USEPA
1435 N. Orchard
Boise ID 83706

U.S. ENVIRONMENTAL PROTECTION AGENCY - STATE OF IDAHO

NOTIFICATION OF DEMOLITION AND RENOVATION

Operator Project # ICA 22-09	Postmark	Date Received	Notification # 1

I. Type of Notification (check one): ☒ Original ☐ Revised ☐ Canceled

II. Facility Description (include building name, number, and floor or room number)
Building Name: Square Deal Store
Address: 215 Main Street
City: Grand View County: Owyhee State: Idaho Zip Code: 83624
Site Location (specific):
Building Size (square feet): 8000 # of Floors: 2 Age in Years: 80
Present Use: none Prior Use: store

III. Type of Operation (check one) ☒ Demo ☒ Ordered Demo ☐ Renovation ☐ Emergency Renovation ☐ Fire Training
CLEAN UP PER EPA JOHN PAVITT

IV. Is Asbestos Present? (check one): ☒ Yes ☐ No

V. Facility Information
Owner Name: Schkade Holdings LLC
Address: PO Box 555
City: Grand View State: Idaho Zip Code: 83624
Contact: Jens Schkade Telephone: (b) (6) Fax:
Removal Contractor Name: Schkade Ranch LLC
Address PO Box 114
City: Grand View State: Idaho Zip Code: 83624
Contact: Jens Schkade Telephone: (b) (6) Fax:
Other Operator (demolition/general):
Address: City: State: Zip Code:
Contact: Telephone: Fax:

VI. Procedure, including analytical methods, employed to detect the presence of and to estimate the quantity of RACM and Category I and Category II non-friable ACM: Bulk Sampling / PLM Analysis

VII. Approximate Amount of Asbestos Materials:

	RACM to be Removed	Non-friable Asbestos Material to be Removed		Non-friable Asbestos Material NOT to be Removed	
		Category I	Category II	Category I	Category II
Pipes (linear feet)					
Surface Area (square feet) 78,000	TILE/MASTIC				
Facility Components (~~cubic feet~~)	+ ROOFING MATERIAL				

VIII. Scheduled Dates Demolition or Renovation: Start: Complete:

IX. Dates for Asbestos Removal (MM/DD/YY) Start: 9/24/22 Complete: ?

Days of the Week:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours of Operation:	0800-1600	0800-1600	0800-1600	0800-1600	0800-1600		

Complete all unshaded spaces, except demolitions which involve less than 260 linear feet, 160 square feet, or 35 cubic feet of RACM, need not complete spaces VII,XI,XII,XIII,XIV, and XV. Notifications for Emergency Demolition or Emergency Renovation must supply attachments.

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X. Description of planned Demolition or Renovation work to be performed and method(s) to be employed, including demolition or renovation techniques to be used and description of affected facility components:

Wet method, no visible emissions as per NESHAP regulation.

XI. Description of work practices and engineering controls to be used to comply with the requirements, including asbestos removal and waste handling emission control procedures: Manual methods in accordance with NESHAP regulations, including negative pressure containment where regulated ACM's are present. All ACM's will be wetted prior to removal and placed in double layered 6-mil. poly bags, labeled in accordance with regulations. Sealed bags will be transported within an enclosed trailer to the Simco Road Regional landfill for disposal.

XII. Waste Transporter #1

Name: Hipwell Trucking LLC
Address: PO Box 472
City: Grand View State: Idaho Zip Code: 83624
Contact: Telephone: 208 Fax:

Waste Transporter #2

Name:
Address:
City: State: Zip Code:
Contact: Telephone: Fax:

XIII. Waste Disposal

Name: US Ecology Grand View Site 1
Address: 20400 Lemley Rd
City: Grand View State: Idaho Zip Code: 83624
Contact: Austin Crone Telephone: 208 834 2275 Fax: 208

XIV. Emergency Demolition (complete Item XIV and all other sections, only if this project is an Emergency Demo.)

1. Attach a copy of the Order to this notice.
2. Name of Authority Issuing Order: Title:
3. Authority of Order (Citation of Code):
4. Date of Order (MM/DD/YY): Date Ordered to Begin

XV. Emergency Renovation (Attach separate sheet with the following information if project is Emergency Demo.)

1. Date and Hour of the Emergency:
2. Description of the Sudden, Unexpected Event:
3. Explanation of how the event caused unsafe conditions or equipment damage or an unreasonable financial burden.

XVI. Description of procedures to be followed in the event that unexpected RACM is found or non-friable ACM becomes crumbled, pulverized or reduced to powder.

**********As Per NESHAP**********

XVII. I certify that an individual trained in the provisions of NESHAP (40 CFR PART 61, SUBPART M) will be on-site during the Demolition or Renovation and evidence that the required training has been accomplished by this person will be available during normal business hours.

Signature of Owner/Operator	Date	Type or Print Name and Title
[signature]	2/8/22	MIKE ROSS OPS. MANAGER

XVIII. I acknowledge the existence of laws prohibiting the submission of false or misleading statements and I certify that facts contained in this notification are true, accurate, and complete.

Signature of Owner/Operator	Date	Type or Print Name and Title
[signature]	2/8/22	Jens Schkade

Original Notification must be mailed or hand delivered at least ten working days (Monday-Friday excluding weekends) before demolition or renovation begins, except emergency demolitions and emergency renovations (see regulation) which must be submitted as soon as possible before operations begin. (Form Revised 3/24/99)

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Asbestos NESHAP Coordinator
US-EPA Region 10 20-C04
1200 Sixth Ave. Ste 155
Seattle, WA 98101

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