		Case #: 24-2	204
Southwest Clean Air Agency Notice of	f Intent to Remove Asbesto	S Amendment: 0	
11815 NE 99th Street, Suite 1294 Vancouver, WA 98662		Date Received: 4,	/2/2024
Voice: 360-574-3058 Fax: 360-576-0925		Date Paid: 4	/2/2024
Web: https://www.swcleanair.gov Email: Tina@swcleanair.gov		SWCAA Fee: \$	369.00
This notification MUST be present at all ti	mes at the asbestos project sit	Receipt #: 153	742553
Quantity to be removed: 236 Square Feet	0 Linear Feet W	orkshift days: F	
Project starting date: 4/12/2024 Project	Completion date: 4/12/2024 Wo	rkshift hours: 8:00am-4:30	)pm
Site Name: Liperi Residence	Site address: 15013 NE 5th	St	
Site Name: Liperi Residence Location of Asbestos: Kitchen	Site address: 15013 NE 5th City/State/Zip: Vancouver	St WA 98684	
	City/State/Zip: Vancouver		
Location of Asbestos: Kitchen	City/State/Zip: Vancouver	WA 98684	
Location of Asbestos: Kitchen	City/State/Zip: Vancouver ition required) County: C	WA 98684	
Location of Asbestos: Kitchen  Demolition of Structure (Notification of Demol  Asbestos survey conducted? N  AHERA Inspector: Occupant Owner	City/State/Zip: Vancouver ition required) County: C lo survey reason:	WA 98684	
Location of Asbestos: Kitchen  Demolition of Structure (Notification of Demol  Asbestos survey conducted? N AHERA Inspector: Occupant Owner  Material to be Removed:	City/State/Zip: Vancouver ition required) County: C lo survey reason: Certifica	WA 98684	
Location of Asbestos: Kitchen  Demolition of Structure (Notification of Demol  Asbestos survey conducted? N AHERA Inspector: Occupant Owner  Material to be Removed: Fireproofing Popcorn Ceiling CAB	City/State/Zip: Vancouver ition required) County: C lo survey reason: Certifica	WA 98684	
Location of Asbestos: Kitchen  Demolition of Structure (Notification of Demol  Asbestos survey conducted? N AHERA Inspector: Occupant Owner  Material to be Removed: Fireproofing Popcorn Ceiling CAB	City/State/Zip: Vancouver ition required) County: C lo survey reason: Certifica	WA 98684	
Location of Asbestos: Kitchen  Demolition of Structure (Notification of Demol Asbestos survey conducted? N AHERA Inspector: Occupant Owner  Material to be Removed: Fireproofing Popcorn Ceiling CAB Duct Paper Mag Pipe Insulation Other Texture	City/State/Zip: Vancouver ition required) County: C lo survey reason: Certifica	WA 98684	
Location of Asbestos: Kitchen  Demolition of Structure (Notification of Demol Asbestos survey conducted? N AHERA Inspector: Occupant Owner  Material to be Removed: Fireproofing Popcorn Ceiling CAB Duct Paper Mag Pipe Insulation  Other Texture Control Methods:	City/State/Zip: Vancouver ition required) County: C lo survey reason: Certifica	WA 98684	e

Asbestos Contractor:	Minority Abatement	tractors, Inc. Pł	hone:	360-750-1900	
Mailing Address: 3200 NE 65th St, Vancouver, WA, 98663		Email:	vwhitebird@minorityac.com		
Certification ##:	ABCN00001346				
Supervisor:	Jesus Ortiz	Phone:	360-6	505-7958	
Property Owner: Nicl	k Lipari	Phone:	971-5	501-0185	
Mailing Address:	15013 NE 5th St,Vanc	ver WA 98684			
Asbestos Disposal Site	: Wasco County Lan	: 2550 Steele Rd, The Dalles, OR, 970	058-		

## I DO HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS NOTIFICATION IS, TO THE BEST OF MY KNOWLEDGE, ACCURATE AND COMPLETE.

Submitter Name:	Guillermo PLaza	Representing:	Minority Abatement Contract
Submitter Title:	Project Manager	Date Submitted:	4/2/2024

Reviewed by SWCAA: Brian Fallon



## Notice of Intent to Remove Asbestos

Case #: 24-204 Amendment: 0

11815 NE 99th Street, Suite 1294 Vancouver, WA 98662	Date Received:	4/2/2024
Voice: 360-574-3058 Fax: 360-576-0925 Web: https://www.swcleanair.gov	Date Paid:	4/2/2024
Email: Tina@swcleanair.gov	SWCAA Fee:	\$369.00
This notification MUST be present at all times at the asbestos project sit	Receipt #:	153742553

## Atlas Labs

Batch # 2022 *	Name / Company *
22-1240301	Gold Ribbon
Analysis Date *	Project Name
03/18/2024	Lipari
Project #	PO #
Analyst *	Project Location *
Crossland Kapaun	15013 NE 5th St., Vancouver, WA 98684

Turnaround Time \*

Rush

## Asbestos Analysis of Bulk Material by Polarized Light Microscopy

Sample*	Layer*	Description*	Non Asbestos*	Asbestos Type*	Asbestos %*
1	1	Drywall (White) - Kt Wall	Cellulose / Fiberglass	None Present	N/D
1	2	Texture (White) - Kt Wall	Cellulose	Chrysotile	3%
2	1	Drywall (White) - Kt Ceiling	Cellulose / Fiberglass	None Present	N/D
2	2	Texture (White) - Kt Ceiling	Cellulose	Chrysotile	3%

**To Be Filled by the Technician** Technician \*

rk