

Notification of Demolition

Case #: 24-208

11815 NE 99th Street, Suite 1294

Vancouver, WA 98662 Voice: 360-574-3058 Fax: 360-576-0925

Web: https://www.swcleanair.gov Email: Tina@swcleanair.gov Date Received: 4/1/2024

Date Paid: 4/1/2024

SWCAA Fee: \$74.00

Receipt #: 153703411

Amendment: 0

10 day waiting period from date submitted

Type of Notification: Original
 Type of Operation: Demolition
 Facility Description: Kalama wa

Commercial Name or Description: Residential garage

Address: 1038 Cloverdale Rd

City/State/Zip/County: Kalama, WA 98625 COWLITZ COUNTY

Present Use: Miscellaneous Previous Use: Miscellaneous

4. Facility Information

Property Owner:

Property Owner: John Davis

Mailing Address: 1038 Cloverdale Rd, Kalama WA 98625

5. Name and AHERA Certification Number of Asbestos Inspector:

Name: Danielle Kreps Certification #: IRO-23-0301C

6. Asbestos Removal Contractor (if applicable):

Name: No asbestos

7. Dates Asbestos Removal Occurred:

Start: Complete: Asbestos Case No.: -

8. Dates Demolition Will Occur:

Start: 4/11/2024 Complete: 4/12/2024

9. Demolition Contractor:

Name: Nelson & Son Contracting LLC

Mailing Address: Ridgefield, WA, 98642

Phone: 360-921-9446

10. Asbestos Disposal Site: N/A

_	will be hand demo'd so that old Longview waste management.	d lumber can be salvaged. Roofing materials will be hand removed and					
12. Fugitive Emssi	ons/dust from Demolition Acti	ivites MUST BE Controlled/Prevented during all phases of the project					
Hand removal of materials will keep from any air born dust or particles							
•	Asbestos containing Material (rtified Asbestos Abatement Co	(ACM) is found during demolition, Stop Work, Notify SWCAA and intractor					
No asbestos fo	und from testing						
L4. If demolition i	s ordered by a Government Ag	ent:					
L5. For Emergency	y Demolitions (Contact SWCAA	prior to work): Emergency Demolition					
Date and Time	of Emergency:						
Description of	Sudden, Unexpected Event:						
Explanation o burden:	f how the event caused unsafe	conditions or would cause equipment damage or an unreasonable					
•	he above information is correct						
Submitter Name: Submitter Title:	•	Representing: John Davis					
	NSC Owner	Date Submitted: 4/1/2024					
Email Address:	Ryann@nscllc.co						

11. Description of planned demolition work, method(s) to be used:

Reviewed by SWCAA: Brian Fallon

The Washington State Dangerous Waste Regulations (WAC 173-303) require that demolition debris be evaluated to determine if it is dangerous. The evaluation should be completed before demolition to ensure that hazardous constituents are not released to the environment and do not present a risk to human health during or after demolition. These requirements apply to all buildings being demolished and are the responsibility of the property owner. The Washington Department of Ecology's website, https://ecology.was.gov/Regulations-Permits/Guidance-technical-assistance/Dangerous-waste-guidance/Common-dangerous-waste/Construction-and-demolition, provides more information about the requirements and about sampling and testing construction materials to detemine if they present a risk. For more information please contact a Hazardous Waste Inspector at the Washington Department of Ecology Southwest Regional Office: (360) 407-6300.

✓ Approved

NOTIFICATION OF DEMOLITION

Southwest Clean Air Agency

11815 NE 99th Street, Suite 1294 Vancouver, WA 98682 Voice: (360) 574-3058 Fax: (360) 576-0925 Submit to <u>Tina@swcleanair.gov</u>

(10 day waiting period from date submitted) (Form must be filled out completely)

(10 day waiting p	erioù iroili date sub	mitted) (Form must be filled					
Notification #	Must include f		Date Received				
	Notification Fee						
	Emergency Fee:	\$148.00					
1. TYPE OF NOTIFICATION ♥ Original □ Revised							
2. TYPE OF OPERATION □ Partial Demolition ☑ Cor	nplete Demolition Ord	dered Demolition					
☐ Emergency Demolition ☐ Fire Training			SWCAA Reviewed				
3. FACILITY DESCRIPTION (Example: Residence, I	Barn, Carport)	tached Garage					
Commercial Name or Description: John D	Davis Resid						
Address: 1038 closer dala 20							
City: Kalatka		State: WA		County:			
Present use: Vacast		Prior use:					
4. FACILITY INFORMATION							
Owner Name: John Davis		Mailing Address:					
City: Kalana	State: WA			Zip Code: 9867 5 Phone: 916-216-1287			
Contact: Ryan Lelson 360	0-921-9446	John Davis	, 1	Phone: 916-216-1297			
5. NAME AND AHERA CERTIFICATION NUMBER C	F ASBESTOS INSPEC	TOR: Danielle					
6. ATTACH A COPY OF THE ASBESTOS INSPECTI Report must include laboratory name, analyst, sample materials.							
7. ASBESTOS REMOVAL CONTRACTOR (IF APPL	ICABLE): □ No asbest	os present, see attached AHER	A Report				
Name: \mathcal{N}/\mathcal{A}		Address:					
City:	State:			Zip Code:			
Contact:				Phone:			
8. DATES ASBESTOS REMOVAL OCCURRED (mm/dd/yy) Start: Complete: Asbestos Case Number:							
9. DATES DEMOLITION WILL OCCUR (mr	m/dd/yy) Start:	Complete:					
10. DEMOLITION CONTRACTOR or FIRE DEPART	MENT:						
Name: Nelson & Son Contro	ding LLC						
Address: 17219 NC YawlT MT 2D							
City: YacolT	State: ω A			County:			
SWCAA FORM NO.23 REVISED 01/01/2024	Section 1985						

Contact and Phone#							
11. DESCRIPTION OF PLANNED DEMOLITION WORK, METHOD(S) TO BE USED:							
Structure will Be hard Disposenbled to Salvage old wood							
12. FUGITIVE EMISSIONS/DUST FROM DEMOLITION ACTIVITIES MUST BE CONTROLLED/PREVENTED DURING ALL PHASES OF THE PROJECT.							
Air born dusts will be controlle	l by slowly hard disassinating						
13. IF UNEXPECTED ASBESTOS CONTAINING MATERIAL (ACM) IS FOUND DURING DEMOLITION, STOP WORK, NOTIFY SWCAA AND CONSULT/HIRE A CERTIFIED ASBESTOS ABATEMENT CONTRACTOR.							
14. IF DEMOLITION IS ORDERED BY A GOVERNMENT AGENCY, PLEASE	IDENTIFY THE AGENCY BELOW:						
Name:	Title:						
Agency:							
Date of Order (mm/dd/yy): Date Ordered to Begin (mm/dd/yy):							
15. FOR EMERGENCY DEMOLITIONS: (Contact SWCAA prior to work)							
Date and Hour of Emergency (mm/dd/yy) (hh/mm):							
Description of the Sudden, Unexpected Event:							
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE BURDEN: (ATTACH ADDITIONAL PAGE IF NECESSARY)							
16. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.							
Pyan Ne(Son (Son (Son (Son (Son (Son (Son (Son	Signature of Owner/Operator) (Date)						

HAVE YOU PERFORMED A HAZARDOUS MATERIALS ASSESSMENT ON THE STRUCTURE? ☐ YES ☐ NO

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Clean your world.

9317 NE Hwy 99, Suite D, Vancouver, WA 98665 | 360-356-7628 Polarized Light Microscopy Results

Lab No	143800	Property Address	1038 Cloverdale Rd
Layers Analyzed	3	City, State, Zip	Kalama, WA
		Job Number	Garage
Date Received	3/27/2024	Client Name	John Davis
Received By	Talia Carroll	Client Address	
Date Analyzed	3/27/2024	City, State, Zip	
Analyzed By	Nathan Blondino	Phone & E-mail	(916) 216-1297

AEI Sample ID	Client Sample ID	Composition Color/ Description Asbestos (%)		Non-Asbestos Fiber (%)	Non Fibrous	
001	1	Layered	Black Roofing	Asbestos Not Present	25% Glass Fibers	Sand-Tar
001A		Layered	Black Felt Paper	Asbestos Not Present	60% Cellulose	Tar
002	2	Homogeneous	Brown Vapor Barrier	Asbestos Not Present	99% Cellulose	Debris

Disclaimer

- EPA Method 600/M4-82-020 (1982) was used to determine the presence or absence of asbestos fibers in all materials referenced in the above report. PLM analysis is based on visual estimation, and due to limitations of PLM analysis NESHAP regulations recommend that any material determined to contain less than 10% asbestos by the above referenced method should either be assumed to contain greater than 1% asbestos by the owner/operator, or be verified by PLM Point Count or TEM analysis as containing less than 1% asbestos.
- We recommend that TEM analysis be conducted for confirmation of negative PLM analytical results of vinyl floor tiles and vermiculite. These materials may contain asbestos fibers that cannot be detected by PLM analysis due to their size (<0.25 microns in diameter)
- This report may not be used to represent any materials not analyzed and listed in the included report. Advantage Environmental Inc. cannot be held responsible for the interpretation of the results shown. This report may not be reproduced in part and may only be reproduced in full without prior written consent from Advantage Environmental Inc.



ASBESTOS CHAIN OF CUSTODY

9317 NE Hwy 99. Suite D • (360) 356-7628
LEGAL DOCUMENT - PLEASE PRINT LEGIBLY

Lab Use Only						
Survey [Lab No. 143800					
Walk-In 🙎	Accept Reject					

_									vvalk-III Z	ALLEGI	Reject
Sampled By - Please fill out yellow highlighted areas					Project Information - Please fill out yellow highlighted areas						
Date: 3/27/2024				Project Name: GATAGE							
Com	pany Name	OR Name: Jan	in Dr	ours		Address where	material was pulled	from): 1038 Clov.	exdale Ros	d	
Phor	ne: 9/Ke	216 129	7			City, State, Zi	p: k	from): 1038 Clou.	9BUZY		
Emai	il: buc	1StERRIUG	Stahe	D. Com		P.O. #:		,			
	RELIN	NQUISHED BY		DATE & TIME		VIA RECEIVED E				DATE & T	IME
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Sign				Time						9:23	
			4		R	EQUESTED SER	VICES				
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		Bulk Analys	sis			Verbal			n 🛛 Same Day 🗌 24-Hour 🗌 3-Da		
No.	Sample ID	Color	Color Description				Volume / A (as applicat	Comments / Notes			
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2		,			1						
3	2	Tan	Va	por Barcier							
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March 28, 2024

John Davis 1038 Cloverdale Road Kalama, WA 98625

Re: Demolition of Detached Garage

Mr. Davis:

Based on the information and photos provided by Nelson & Son Contracting of the **detached** garage at 1038 Cloverdale Road Ave in Kalama, Washington, I find no evidence of asbestos containing materials that would require further action prior to the demolition / deconstruction of this structure (residential and other buildings excluded).

These conclusions are based on the information Nelson & Son Contracting provided and the attached pictures sent to me. SWCAA is not responsible for any asbestos-containing material that might be behind walls, under floors, underground or in any area not depicted in the referenced photographs. If suspect asbestos containing material is discovered during demolition, the project must stop and an AHERA certified building inspector should be consulted. An AHERA inspection must also be performed prior to the demolition of any residential structure or other building not depicted in the attached photos.

A Notification of Demolition for the detached garage is <u>required</u> to be submitted to SWCAA prior commencement of demolition activity. A copy of this letter must be kept onsite during the demolition.

If you have any questions regarding this matter, please call me at 360-574-3058 x115.

Sincerely,

Danielle Kreps

Air Quality Specialist

Parlle Kps

AHERA Certification No. IN-22-0301C

Photographs of 1038 Cloverdale Road, Kalama, WA 98625 Detached Garage Only (Residence/Other Buildings Excluded)













Photographs of 1038 Cloverdale Road, Kalama, WA 98625 Detached Garage Only (Residence/Other Buildings Excluded)



