



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

## Notice of Intent to Remove Asbestos

Case #: 24-251

Amendment: 0

Date Received: 4/18/2024

Date Paid: 4/18/2024

SWCAA Fee: \$369.00

Receipt #: 154760068

**This notification MUST be present at all times at the asbestos project sit**

Quantity to be removed: 3000 Square Feet 0 Linear Feet

Workshift days: M T W Th

Project starting date: 4/29/2024 Project Completion date: 5/2/2024

Workshift hours: 8-4

Site Name: W301\_MikeVelilla\_456PioneerAveN

Site address: 456 Pioneer Ave NE

Location of Asbestos: Flooring

City/State/Zip: Castle Rock

WA 98611

☐ Demolition of Structure (Notification of Demolition required)

County: COWLITZ COUNTY

☐ Asbestos survey conducted?

No survey reason: PACM

AHERA Inspector:

Certification #:

### Material to be Removed:

- |  |  |                                   |   |  |                                    |
|--|--|-----------------------------------|---|--|------------------------------------|
| <input type="checkbox"/> Fireproofing            | <input type="checkbox"/> Popcorn Ceiling     | <input type="checkbox"/> CAB      | <input checked="" type="checkbox"/> Sheet Vinyl | <input type="checkbox"/> Boiler Insulation | <input type="checkbox"/> Duct Tape |
| <input type="checkbox"/> Duct Paper              | <input type="checkbox"/> Mag Pipe Insulation | <input type="checkbox"/> Air Cell | <input type="checkbox"/> CA Pipe                | <input type="checkbox"/> VAT               |                                    |
| <input checked="" type="checkbox"/> Other Mastic |  |                                   |   |  |                                    |

### Control Methods:

- |   |                                    |   |                                       |   |  |
|---|------------------------------------|---|---------------------------------------|---|--|
| <input checked="" type="checkbox"/> N.P Enclosure | <input type="checkbox"/> Glove Bag | <input type="checkbox"/> Mini Enclosure | <input type="checkbox"/> Wrap and Cut | <input checked="" type="checkbox"/> Water | <input checked="" type="checkbox"/> HEPA Vac |
| <input type="checkbox"/> Other                    |                                    |   |                                       |   |  |

Asbestos Contractor: Alpine Abatement Associates Inc.

Phone: 541-388-2672

Mailing Address: PO Box 1557, Bend, OR, 97709

Email: annmarie@alpineabatement.com

Certification ##: ABCN00001215

Supervisor: Jose Alvarado

Phone: 541-388-2672

Property Owner: Mike Velilla

Phone: 360-600-0141

Mailing Address: 456 Pioneer Ave NE, Castle Rock WA 98611

Asbestos Disposal Site: Hillsboro Landfill: 3205 SE Minter Bridge Rd, Hillsboro, OR, 97123-

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

Submitter Name: Seth Webb

Representing: Alpine Abatement Associates

Submitter Title: Project Manager

Date Submitted: 4/18/2024

Reviewed by SWCAA: Danielle Kreps

*Danielle Kreps*

☒ Approved



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Atlas Labs

## Castle Rock

Name / Company Name: Church of the Nazarene		Phone: 360-936-9523
Contact Email: glenna.smith.525@yahoo.com		
Job Name:		Job/Project:
Address/Project Location: 456 Pioneer, Castle Rock WA		

Please check box that applies

<input type="checkbox"/>	<b>Rush</b>	<i>*Samples turned in by 2PM will be processed the same day</i>	<input checked="" type="checkbox"/>	<b>Asbestos PLM</b>
<input type="checkbox"/>	<b>Next Day</b>		<input type="checkbox"/>	<b>Lead Paint</b>
<input type="checkbox"/>	<b>2-Day</b>		<input type="checkbox"/>	<b>Other</b>
<input checked="" type="checkbox"/>	<b>5-Day</b>			

[illegible]

Special Instructions:

Client Sign Here: <u>Glenna Delilla</u>		Date: <u>2/8/24</u>	Time: <u>3:45</u>
Atlas: Accepted By: <u>Kelley Kato</u>		Date: <u>2-8-2024</u>	Time: <u>3:45</u>
Credit Card: <u>0000</u>	Cash: <u>00</u>	Check #	Amount: \$ <u>26.57</u>
Lab Results Completed By: <u>DZ</u>		Date Sent Out: <u>2-13-2024</u>	Email/Mail

\*Atlas charges a per sample fee and not by layer. One sample fee equals four layers. Additional layers will result in an additional sample fee.



Batch # 2022 \*

22-1154801

Analysis Date \*

02/08/2024

Project #

Name / Company \*

Church of the Nazarene

Project Name

PO #

Analyst \*

Dillon Lafever

Project Location \*

456 Pioneer Castle Rock,  
WA

Turnaround Time \*

5-Day

**Asbestos Analysis of Bulk Material by Polarized Light Microscopy**

Sample*	Layer*	Description*	Non Asbestos*	Asbestos Type*	Asbestos %*
1	1	Mastic (Yellow) - Fellowship Hall	Cellulose	None Present	N/D
1	2	VCT (Brown) - Fellowship Hall	Cellulose	Chrysotile	<1%
1	3	Mastic (Black) - Fellowship Hall	Cellulose	Chrysotile	3%

**To Be Filled by the Technician**

Technician \*

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**NIOSH or any other agency of the federal government. Non-friable organically bound materials present a problem matrix and therefore Atlas recommends gravimetric reduction prior to analysis. Samples received in good condition unless otherwise noted. Transmission Electron Microscopy asbestos identification and lead paint analysis will be available and performed by laboratories by proxy. Original analysis documents are available upon request of the client.**