are proposing to utilize. Alternate procedures must include a justification for not following specific section(s) of the regulations and be as protective of public health.

E). Will any RACM remain in this area after abatement?

Yes No Beyond scope of inspection

If Yes, attach a description of the RACM that will remain and the details of the on-going Operations and Maintenance Plan that will be implemented in accordance with C.1.2(b).

AGENCY USE ONLY

Section II Plan of Action

2.1 Barriers and Maintenance

All polyethylene barriers inside the work area, in the worker decontamination enclosure system and at critical barriers (i.e. barrier tape) installed to demarcate the work area shall be inspected continuously while asbestos removal work is in progress.

Any damage and/or defects in the barrier system shall be repaired immediately upon discovery.

At any time during the abatement activities, after barriers have been erected if visible material is observed outside of the work area or if damage occurs to barriers, work shall immediately stop. Repairs will be made to the barriers and debris and/or residue shall be cleaned up using appropriate HEPA vacuuming and wet mopping procedures or other appropriate methods as determined by the project I.H.

2.2 Description of ACBM

This plan involves the Abatement of approximately seventy five square feet (75 sf) of ACBM in form of **wall plaster with a skim coat**, from a vacant duplex located at 515-517 Gaskill St., Woonsocket. All asbestos abatement activity shall follow the RI Rules & Regulations for Asbestos Control (Sec. B.8.2, B.8.3 & B.8.6)

We are requesting a waiver for any other air sampling during removal as well as final air samples.

Section III Interim Operations and Maintenance Plan

- 1) The Building owner is aware of the presence and locations of the ACM on this building. The building is presently vacant and locked. The building owner will continue to deny access through these methods until asbestos abatement activities begin. Immediately following abatement the structure will be razed.

- 2) The Manager for the project has been supplied with a listing of the location and category of all identified ACBM for this project, as well as sample results for suspect materials that have been identified as non-asbestos containing.

Section IV Air Sampling

4. 1. During the Asbestos abatement activities the Abatement workers exposure will be sampled per the required OSHA personal air sampling protocol. **We are requesting a waiver for any other air sampling during removal.**

Final Air Clearance

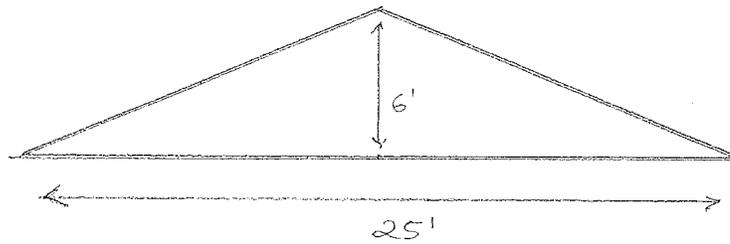
- 4.2 **We are requesting a waiver of the requirement to collect clearance (final) air sampling.** In lieu of collection of clearance air samples the asbestos abatement workers personal air samples will be used. The building is vacant and no occupancy is planned following the removal of the asbestos containing materials. The building will be released to the demolition contractor immediately upon the total removal of the asbestos materials.

Note: IF any re-occupancy of the structure is required prior to demolition, the Industrial Hygienist for the project will be notified and will perform final air sampling per N.I.O.S.H. 7400 methods. The results must be at or below the RI DOH NOEL of 0.01 f/cc. Should any of the final samples indicate a higher value, the Contractor shall take appropriate actions, including re-cleaning the work area, prior to collection of the next set of clearance air samples. Re-occupancy will be allowed only after the area has reached the NOEL clearance level of 0.01 f/cc.

EXHIBIT I
ANNOTATED FLOOR PLANS

DUPLEX 515-517 GASKILL ST.
(WOOD SOCKET)

0
OP



WALL IN SECOND LEVEL

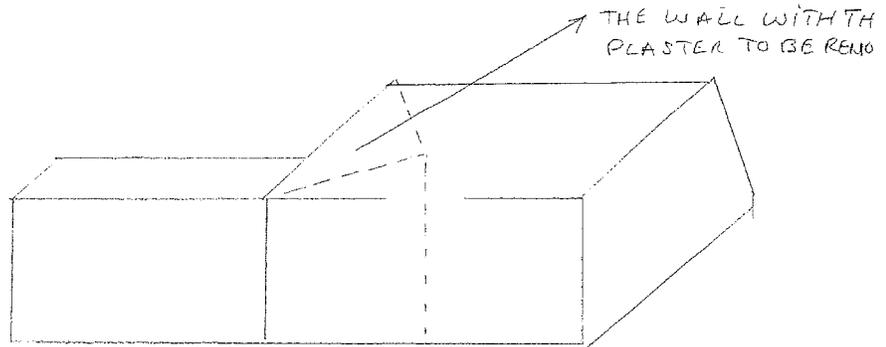


EXHIBIT II
BULK SAMPLES
CERTIFICATE OF ANALYSIS



ProScience Analytical Services, Inc

M. Frank Silva
Silva Environmental & Associates, Inc.
45 Transit St.
Warwick, RI 02889

July 19, 2019

Dear M. Frank Silva,

The enclosed analytical results have been obtained by using EPA 600/R-93/116 or EPA 600/M4-82-020. Calibrated Visual Estimate (CVE) is used by ProScience for the determination of the percentage of asbestos and other components in the sample. Point Counting is recommended when the sample contains less than 10% asbestos by CVE. Friable materials found to be less than 1% by CVE are automatically point counted (400 points) at no additional charge. ProScience recommends further analysis by a gravimetric method for non-friable materials that are less than 1% by CVE.

The Quality Control data related to the samples analyzed is available upon client's written request. ProScience Analytical Services Inc., assumes no responsibility for potential sample contamination that may have occurred during the sample collection process or erroneous data provided by the client. Unless otherwise indicated, all samples were received in acceptable condition.

The enclosed results may not be used under any circumstances as product endorsement by any US government agency including NIST/NVLAP.

All Laboratory records are retained for at least three years unless otherwise directed in writing by the client. The actual samples are retained for a period of two months and written request is necessary in order to be retained for a longer period of time. All analytical results and records are considered strictly confidential and will not be released under any circumstances to anyone except the actual client. The analytical results included in this report apply only to the items tested. This report may not be reproduced except in its entirety, without the permission of ProScience Analytical Services, Inc., Laboratory Director.

If you have any questions please contact the Laboratory Manager or the Laboratory Director.

Sincerely,

Sophetra Ken, Optical Asbestos Manager
Aimee Cormier, Laboratory Director

Enclosure: Version 2
LAB BATCH ID: B 116856 CLIENT PROJECT ID: 57340
Client Ref: City of Woonsocket, 515-517 Gaskill St., Woonsocket, RI
CT ID# PH-0209; MA ID# AA000156; ME ID# LB-055; NVLAP Lab Code 200090-0; RI ID # AAL-093;
VT ID# AL016876

ProScience Analytical Services, Inc.

Client Name: Silva Environmental & Associates, Inc.
 PO #: N/A
 Client Project #: 57340
 Client Reference: City of Woonsocket, 515-517 Gaskill St., Woonsocket, RI
 Method: EPA/800/R-93/116

Batch: B116856
 Date Sampled: 7/15/2019
 Date Received: 7/18/2019
 Date Analyzed: 7/19/2019
 Date of Report: 7/19/2019

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
GK-001	White	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Ceiling Plaster														
Location: Ceiling														
Comments:		Is asbestos present? No. Analyzed: Yes												

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
GK-002	Brown	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Ceiling Tile Mastic														
Location: Ceiling														
Comments:		Is asbestos present? No. Analyzed: Yes												

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
GK-003	White	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Window Glazing														
Location: N/A														
Comments:		Is asbestos present? No. Analyzed: Yes												

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
GK-004	Multi	0	0	0	0	0	0	0	0	0	0	0	0	100
Description: Exterior Walls (Stucco)														
Location: N/A														
Comments:		Is asbestos present? No. Analyzed: Yes												

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
GK-005	Brown	0	0	0	0	0	0	15	0	0	0	0	0	85
Description: Roof Shingles														
Location: N/A														
Comments:		Is asbestos present? No. Analyzed: Yes												

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
GK-006	White	2	0	0	0	0	0	0	0	0	0	0	0	98
Description: Wall Plaster Skim Coat 2nd Level														
Location: Wall														
Comments:		Is asbestos present? Yes. Analyzed: Yes												

ProScience Analytical Services, Inc.

Client Name: Silva Environmental & Associates, Inc.
 PO #: N/A
 Client Project #: 57340
 Client Reference: City of Woonsocket, 515-517 Gaskill St., Woonsocket, RI
 Method: EPA/600/R-93/116

Batch: B116856
 Date Sampled: 7/15/2019
 Date Received: 7/18/2019
 Date Analyzed: 7/19/2019
 Date of Report: 7/19/2019

Sample ID	Color	Asbestos %						Non-Asbestos %						
		CHR	AMO	CRO	ACT	TRE	ANT	FBG	MNW	CEL	HAR	SYN	OTH	NON
GK-008.1	Mult	0	0	0	0	0	0	2	0	13	0	0	0	85
Description: Drywall assoc. w/06 Location: Wall Comments: Is asbestos present? No. Analyzed: Yes														

Asbestos Codes: CHR = Chrysotile AMO = Amosite CRO = Crocidolite ACT = Actinolite TRE = Tremolite ANT = Anthophyllite
 Non-Asbestos Codes: FBG = Fiberglass MNW = Mineral Wool CEL = Cellulose HAR = Hair SYN = Synthetic OTH = Other NON = Non-Fibrous Minerals

Note: To create a unique lab sample ID, use the Batch # and the Sample ID. Example: [Batch #]-[Sample ID].

* All results are in percentage.

Analyst: Sophetra Ken

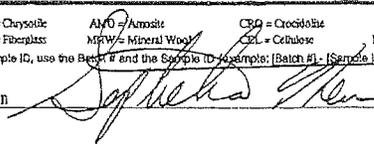


EXHIBIT III
PRE-ABATEMENT AIR SAMPLES
CERTIFICATE OF ANALYSIS

Note: We are requesting a waiver for this item; vacant dwellings.

CITY OF WOONSOCKET

RHODE ISLAND

FINANCE DEPARTMENT

BID PROPOSAL

80 River Street
113 River Street
515-517 Gaskill Street

The undersigned bidder shall hold their bid prices for a period of (60) sixty days from the bid opening date.

ALTERNATE #1

DESCRIPTION

Combined Cost for the complete demolition of the three above referenced properties if awarded as one contract.

Miscellaneous materials, as approved cost plus 10%

Police detail, as approved cost plus 10%

TOTAL PRICE: \$ _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

BY (person): _____

SIGNATURE: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

E-MAIL ADDRESS: _____

CITY OF WOONSOCKET
RHODE ISLAND
FINANCE DEPARTMENT

BID PROPOSAL

80 River Street
113 River Street

The undersigned bidder shall hold their bid prices for a period of (60) sixty days from the bid opening date.

ALTERNATE #2

DESCRIPTION

Combined Cost for the complete demolition of the two above referenced properties if awarded as one contract.

Miscellaneous materials, as approved	cost plus 10%
Police detail, as approved	cost plus 10%
TOTAL PRICE:	\$ _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

BY (person): _____

SIGNATURE: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

E-MAIL ADDRESS: _____

INSURANCE REQUIREMENTS

General Condition s Reference	Item	Minimum Limits
	Worker's Compensation and Employer's Liability Insurance	As required by law in the State of Rhode Island Employer's Liability Limits: \$100,000 Each Accident \$500,000 Disease - Policy Limit
	General Liability, including Contractor's Protective, Products and Completed Operations and Contractual Liability	\$2,000,000 General Aggregate \$2,000,000 Products and Completed Operations - Aggregate \$1,000,000 Personal Injury \$1,000,000 Each Occurrence Limit \$50,000 Fire Damage Limit \$5,000 Medical Payments
	(C.U.* Collapse and Underground coverage to be included. Blasting and explosion coverage required, if there will be blasting under the contract.)	
	Automobile Liability	\$1,000,000 Combined Single Limit for Bodily Injury and Property Damage
	Owner's Protective Liability	\$1,000,000 Each Occurrence \$2,000,000 Aggregate, Bodily Injury and Property Damage
	Builder's Risk and Installation Floater Coverage	Limit equal to the total insurable Value of all Materials and Equipment to be built and / or Installed.

Carrier Requirements

All carriers used must have a Financial Performance Rating from A.M. Best Company of at least "A".

Bid Bonds, supply bonds, and performance bonds will be required as necessary.

Noncollusion Affidavit of Prime Bidder

State of: Rhode Island)
County of: Providence)

I, _____ being first duly sworn, depose and say that:

1. / He is the _____ of _____ the Contractor that has submitted the attached bid proposal.

2. / He is fully informed respecting the preparation and contents of the attached bid and of all pertinent circumstances respecting such bid.

3. / Such bid is genuine and is not a collusive or sham bid.

4. / Neither said bidder nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other bidder, firm or person to submit a collusive or sham bid in connection with the contract for which the attached bid has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement, or collusion or communication or conference with any other bidder, firm, or person to fix the price or prices in the attached bid or of any other bidder, or, to fix any overhead, profit, or cost element of the bid price or the bid price of any other bidder, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against the City of Woonsocket, Rhode Island, or any person interested in the proposed contract; and;

5. / The price or prices quoted in the bidder's proposal is/are fair and proper and are not tainted by any collusion, conspiracy, or unlawful agreement on the part of the Bidder or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

{Signed} _____

{Title} _____

Subscribed and sworn to before me

This _____ day of _____ 2018

Notary Public

My Commission Expires _____

STATEMENT OF BIDDER'S QUALIFICATIONS

All questions must be answered and the data given must be clear and comprehensive. If necessary, questions may be answered on separate attached sheets. The Bidder may submit any additional information he desires.

1. / Name of Bidder _____
2. / Permanent main office address {including City, State & Zip Code}: _____

3. / When organized _____
4. / If a corporation, where incorporated _____
5. / How many years have you been engaged in construction under your present firm or trade name?

6. / Contracts on hand: {Schedule this showing gross amount of each contract and the appropriate anticipated dates of completion.} _____
7. / General character of work performed by your company: _____
8. / Have you ever failed to complete any work awarded to you? If so, where and why?

9. / Have you ever been accused of defaulting on a contract? If so, where and why?

10. / List the more important contracts recently completed by you, starting with approximate gross cost for each, and the month and year completed: _____

11. / List your major equipment *available for this contract*: _____

12. / Experience in construction work similar in importance to this project: _____

13. / Background and experience of the principal means and all employees of your organization including the officers. List each separately.
14. / Credit available: _____
15. / Give bank references: _____
16. / Will you, upon request, fill out a detailed financial statement and furnish any other information that may be required by the City of Woonsocket?
17. / Has any principal(s) in your firm ever been arrested and/or convicted for violations other than traffic violations? If so, when and for what reason?
18. / Attach at least three letters of personal recommendation from recent clients.

19. / (a) Have you ever been a party to or otherwise involved in any action or legal proceeding involving matters related to race, color, nationality or religion? If so, give full details.
- (b) Have you ever been accused of discrimination based upon race, color, nationality, or religion in any action or legal proceeding, including any proceeding related to any Federal agency? If so, give full details.
20. / The undersigned hereby authorizes and requests any person, firm or corporation to furnish any information requested by the City of Woonsocket in verification of the recitals comprising this Statement of Bidder's Qualifications.
21. / Failure to complete this form factually shall be basis for rejecting this bid.