DEMOLITION/RENOVATION NOTIFICATION FORM

NOTE: CIRCLE ITEMS THAT ARE AMENDED

NOTIFICATION#

1) Abatement Contractor: Northwinds Abatement, Inc. TDH License No.: 80-0054
Address: 903 Port Houston Street City: Houston State: TX Zip: 77029
Office Phone Number: (713) 671-5350 Job Site Phone Number: (713) 321-4839
Site Supervisor: Stephen L. Ingle TDH License No.: 80-3730
Site Supervisor: Richard Perez TDH License No.: 80-3568

Demolition Contractor: N/A Office Phone No.: ( ) -
Address: City: State: TX Zip:
Trained On-Site NESHAP Individual: Certification Date: / /

2) Project Consultant/Operator: Envirotest, Inc. TDH License No.: 10-0006
Mailing Address: 3902 Braxton
City: Houston State: TX Zip: 77063- Office Phone No.: (713) 782-4101

3) Facility Owner: Lyondell-Citgo Refining Company, Ltd.
Mailing Address: 12000 Lawndale
City: Houston State: TX Zip: 77252 Owner Phone No.: (713) 321-4839

4) Description or Facility Name: Lyondell-Citgo Refining Company, Ltd.
Address: 12000 Lawndale County: Harris
City: Houston Zip: 77252 Facility Phone Number: (713) 321-4839
Facility Contact Person: Mr. Alan Timme
Description of Area/Room Number: MEK Unit - E21B Chiller - Mastic Lagging
Prior Use: Process Chiller Future Use: Process Chiller
Age of Building: 53 years Size: N/A Number of Floors: N/A

5) Type of Work: [ ] Demolition [X] Renovation [ ] Annual O&M
Work will be during: [X] Day [ ] Evening [ ] Night Weekends Only? [ ] YES [X] NO

6) Is this a Public Bldg? [ ] YES [X] NO Federal Facility? [ ] YES [X] NO
Industrial Site? [X] YES [ ] NO Is building occupied? [ ] YES [X] NO

7) Notification Type CHECK ONLY ONE
[X] Original (10 Working Days) [ ] Cancellation [ ] Amendment [ ] Emergency/Ordered
If this is an amendment, which amendment number is this? N/A (Enclose copy of original)
If emergency, who did you talk with at TDH? N/A Emergency#: N/A
Date and Hour of Emergency (HH/MM/DD/YY): / / /
Description of the sudden, unexpected event: N/A

Explanation of how the event caused unsafe conditions or would cause equipment damage (computers, machinery, etc.): N/A

8) Description of procedures to be followed in the event unexpected asbestos is found or previously non-friable asbestos material becomes crumbled, pulverized, or reduced to powder: Area regulated. PPE doned material wet, double bagged, HEPA vacuumed, encapsulated, if necessary pressure differential containment will be constructed and TDH notified

9) Was an Asbestos survey performed? [X] YES [ ] NO TDH Inspector License#: N/A
Survey Date: 08/08/95 Analytical Method: [X] PLM [ ] TEM TDH Lab. License#: 30-0005

10) Description of planned demolition or renovation work, type of material, and method(s) to be used:
Removal of non-friable ACM mastic type jacketing covering non-ACM cork type insulation from the E21B Chiller in the MEK Unit

For Office Use Only [ ] TAHPA [ ] NESHAP [ ] T [ ] H [ ] L Violation? [ ] YES [ ] NO RCVD / / / / POSTMARK / /

11) Description of work practices and engineering controls to be used to prevent emissions of asbestos at the demolition/renovation site: Full pressure differential containment, wet removal, double bagged, proper disposal, PPE includes Type C, double Tyvek; decon

12) ALL applicable items in the following table must be completed: IF NO ASBESTOS PRESENT CHECK [ ]

Asbestos-Containing Material Type	Approximate amount of Asbestos		Check unit of measurement					
	Pipes	Surface Area	In Ft	In M	Sq Ft	Sq M	Cu Ft	Cu M
RACM to be removed (friable)	N/A	N/A						
RACM NOT removed (friable)	N/A	N/A						
Category I removed (non-friable)	N/A	1300			X			
Category I NOT removed (non-friable)	N/A	N/A						
Category II removed (non-friable)	N/A	N/A						
Category II NOT removed (non-friable)	N/A	N/A						
RACM Off-Facility Component (friable)	N/A	N/A						

13) Waste Transporter Name: Browning Ferris Industries TDH License No.: 40-0050
Address: 1700 North "E" Street City: LaPorte State: TX Zip: 77571-
Contact person: Phone Number: (713) 471-9142

14) Waste Disposal Site Name: BFI McCarty Road Landfill
Address: 11013 Old Beaumont Highway City: Houston State: TX Zip: 77078-
Telephone: (713) 675-6101 TNRCC Permit Number: 261A

15) For structurally unsound facilities, attach a copy of demolition order and identify Governmental Official below:
Name: N/A Registration No.
Title:
Date of order (MM/DD/YY): / / Date order to begin (MM/DD/YY): / /

16) Scheduled Dates of Asbestos Abatement (MM/DD/YY) Start: 09/05/95 Complete: 09/12/95

17) Scheduled Dates Demolition/Renovation (MM/DD/YY) Start: 09/05/95 Complete: 09/22/95

Note: If the start date on this notification can not be met, the Asbestos Notification Section must be contacted by phone prior to the start date. Failure to do so is a violation and will result in official action being taken in accordance with TAHPA, Section 295.61.

I hereby certify that all information I have provided is correct, complete and true to the best of my knowledge. I acknowledge that the building owner/operator is responsible for all aspects of the notification form, including, but not limiting, content and submission dates. The maximum penalty is $10,000 per day per violation.

(Signature of Building Owner/Operator)	(Printed Name)	/ / (Date)	(713) - (Telephone)	(713) - (Fax Number)

MAIL TO:

TEXAS DEPARTMENT OF HEALTH
DIVISION OF OCCUPATIONAL HEALTH, ASBESTOS PROGRAMS BRANCH
1100 WEST 49th STREET, AUSTIN, TX 78756
Faxes are not accepted PH: 512-834-6600, 1-800-572-5548 *Faxes are not accepted*

Form dated 10/10/94. Replaces TDH form 04/01/94. For assistance in completing form call 1-800-572-5548, in Texas.