

Notice of Intent to Remove Asbestos

Case #: 25-123

2/17/2025

171164226

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: 2/17/2025

Date Paid:

Receipt #:

Amendment: 0

2/17/202

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SWCAA Fee: \$384.00

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

| Quantity to be removed: 185 Square Feet 0 Linear Fe Project starting date: 2/27/2025 Project Completion date: 2/ | | Workshift days Workshift hours | : Th : 8:00am-4:30pm | | | |
|---|----------------------------|-----------------------------------|-------------------------|--|--|--|
| Site Name: Ridgefield Living Center Site address: 104 Pioneer St | | | | | | |
| Location of Asbestos: Basement Nurse Office, Linen Closet City/Sta | City/State/Zip: Ridgefield | | WA 98642 | | | |
| ☐ Demolition of Structure (Notification of Demolition required) County: CLARK COUNTY | | | | | | |
| ☐ Asbestos present? ☐ Asbestos presumed? | | | | | | |
| ✓ Asbestos survey conducted? No survey reason: | | | | | | |
| AHERA Inspector: Occupant Owner | | Certification #: | | | | |
| Material to be Removed: □ Fireproofing □ Popcorn Ceiling □ CAB □ Shee □ Duct Paper □ Mag Pipe Insulation □ Air C ☑ Other Wall and ceiling texture, drywall, JC | • | ☐ Boiler Insulation☐ CA Pipe | ☐ Duct Tape ☐ VAT | | | |
| Control Methods: ✓ N.P Enclosure ☐ Glove Bag ☐ Mini Enclosure ☐ Wra ✓ Other Regulate Area | p and Cut | ✓ Water | ✓ HEPA Vac | | | |
| Asbestos Contractor: Minority Abatement Contractors, Inc. | | Phone: 360-750-1900 | | | | |
| Mailing Address: 3200 NE 65th St, Vancouver, WA, 98663 | | Email: vwhitebird@minorityac.com | | | | |
| Certification ##: ABCN00001346 Supervisor: Jose Bahena | Pho | ne: 503-780-6691 | | | | |
| Property Owner: Richard Baer | Pho | Phone: 360-887-5066 | | | | |
| Mailing Address: 104 Pioneer St, Ridgefield WA 98642 | | | | | | |
| Asbestos Disposal Site: Wasco County Landfill: 2550 Steele Rd, The Dalles, OR, 97058- | | | | | | |

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

| Submitter Name: | gplaza@minorityac.com | Representing: | Minority Abatement Contract |
|------------------|-----------------------|-----------------|-----------------------------|
| Submitter Title: | Project Manager | Date Submitted: | 2/17/2025 |
| | | | |

Reviewed by SWCAA: Danielle Kreps

☑ Approved