Δ ΓΙΛΙΓΔΔ	SWCAA			Case #: 24-642		
Southwest Clean Air Agency	lotice of li	ntent to Remov	e Asbestos	Amendm	ent: 0	
11815 NE 99th Street, Suite 1294 Vancouver, WA 98662			Da	ate Received:	9/18/2024	
Voice: 360-574-3058 Fax: 360-576-0925				Date Paid:	9/18/2024	
Web: https://www.swcleanair.gov Email: Tina@swcleanair.gov				SWCAA Fee:	\$294.00	
This notification MUST be prese	ent at all time	es at the asbestos p	roject sit	Receipt #:	162878500	
*** EMERGENCY NOTICE ***						
Quantity to be removed: 130 So	quare Feet	0 Linear Feet	Works	shift days: TH		
Project starting date: 9/19/2024	Project Cor	mpletion date: 9/19/20	24 Worksł	nift hours: 8am	n - 530pm	
Site Name: Resident		Site addres	s: 554 6th St #4			
Location of Asbestos: Bedroom/Ba	throom	City/State/Zip	: Washougal	WA	98671	
Demolition of Structure (Notificati	ion of Demolitio	n required)	County: CLAR	RK COUNTY		
Asbestos survey conducted?	No s	urvey reason:				
AHERA Inspector: Shane Witter			Certificatior	n #: IR-22-734E	3	
Material to be Removed:□ Fireproofing✓ Popcorn Ceilin□ Duct Paper□ Mag Pipe Insu✓ OtherDrywall/Texture	-	<ul><li>Sheet Viny</li><li>Air Cell</li></ul>	'I ☐ Boiler Ins ☐ CA Pipe		Duct Tape VAT	
Control Methods:✓ N.P Enclosure✓ Glove Bag✓ OtherManual Methods	🗌 Mini Encl	osure 🗌 Wrap and	Cut 🗹 Water		HEPA Vac	
Asbestos Contractor: Chinook Restor	ration dba Paul I	Davis Restoration	Phone: 800-9	51-9283		
Mailing Address: 1800 W Fourth		120B, Vancouver, WA,	986 Email: tony.a	lltamirano@pa	uldavis.com	
Certification ##: ABCN00001738 Supervisor: Lucio Ramirez	3		Phone: 360-500-35	95		
•						
Property Owner: Sterling Properties Mailing Address: 1111 Main St #			Phone: 360546334	T		
Asbestos Disposal Site: Hillsboro Lar			ro. OR. 97123-			
			· · -			
I DO HEREBY CERTIFY TO THE BE		FORMATION CONTA			IS,	
Submitter Name: Tony Altamirano			Representing:	Paul Davis		
Submitter Title: Project Manager			Date Submitted:	9/18/2024		

Reviewed by SWCAA: Mihai Voivod



## Notice of Intent to Remove Asbestos

Case #: 24-642 Amendment: 0

This notification MUST be present at all times at the asbestos project sit	Receipt #:	162878500
Email: Tina@swcleanair.gov	SWCAA Fee:	\$294.00
Fax: 360-576-0925 Web: https://www.swcleanair.gov	Date Paid:	9/18/2024
11815 NE 99th Street, Suite 1294 Vancouver, WA 98662 Voice: 360-574-3058	Date Received:	9/18/2024

	430-5290 www #231684	v.atlaslabsinc.com		tlas	Lah	s		
				lino	LIUN	0		
			С	hain of Cust	ody			
Nam	ne / Compa	ny Name: Paul Da	avis Restoratio	on of Vancouve	r/Portland	Phone: 360-	823-1388	
Con	tact Email:	cody.parsley@pa	auldavis.com,	kyle.greene@p	auldavis.com,	gvwaesd@p	auldavis.co	m,
		avis.com, aocegu auldavis.com, ah		the second se				
		auldavis.com, an	asken@paulu	avis.com, an.wo	bou@pauldav	15.COM,		
Proj	ect Name:	Cavalie	r Apartme	ents		Batch: 55	265-E	
loh	Project Ad	dress: 554			Dechana			
				unit#7 l	Nashooga	109	180/1	
	ector:	Shane Wi se: Resident;		ear Built: 196	9 Peason f	or Survey:	Remarkty	
Sur	vey Area Us	se. Nesident,	Approx. 1	ear built. 110	( Reason i	or Survey.	nenova p c	M
X	Rush				X Asbestos			1.42
	Next Day 2-Day				Lead Pair Other	nt		
	5-Day				outor			
							O an dition	Approx
#		Material Descrip		Friable Y/N	Bathroo	ation	Condition	SQ FT. 30
2	1	Drywall ceil	ing	Ý			1001	60
3		Drywallw	211	Y				60
4		Drywall h	911	Y				60
5	N	Jing Floor	<b>.</b>	N	V			30
6		Drywall W		Y	Bedroc	m	1	30
	and "							
							1.1.4	
				-				
Not							1	
NOU	85.							
		61	the		a i	1.211		ula.
Insp	pector Sign	ature:	40		Date: 7-/	6-29	Time: 10	i 70.4-
Acc	epted By:	Kelly K	atono		Date: 9.1	6.2024	Time: 10	:45
Lab	Poculte C	10	0		Date Sent Ou	+ 9-16-1	( Email	/ Mail
		ompleted By:	plan		Date Sent Ou	t:09-16 · 2		and the second

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## Atlas Labs

Batch # 2022 *	Name / Company *
22-1559201	Paul Davis Restoration of Vancouver/Portland
Analysis Date *	Project Name
09/16/2024	Cavalier Apartments
Project #	PO #
5265-E	
Analyst *	Project Location *
Ryan Carpenter	554 6th St., Unit #4, Washougal, WA 98671

Turnaround Time \*

Rush

## Asbestos Analysis of Bulk Material by Polarized Light Microscopy

Sample*	Layer*	Description*	Non Asbestos*	Asbestos Type*	Asbestos %*
1	1	Drywall (White) - Bathroom Ceiling	Cellulose	None Present	N/D
1	2	Texture (Off White) - Bathroom Ceiling	Cellulose	None Present	N/D
2	1	Drywall (White) - Bathroom Wall	Cellulose / Fiberglass	None Present	N/D
3	1	Drywall (White) - Bathroom Wall	Cellulose / Fiberglass	None Present	N/D
3	2	1st Layer Texture (Off White) - Bathroom Wall	Cellulose	None Present	N/D
3	3	2nd Layer Texture (Off White) - Bathroom Wall	Cellulose	Chrysotile	3%
3	4	Joint Compound (Off White) - Bathroom Wall	Cellulose	None Present	N/D
4	1	Drywall (White) - Bathroom Wall	Cellulose / Fiberglass	None Present	N/D
4	2	1st Layer Texture (Off White) - Bathroom Wall	Cellulose	None Present	N/D
4	3	2nd Layer Texture (Off White) - Bathroom Wall	Cellulose	None Present	N/D
4	4	Joint Compound (Off White) - Bathroom	Cellulose	None Present	N/D

Sample*	Layer*	Description*	Non Asbestos*	Asbestos Type*	Asbestos %*
		Wall			
5	1	Vinyl (Off White) - Bathroom Floor	Cellulose / Fiberglass	None Present	N/D
5	2	Mastic (White) - Bathroom Floor	Cellulose	None Present	N/D
5	3	Underlayment (Brown) - Bathroom Floor	Cellulose	None Present	N/D
6	1	Drywall (White) - Bedroom Wall	Cellulose / Fiberglass	None Present	N/D
6	2	Texture (Off White) - Bedroom Wall	Cellulose	Chrysotile	2%
6	3	Joint Compound (Off White) - Bedroom Wall	Cellulose	None Present	N/D

## To Be Filled by the Technician

Technician \*



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