APPENDIX A

ASBESTOS SURVEY DATA FORMS

Building Number	351
Homogenous Area (HA-##)	01
Material Code	ML - Boiler insulation
Material Color	white
Material Size	N/A
Material Descriptor	mudded boiler insul.
Friability	F
Category of Assessment Classification and Response Actions	4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	60	420	SF	351 - 01A	RM 60, 20'N of SW corner
				351 - 01B	RM 60, 20'N of SW corner
				351 - 01C	RM 60, 10'E, 20'N of SW corner

Comment

Building Number	351
Homogenous Area (HA-##)	02
Material Code	TI
Material Color	white
Material Size	N/A
Material Descriptor	Mudded tank insul.
Friability	
Category of Assessment Classification and Response Actions	

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	60	88	SF	351 - 02A	Rm 60, E. end of tank
				02B	Rm 60, middle rear of tank
				02C	Rm 60, W. end of tank

Comment

EA

Building Number	351
Homogenous Area (HA-##)	03
Material Code	D.I.
Material Color	white
Material Size	N/A
Material Descriptor	~~DI on~~ AH DUCT
Friability	F
Category of Assessment Classification and Response Actions	6, 6A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample # ~~Name~~	Sample Location (e.g., NE Corner)
1	60	288	SF	351-03A	RM 60 5'E, 10'N of SW corner
				351-03B	4'E, of SW corner
				351-03C	20'N, 10E of SW corner

Comment

EA

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Building Number	351
Homogenous Area (HA-##)	04
Material Code	VD
Material Color	White
Material Size	N/A
Material Descriptor	white cloth
Friability	N
Category of Assessment Classification and Response Actions	7, 7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample # ~~Name~~	Sample Location (e.g., NE Corner)
BPL	~~Mechanical~~ 60	4	EA	351-04A	rm60, NE corner
				351-04B	rm60, NE corner
↓	Mechanical	5	↓	351-04C	RM 1, 10' N of SW corner
PL	Mechanical	7	EA		

Comment

EA

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Building Number 351

Homogenous Area (HA-##) 05

Material Code CF

Material Color white

Material Size 4"-6" OD pipe

Material Descriptor ~~N/A~~ on CWS line

Friability F

Category of Assessment Classification and Response Actions 4, 4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample # ~~Name~~	Sample Location (e.g., NE Corner)
BPL	602	1 ~~17~~	EA	351-05A	RM 602, NE corner
PL	all	6	EA		

Comment limited access above ceiling, 2 CFs observed ~~#~~ possibly more above ceiling

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Building Number	351
Homogenous Area (HA-##)	06
Material Code	FD
Material Color	N/A
Material Size	N/A
Material Descriptor	N/A
Friability	F
Category of Assessment Classification and Response Actions	7A
Comment	PACM

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	62	1	EA		

Building Number	351
Homogenous Area (HA-##)	07/08(a)(b) +08
Material Code	CT/~~CMT~~ MT
Material Color	white
Material Size	12"x12" (1x1')
Material Descriptor	fissures
Friability	F
Category of Assessment Classification and Response Actions	~~3~~ 4, 4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample ~~Name~~ # (a)	Sample Location (e.g., NE Corner)
EPL	351 Lobby	~~203~~	SF	351-08A 351-07A	± 1' N of SW corner
KPL	54	146	SF		
BPL	19	~~7~~ (3)	SF		
BPL	entire Floor	216	SF		
PL	all	158	SF	351-09~~A~~B	RM 182, NE corner
APL	all	17	SF		
M	all	18	↓	351-07C	RM 238, SE corner

Comment: 08(a) - light brown ceiling tile adhesive 08(b) dark brown ceiling tile adhesive (under majority of tile observed)

EA

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Building Number	351
Homogenous Area (HA-##)	08(a) + 08(b)/09
Material Code	MT ~~CMT~~, CT
Material Color	white
Material Size	1'x1'
Material Descriptor	~~be~~ pinholes
Friability	F
Category of Assessment Classification and Response Actions	4, ~~4A~~

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample # ~~Name~~	Sample Location (e.g., NE Corner)
BPL	57	126	SF	351-08(b)A	12'S, 10'E of NW corner
				351-09A	2'S of NW corner
	54	444	SF		
	52	150	SF		
BPL	21	110	SF		
	19	56	SF		
BPL	remaining rooms	5528 ~~3054~~	SF		
PL	all	7090 ~~6188~~	SF	351-08(b)B	RM 185, 8' N of SE corner
				351-08(a)B	RM 173, 10' N of SW corner
APL	all	15558 ~~10334~~		351-09C	RM 227, 12'E of SW corner
M	all	5163		351-08(b)C	RM 242, NW corner
				351-09B	RM 242, 6'E of SW corner

Comment: PL - Plaza level, APL - above plaza level. 08(a) - light brown ceiling tile adhes. 08(b) dark brown ceiling tile adhes.

EA

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Building Number	351
Homogenous Area (HA-##)	10
Material Code	WB
Material Color	N/A
Material Size	N/A
Material Descriptor	Drywall/joint compound
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	54	590	SF		
	57	126		351-10A	RM 7'N of SW corner
	52	150			
	21	110			
	19	56			
	remaining rooms	4070			
PL	all	5267	SF	351-10B	RM 185, 8'N of SE corner
APL	all	10586	SF		
M	all	5663	SF	351-10C	RM 2616, SW corner

Comment: Drywall located above 1'x1' ceiling tiles

EA

Building Number	351
Homogenous Area (HA-##)	11
Material Code	CT
Material Color	white
Material Size	2'x4'
Material Descriptor	raised texture
Friability	~~4, 4A~~ (F)
Category of Assessment Classification and Response Actions	~~4, 4A~~ 6A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample # ~~Name~~	Sample Location (e.g., NE Corner)
(1) BPL	54	4056	SF	351-11A	18'S, 6'W of NE corner
↓	remaining Floor	701	SF		
PL	911	6765	SF	351-11B	RM 142, 7'S of NE corner
APL	911	~~4080~~ 5397	↓	351-11C	RM 227, 20'E, 60'N of SW corner

Comment: (1) limited accessibility, high ceiling (includes 2'x2' CT, which appear to have been cut from 2'x4' CTs)

EA

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Building Number	351
Homogenous Area (HA-##)	12
Material Code	TG
Material Color	N/A
Material Size	N/A
Material Descriptor	Grout under 1"x1" Gray tile
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	entire Floor	~~3606~~ ~~1918~~	SF		
PL	all	1326	SF		
APL	all	487	↓	351-12A	Rm 209, 10' N of SE corner
M	all	309	↓		

Comment

Building Number	351
Homogenous Area (HA-##)	13a/13b
Material Code	VT/TM
Material Color	Gray w/white specks
Material Size	12"x12"
Material Descriptor	N/A
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	entire Floor	2602	SF	351-13(a)A 351-13(b)A	RM8, 5'W, 12's of NE corner
PL	all	2376	SF	351-13(a)B 351-13(b)B	RM174, 7'S, 7'W of NE corner
APL	all	2532 ~~1982~~	↓		
M	all	5304	↓	351-13(a)C 351-13(b)C	RM259, 15'W of SE corner

Comment

Building Number	351
Homogenous Area (HA-##)	14
Material Code	ML- Mastic
Material Color	Brown
Material Size	N/A
Material Descriptor	Mastic dots on Access doors
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BSL	entire Floor	6	SF	351-14A	Rm 50, Access door

Comment

EA

Building Number	351
Homogenous Area (HA-##)	16(a)/16(b)
Material Code	VT/TM
Material Color	white
Material Size	12"x12"
Material Descriptor	w/gray streaks
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	all	72	SF	351-16(a)A 351-16(b)A	Rm 8, 9 N of SW corner
PL	all	38	SF	351-16(a)B 351-16(b)B	Rm 174, 7'S, 6'W of NE corner
APL	all	141 ~~137~~	↓		
M	all	51	↓	351-16(a)C 351-16(b)C	Rm 257 SE corner

Comment

Building Number	351
Homogenous Area (HA-##)	17
Material Code	CT
Material Color	white
Material Size	2'x 2'
Material Descriptor	w/ divots
Friability	F
Category of Assessment Classification and Response Actions	4A
Comment	

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	10	730	SF	351-~~01~~17A	RM 10, 22'E, 10'N of SW corner

Building Number	351
Homogenous Area (HA-##)	18
Material Code	SE
Material Color	white
Material Size	N/A
Material Descriptor	on Fiberglass duct insulation
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	~~all~~ 10	7	SF	351-18A	RM 10, 25's of NE corner
PL	all	1 LOS	SF	351-18B	RM 150, 3'S, 15'E of NW corner
APL	all	~~30~~ 110	↓		

Comment

Building Number	351
Homogenous Area (HA-##)	19
Material Code	~~MLU~~ ~~AE~~ ML-door insul.
Material Color	white
Material Size	1½' x 1½'
Material Descriptor	~~[illegible]~~ insulation on access doors
Friability	F
Category of Assessment Classification and Response Actions	4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	10	1	EA	351-19A	25's of NE corner
↓	71	1	↓		

Comment

EA

Building Number	351
Homogenous Area (HA-##)	20
Material Code	MB
Material Color	Brown
Material Size	N/A
Material Descriptor	under off unit baseboard
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	all	146	~~SF~~ LF		
PL	all	179	LF		
APL	all	~~62~~ 92	↓	351-20B	RM 215, 8' E of NW corner
				351-20C	RM 201, 7' S of NW corner
M	all	157		351-20A	RM 259, SE corner

Comment

EA

Building Number	351
Homogenous Area (HA-##)	21/08
Material Code	CT/~~ETA~~ MT
Material Color	white
Material Size	1'x1'
Material Descriptor	w/raised texture
Friability	F
Category of Assessment Classification and Response Actions	4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	all	74	SF	351-21A	RM 19, 7N, 3'E of SW corner
PL	all	1753	SF	351-21B	RM 173, 10'N of SW corner

Comment

EA

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Building Number	351
Homogenous Area (HA-##)	22
Material Code	WC
Material Color	Gray
Material Size	N/A
Material Descriptor	
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	all	18	LF		
APL	all	94	↓	351-22A	RM 193, SE corner
M	all	320	↓	351-22B	RM 259, SE corner

Comment

Building Number	351
Homogenous Area (HA-##)	23
Material Code	TG
Material Color	N/A
Material Size	N/A
Material Descriptor	~~Grout under 6"x6"~~ Brown terra cotta tile
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	all	2805	SF		
PL	all	5379	SF		
APL	all	60			

Comment: PACM

EA

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Building Number	351
Homogenous Area (HA-##)	26/08
Material Code	CT/MT
Material Color	white
Material Size	1'x1'
Material Descriptor	w/ pinholes and extra small pinholes
Friability	F
Category of Assessment Classification and Response Actions	4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	all	11	~~EA~~ SF		
ADL	all	235	SF	351-26B	RM 227, SW corner
M	all	141	↓	351-26A	RM 238, 15' E of SW corner

Comment

EA

Building Number	351
Homogenous Area (HA-##)	27(a)/27(b)
Material Code	VT/TM
Material Color	red
Material Size	12"x12"
Material Descriptor	w/specks
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
APL	all	683	SF		
M	all	96	↓	351-27(a)A 351-27(b)A	Rm 241, top of stairs

Comment

EA

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Building Number	351
Homogenous Area (HA-##)	28
Material Code	MC
Material Color	tan
Material Size	N/A
Material Descriptor	under ~~[illegible]~~ carpet
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	all	7711	SF	351-28C	RM 100, 60'S, 20'W of NE corner
APL	all	14326	↓	351-28A	RM 227, 60'N, 50'E of SW corner
M	all	416	↓	351-28B	RM 242, SE corner

Comment

EA

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Building Number	351
Homogenous Area (HA-##)	29
Material Code	MB
Material Color	brown
Material Size	N/A
Material Descriptor	under dark brown baseboard
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	all	775	LF	351-29C	RM 123, 10's of NE corner
ADL	all	~~677~~ 831	~~SF~~ LF	351-29A	RM 193 5'W of SE corner
M	all	104	LF	351-29B	RM ~~249~~ 250, Northeast corner

Comment

EA

Building Number	351
Homogenous Area (HA-##)	30
Material Code	CF
Material Color	OFFwhite
Material Size	N/A
Material Descriptor	on HWR pipe
Friability	F
Category of Assessment Classification and Response Actions	4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	100	2	EA		
BPL	62	1	EA	351-30A	NE corner
				351-30B	16'W of NE corner
BPL	33	2	EA	351-30C	5'S of NE corner

Comment: limited visibility above ceilings. May be more fittings.

Building Number	351
Homogenous Area (HA-##)	31
Material Code	CF
Material Color	off white
Material Size	N/A
Material Descriptor	on thus line
Friability	F
Category of Assessment Classification and Response Actions	4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	100	2	EA	351-31C	10'E, 60's of NW corner
BPL	33	2	↓	351-31B	5's of NE corner
BPL	60	2	EA	351-31A	16'W of NE corner

Comment: Limited visibility above ceiling, may be more fittings.

EA

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Building Number	351
Homogenous Area (HA-##)	32(a), 32(b)
Material Code	VT/TM
Material Color	Yellow
Material Size	12"x12"
Material Descriptor	w/specks
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	all	980	SF	351-32(a)B 351-32(b)B	Rm 90 SE corner
APL	all	874 ~~40~~	SF	351-32(a)A 351-32(b)A	Rm 227, SW corner

Comment

Building Number	351
Homogenous Area (HA-##)	33(a), 33(b)
Material Code	VT/TM
Material Color	white
Material Size	12" x 12"
Material Descriptor	W/Black + Gray Specks
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
APL	all	~~33~~ 4	SF	351-33(a)A 351-33(b)B	Rm 218 3'W ~~S~~ 3N of SE Corner

Comment

EA

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Building Number	351
Homogenous Area (HA-##)	34
Material Code	CF
Material Color	Offwhite
Material Size	N/A
Material Descriptor	on cwr line
Friability	F
Category of Assessment Classification and Response Actions	4A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
BPL	62	1	EA	351-34A	RM 62, NE corner

Comment

EA

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Building Number	351
Homogenous Area (HA-##)	35(a)/35(b)
Material Code	VT/TM
Material Color	Blue
Material Size	12"x12"
Material Descriptor	w/ specks
Friability	N
Category of Assessment Classification and Response Actions	7A
Comment	

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	~~044~~ 186	296	SF	351-35(a)A 351-35(b)A	30'E, 4'N of SW corner

EA

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Building Number	351
Homogenous Area (HA-##)	36(a)/36(b)
Material Code	VT/TM
Material Color	Black
Material Size	12"x12"
Material Descriptor	w/Gray specks
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	186 ~~011~~	67	SF	351-36(a)A 351-36(b)A	28'E, 6'N of SW

Comment

EA

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Building Number	351
Homogenous Area (HA-##)	37
Material Code	MB
Material Color	Brown
Material Size	N/A
Material Descriptor	under back baseboard
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	186	347	~~SF~~ LF	351-37A	20' E of SW corner

Comment

EA

Federal Facility Project 50787 Form 08

Building Number	351
Homogenous Area (HA-##)	38(a)/38(b)
Material Code	VT/TM
Material Color	white
Material Size	12"x12"
Material Descriptor	W/LT Brown specks
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	186	1570	SF	351-38(a)A 351-38(b)A	30'E, 7'N of SW corner
				351-38(a)B 351-38(b)B	40'W, 9'N of SE corner

Comment

EA

Federal Facilities Projects and R&D Laboratory

Building Number	351
Homogenous Area (HA-##)	39
Material Code	SE
Material Color	Brown
Material Size	N/A
Material Descriptor	on metal ductwork
Friability	N
Category of Assessment Classification and Response Actions	7A

Floor	Room	Quantity	Unit (EA, SF, LF)	Sample Name	Sample Location (e.g., NE Corner)
PL	150	10	SF	351-39A	10'E, 3'S of NW corner

Comment

EA

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ACBM INSPECTION LOG
Homogenous Sampling Area

acility: Marshall ES. Building # 351
nous Area # 01 Material Code: ML - Boiler Insul.
)

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification
Small amount of damage on one boiler

tions of Damaged Areas

tion RM 60 Assessment Category # 1 Amount = 4 sq. Feet
ssment Condition Description:

ation Assessment Category # Amount
essment Condition Description:

ation Assessment Category # Amount
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
350-01A
01B
01C

Sampler Name: David Blackeney Date: 3/2/99
Sampler Signature:
Accreditation #: State:

Accredited Inspector

Inspector Name: Christina Vsdal Date: 3/2/99
Accreditation #: 035443 State: Md

reventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

l/Facility: ~~Bel~~ Marshall ES. Building # 351
genous Area # 02 Material Code: II

Note:
See attached floor plans for functional spaces and sampling locations.

ysical Assessment/General Condition/Reasons for Classification
Generally good condition, except where noted below

:ations of Damaged Areas

:ation RM 60 Assessment Category # 1 Amount = 2-5 sq. FEET
essment Condition Description:
Canvas covering is missing is small area, some damage to the tank insulation

:ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

:ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-02A
02B
02C

Sampler Name: David Blackney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector
Inspector Name: Christina Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

eventive Measures (PM) and Response Actions (RA)
· Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
:pair damaged area	1A	Isolate/restrict access	2A	Removal	3A
:moval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
eaning	4B	Isolate/restrict access	5B				
;/SD	4C	Removal	5C				
:pair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES. Building # 351
enous Area # 03 Material Code: DI
)

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Good condition, no damage observed

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351 - 03A
- 03B
- 03C

Sampler Name: David Blackney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: Christina Vodek **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

Preventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
Repair damaged area	1A	Isolate/restrict access	2A	Removal	3A
Removal	1B	Removal	2B	Enclose	3B
Maintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
Cleaning	4B	Isolate/restrict access	5B				
SS SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

/Facility: Marshall ES Building # 381
genous Area # 04 Material Code: VD

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
good condition, no damage observated. located in High vibration area.

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

cation _____ Assessment Category # _____ Amount _____
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351 - 04A
↓ - 04B
- 04C

Sampler Name: David Blackeny **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: Christina Bodell **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate restrict access	5B				
S SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

/Facility: 351 Building # 351
genous Area # 05 Material Code: CF

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Generally good condition, no damage observed

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-05A

Sampler Name: David Blackeney **Date:** 3/2/94
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name Anshna Vodak **Date:** 3/2/94
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S/SD	4C	Removal	5C				
enair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

/Facility: Marshall ES Building # 351
genous Area # 06 Material Code: 1D

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Good condition, no damage observed

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

egories of Assessment Classifications

. 1 Damaged or significantly damaged thermal system insulation (TSI)
. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
. 3 Damaged friable (surfacing ACM or miscellaneous ACM
. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
. 6 All other friable ACBM, suspect friable ACBM
. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
PACM

Sampler Name: _____ **Date:** _____
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: Christina Vodak **Date:** 3/2/19
Accreditation #: 038443 **State:** Md

:ventive Measures (PM) and Response Actions (RA)
Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
pair damaged area	1A	Isolate/restrict access	2A	Removal	3A
moval	1B	Removal	2B	Enclose	3B
intain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
eaning	4B	Isolate/restrict access	5B				
/SD	4C	Removal	5C				
pair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES. Building # 351
Homogenous Area # 07/08 Material Code: CT/~~CTA~~ MT

Note:
See attached floor plans for functional spaces and sampling locations.

Physical Assessment/General Condition/Reasons for Classification
Generally good condition. Except where noted below. Moderate Accessibility

Locations of Damaged Areas

Location RM 57 Assessment Category # ~~4~~ 3 Amount 10 SF
Assessment Condition Description:
Small amount of damage to CT's

Location _____ Assessment Category # _____ Amount _____
Assessment Condition Description:

Location _____ Assessment Category # _____ Amount _____
Assessment Condition Description:

Categories of Assessment Classifications

Cat. 1 Damaged or significantly damaged thermal system insulation (TSI)
Cat. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
Cat. 3 Damaged friable (surfacing ACM or miscellaneous ACM
Cat. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
Cat. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
Cat. 6 All other friable ACBM, suspect friable ACBM
Cat. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-07A 35-08A
07B
07C

Sampler Name: David Blackenay Date: 3/2/99
Sampler Signature: _____
Accreditation #: _____ State: _____

Accredited Inspector

Inspector Name: Christopher Vodel Date: 3/2/99
Accreditation #: 035443 State: NH

Preventive Measures (PM) and Response Actions (RA) for Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
Repair damaged area	1A	Isolate/restrict access	2A	Removal	3A
Removal	1B	Removal	2B	Enclose	3B
Maintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
Cleaning	4B	Isolate restrict access	5B				
SS SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

/Facility: Marshall E.S. Building # ~~381~~ 351
genous Area # 09/08 Material Code: C7/~~GFA~~ MT

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Generally good condition by some broken edges except where noted below
Moderate Accessibility.

ations of Damaged Areas

ation 57, lobby Assessment Category # ~~4~~ 3 Amount 10 SF
ssment Condition Description:
Damage to edges of ceiling tiles

ation 54 Assessment Category # ~~4~~ 3 Amount 10 SF
ssment Condition Description:
~~HF~~ All purpose room (Gym) = 7-8' high several gashes in ceiling tile disturbed by balls etc.

ation 21, ~~#~~ 19 Assessment Category # ~~4~~ 3 Amount 10 SF
ssment Condition Description:
gashes in tiles, 2 tiles missing

egories of Assessment Classifications

1 Damaged or significantly damaged thermal system insulation (TSI)
2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
3 Damaged friable (surfacing ACM or miscellaneous ACM
4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
6 All other friable ACBM, suspect friable ACBM
7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-08(b)A 351-09A
08(b)B 09B
08(b)C 09C
08(a)B

Sampler Name: David Blackeney **Date:** 3/2/94
Sampler Signature: _____
Accreditation #: _____ **State:** ____

Accredited Inspector
Inspector Name: Christina Vodak **Date:** 3/2/94
Accreditation #: 035443 **State:** Md

ventive Measures (PM) and Response Actions (RA)
Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
air damaged area	1A	Isolate/restrict access	2A	Removal	3A
noval	1B	Removal	2B	Enclose	3B
intain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
M	4A	O&M	5A	O&M	6A	O&M	7A
aning	4B	Isolate/restrict access	5B				
SD	4C	Removal	5C				
air	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
enous Area # 10 Material Code: M

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification
Good condition, no damage observed. Low accessibility.

tions of Damaged Areas

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tion _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-10A
↓ 10B
10C

Sampler Name: David Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: Christina Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S/SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES. Building # 351
enous Area # 11 Material Code: ~~M~~ CT

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification
Good condition, no damage observed. Low accessibility

tions of Damaged Areas

ion _____ Assessment Category # _____ Amount _____
sment Condition Description:

ion _____ Assessment Category # _____ Amount _____
sment Condition Description:

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

gories of Assessment Classifications

1 Damaged or significantly damaged thermal system insulation (TSI)
2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
3 Damaged friable (surfacing ACM or miscellaneous ACM
4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
6 All other friable ACBM, suspect friable ACBM
7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-11A
11B
11C

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** ____

Accredited Inspector

Inspector Name: Christina Vodal **Date:** 3/2/99
Accreditation #: 635443 **State:** Md

ventive Measures (PM) and Response Actions (RA)
Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
air damaged area	1A	Isolate/restrict access	2A	Removal	3A
oval	1B	Removal	2B	Enclose	3B
ntain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
M	4A	O&M	5A	O&M	6A	O&M	7A
aning	4B	Isolate/restrict access	5B				
SD	4C	Removal	5C				
air	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

cility: Marshall ES Building # 351
ous Area # 12 Material Code: TG
)

Note:
See attached floor plans for functional spaces and sampling locations.

:al Assessment/General Condition/Reasons for Classification
Generally good condition, except where noted below. Low accessibility.

ions of Damaged Areas

on RM 209 Assessment Category # 7 Amount ≈ 6 sq feet.
sment Condition Description:
Severe a small area of tile has been damaged by water, tile has become loose exposing grout.

:ion Assessment Category # Amount
ssment Condition Description:

tion Assessment Category # Amount
ssment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-12A

Sampler Name: D. Blackeney Date: 5/2/99
Sampler Signature:
Accreditation #: State:

Accredited Inspector

Inspector Name: Christnallodal Date: 5/2/99
Accreditation #: 035443 State: MI

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
eaning	4B	Isolate/restrict access	5B				
S-SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

acility: Marshall ES Building # 351
nous Area # 13a/13b Material Code: VT/TM

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification
Generally good condition, no damage observed. High traffic area

ions of Damaged Areas

ion _____ Assessment Category # _____ Amount _____
sment Condition Description:

ion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

egories of Assessment Classifications

. 1 Damaged or significantly damaged thermal system insulation (TSI)
. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
. 3 Damaged friable (surfacing ACM or miscellaneous ACM
. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
. 6 All other friable ACBM, suspect friable ACBM
. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-13(a)A 351-13(b)A
13(a)B 13(b)B
13(a)C 13(b)C

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** ____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

eventive Measures (PM) and Response Actions (RA)
Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
pair damaged area	1A	Isolate/restrict access	2A	Removal	3A
moval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
eaning	4B	Isolate/restrict access	5B				
SD	4C	Removal	5C				
pair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

:Facility: Marshall ES Building # 351
genous Area # 14 Material Code: ML - mastic

Note:
See attached floor plans for functional spaces and sampling locations.

:sical Assessment/General Condition/Reasons for Classification

Exposed mastic dots on Access doors.

:ations of Damaged Areas

:ation _____ Assessment Category # _____ Amount _____
:essment Condition Description:

cation _____ Assessment Category # _____ Amount _____
sessment Condition Description:

:ation _____ Assessment Category # _____ Amount _____
ssessment Condition Description:

:ategories of Assessment Classifications

:at. 1 Damaged or significantly damaged thermal system insulation (TSI)
:at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
:at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
:at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
:at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
Cat. 6 All other friable ACBM, suspect friable ACBM
Cat. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-14A

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** ____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

Preventive Measures (PM) and Response Actions (RA)
for Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
Repair damaged area	1A	Isolate/restrict access	2A	Removal	3A
Removal	1B	Removal	2B	Enclose	3B
Maintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
Cleaning	4B	Isolate restrict access	5B				
SS SD	4C	Removal	5C				
[illegible]	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall Es Building # 351
enous Area # 16(a) / 16b Material Code: ~~16(b)~~ VT/TM

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed.
Moderate traffic area.

itions of Damaged Areas

ition _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ition _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
it. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
it. 6 All other friable ACBM, suspect friable ACBM
it. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected

351 16(a)A 351-16(b)A
16(a)B 16(b)B
16(a)C 16(b)C

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

'acility: Marshall ES. Building # 351
nous Area # 17 Material Code: CT

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed.
low accessibility

tions of Damaged Areas

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-17A

Sampler Name: D. Brockeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
		Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

/Facility: 351 Marshall ES Building # 351
genous Area # 18 Material Code: SE

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Good condition, low accessibility

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-18A
351-18B

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** /

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MI

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

'acility: Marshall E.S. Building # 351
nous Area # 19 Material Code: ML - door insulation

Note: See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification

Good condition, except where noted below, low accessibility.

tions of Damaged Areas

tion RM 10 Assessment Category # 4 Amount 4 sq Feet
ssment Condition Description:
Access door does not stay closed, exposing insulation on inside of ~~door~~ access door.

ition Assessment Category # Amount
ssment Condition Description:

ition Assessment Category # Amount
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
it. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
it. 3 Damaged friable (surfacing ACM or miscellaneous ACM
it. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-19A

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature:
Accreditation #: **State:**

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: 351 Marshall ES Building # 351
enous Area # 20 Material Code: MB

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Good condition, no damage observed
low accessibility

itions of Damaged Areas

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ition _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ition _____ Assessment Category # _____ Amount _____
essment Condition Description:

egories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351 - 20A
20B
20C

Sampler Name: D. Blackeney Date: 3/2/99
Sampler Signature: _____
Accreditation #: _____ State: _____

Accredited Inspector

Inspector Name: C. Vodak Date: 3/2/99
Accreditation #: 035443 State: Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

acility: Marshall ES Building # 351
nous Area # 21/08 Material Code: CT/~~TMA~~ MT
)

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed.
Moderate accessibility

tions of Damaged Areas

tion _____ Assessment Category = _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category = _____ Amount _____
essment Condition Description:

ation _____ Assessment Category = _____ Amount _____
essment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-21A
↓ 21B

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodale **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S/SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
enous Area # 22 Material Code: [redacted] (WK)

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed
Moderate accessibility

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-22A
22B

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate-restrict access	5B				
S-SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

acility: Marshall ES Building # 351
ous Area # 23 Material Code: TG

Note:
See attached floor plans for functional spaces and sampling locations.

cal Assessment/General Condition/Reasons for Classification
Good condition, low accessibility

ions of Damaged Areas

ion _____ Assessment Category # _____ Amount _____
sment Condition Description:

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

tion _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
PACM

Sampler Name: _____ **Date:** _____
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
eaning	4B	Isolate/restrict access	5B				
SD	4C	Removal	5C				
		[illegible] measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

/Facility: Marshall ES Building # 351
genous Area # 26/08 Material Code: CT/MT

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed
Moderate accessibility.

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
sessment Condition Description:

tegories of Assessment Classifications

it. 1 Damaged or significantly damaged thermal system insulation (TSI)
it. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
it. 3 Damaged friable (surfacing ACM or miscellaneous ACM
it. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
it. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
it. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-26A
26B

Sampler Name: C. Blackenay **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** ____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

reventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S/SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
Homogenous Area # 27(a)/27(b) Material Code: VT/TM

Note: See attached floor plans for functional spaces and sampling locations.

Physical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed. Moderate foot traffic

Locations of Damaged Areas

Location _____ Assessment Category # _____ Amount _____
Assessment Condition Description:

Location _____ Assessment Category # _____ Amount _____
Assessment Condition Description:

Location _____ Assessment Category # _____ Amount _____
Assessment Condition Description:

Categories of Assessment Classifications

Cat. 1 Damaged or significantly damaged thermal system insulation (TSI)
Cat. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
Cat. 3 Damaged friable (surfacing ACM or miscellaneous ACM
Cat. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
Cat. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
Cat. 6 All other friable ACBM, suspect friable ACBM
Cat. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-27(a)A
27(b)A

Sampler Name: D. Blackeney Date: 3/2/99
Sampler Signature: _____
Accreditation #: _____ State: _____

Accredited Inspector

Inspector Name: C. Vodak Date: 3/2/99
Accreditation #: 035443 State: Md

Preventive Measures (PM) and Response Actions (RA) for Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
Repair damaged area	1A	Isolate/restrict access	2A	Removal	3A
Removal	1B	Removal	2B	Enclose	3B
Maintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
Cleaning	4B	Isolate/restrict access	5B				
SS SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
enous Area # 28 Material Code: MC

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Good condition, no damage observed

itions of Damaged Areas

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351 - 28A
28B
↓ 28C

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate-restrict access	5B				
S-SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

icility: Marshall ES Building # 351
ious Area # 29 Material Code: MB

Note:
See attached floor plans for functional spaces and sampling locations.

cal Assessment/General Condition/Reasons for Classification

good condition, no damage observed
low accessibility.

ions of Damaged Areas

ion _____ Assessment Category = _____ Amount _____
sment Condition Description:

tion _____ Assessment Category = _____ Amount _____
ssment Condition Description:

tion _____ Assessment Category = _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-29A
29B
29C

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

eventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
eaning	4B	Isolate-restrict access	5B				
SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

:Facility: Marshall ES Building # 351
genous Area # 30 Material Code: CF

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

cation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-30A
30B
30C

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

reventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S/SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
enous Area # 31 Material Code: CF

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed
low accessibility

itions of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected

351 - 31A
31B
↓ 31C

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S/SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
enous Area # 32(a)/32(b) Material Code: VT/TM

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Good condition, no damage observed.
Moderate foot traffic

itions of Damaged Areas

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-32(a)A 351-32(b)A
351-32(a)B 351-32(b)B

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 635443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate restrict access	5B				
S/SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

acility: Marshall ES Building # 351
nous Area # 33(a) / 33(b) Material Code: VT / TM

Note:
See attached floor plans for functional spaces and sampling locations.

cal Assessment/General Condition/Reasons for Classification
Good condition, no damage observed
Moderate foot traffic

tions of Damaged Areas

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-33(a) A
↓ 33(b) A

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall E.S. Building # 351
enous Area # 34 Material Code: CF

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Good condition, low accessibility

tions of Damaged Areas

tion _____ Assessment Category # _____ Amount _____
ssment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-34A

Sampler Name: D. Biacheney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
&M	4A	O&M	5A	O&M	6A	O&M	7A
eaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

'acility: Marshall F.S. Building # 351
nous Area # 35(a)/35(b) Material Code: VT/TM
)

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification
Generally Good condition. water damage to some tiles.

.tions of Damaged Areas

tion RM 186 Assessment Category # 7 Amount
ssment Condition Description:
Some water damage to tiles

ation Assessment Category # Amount
essment Condition Description:

)ation Assessment Category # Amount
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351 - 35(a)A
↓ 35(b)A

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature:
Accreditation #: **State:**

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** MD

Preventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
Repair damaged area	1A	Isolate/restrict access	2A	Removal	3A
Removal	1B	Removal	2B	Enclose	3B
Maintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
Cleaning	4B	Isolate/restrict access	5B				
SS SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
enous Area # 36(a) / 36(b) Material Code: VT / TM

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Generally Good condition, some water damaged tiles

ations of Damaged Areas

ation Rm 186 Assessment Category # 7 Amount
essment Condition Description:
water damage to some tiles

ation Assessment Category # Amount
essment Condition Description.

ation Assessment Category # Amount
essment Condition Description:

tegories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
~~36aA~~ 351-36(a)A
351-36(b)A

Sampler Name: D. Blackeney Date: 3/2/99
Sampler Signature:
Accreditation #: State:

Accredited Inspector

Inspector Name: C. Vodak Date: 3/2/99
Accreditation #: 035443 State: MO

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate-restrict access	5B				
S SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES Building # 351
enous Area # 37 Material Code: ~~VFT~~ MB

Note:
See attached floor plans for functional spaces and sampling locations.

ical Assessment/General Condition/Reasons for Classification
Good condition, ~~no dam~~ some water damage

itions of Damaged Areas

ition RM 186 Assessment Category # 7 Amount 5 LF
ssment Condition Description:
Some damage from water to baseboard adhesive

ation Assessment Category # Amount
essment Condition Description:

ation Assessment Category # Amount
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-37A

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature:
Accreditation #: **State:**

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
aintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S/SD	4C	Removal	5C				
	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall ES. Building # 351
genous Area # 38(a)/38b Material Code: VT/TM

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification
Generally Good condition, some water damage

ations of Damaged Areas

ation RM 186 Assessment Category = 7 Amount
essment Condition Description:
Water damage to VT

ation Assessment Category = Amount
essment Condition Description:

ation Assessment Category = Amount
essment Condition Description:

tegories of Assessment Classifications

t. 1 Damaged or significantly damaged thermal system insulation (TSI)
t. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
t. 3 Damaged friable (surfacing ACM or miscellaneous ACM
t. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
t. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
t. 6 All other friable ACBM, suspect friable ACBM
t. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-38(a)A
38(a)B
38(b)A
38(b)B
Sampler Name: D. Blackenay Date: 3/2/99
Sampler Signature:
Accreditation #: State:

Accredited Inspector
Inspector Name: C. Vodak Date: 3/2/99
Accreditation #: 035443 State: Md

reventive Measures (PM) and Response Actions (RA)
r Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate/restrict access	5B				
S SD	4C	Removal	5C				
epair	4D	Preventive measures	5D				

ACBM INSPECTION LOG
Homogenous Sampling Area

Facility: Marshall E.S. Building # 351
enous Area # 39 Material Code: SE.
)

Note:
See attached floor plans for functional spaces and sampling locations.

sical Assessment/General Condition/Reasons for Classification

Good condition.. Moderate accessibility, moderate vibration

ations of Damaged Areas

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
essment Condition Description:

ation _____ Assessment Category # _____ Amount _____
sessment Condition Description:

ategories of Assessment Classifications

at. 1 Damaged or significantly damaged thermal system insulation (TSI)
at. 2 Significantly damaged friable (surfacing ACM or miscellaneous ACM)
at. 3 Damaged friable (surfacing ACM or miscellaneous ACM
at. 4 Friable (surf. ACM or misc. ACM) or TSI with potential for damage.
at. 5 Friable (surf. ACM or misc. ACM) or TSI w/potential for significant damage
at. 6 All other friable ACBM, suspect friable ACBM
at. 7 Non ACBM or nonfirable surfacing or misc. material

Samples Collected
351-39A

Sampler Name: D. Blackeney **Date:** 3/2/99
Sampler Signature: _____
Accreditation #: _____ **State:** _____

Accredited Inspector

Inspector Name: C. Vodak **Date:** 3/2/99
Accreditation #: 035443 **State:** Md

reventive Measures (PM) and Response Actions (RA)
or Categories of Assessment Classifications

Cat. 1		Cat. 2		Cat. 3	
epair damaged area	1A	Isolate/restrict access	2A	Removal	3A
emoval	1B	Removal	2B	Enclose	3B
laintain in intact state	1C	Enclose	2C	Encapsulate	3C
		Encapsulate	2D	Repair	3D

Cat. 4		Cat. 5		Cat. 6		Cat. 7	
O&M	4A	O&M	5A	O&M	6A	O&M	7A
leaning	4B	Isolate-restrict access	5B				
S SD	4C	Removal	5C				
		Preventive measures	5D				

APPENDIX B

CHAIN-OF-CUSTODY FORMS

AMA Analytical Services, Inc.
AIHA (#8863) NVLAP (#1143) NY ELAP (10920)
4475 Forbes Blvd.• Lanham, MD 20706
(301) 459-2640•(800) 346-0961•Fax (301) 459-2643

CHAIN OF CUSTODY

Number For Inquires)

AILING ADDRESS:

1. Submittal Date: 3/~~12~~ 3 CV/99 — Job Name/location: Marshall ES #351
2. Client Name: EA Engineering — Job #: 60957-31 — P.O. #:
3. Street/RFD/P.O. Box: 5 Loveton Circle — Bill To: EA Engineering
4. City, State, Zip: Sparks, Md 21152 — Phone #: 410-771-4950 — Fax: 410-771-4204
5. Contact Person: Kris Hoiem/Christy Vodak — Submitted By: Christina Vodak (Print) Christina Vodak (Signature)
6. **DATE & TIME RESULTS REQUIRED:** 3 / ~~6~~ 8 / 99, **Time:** ~~8:00~~ 9:15 (AM) PM ☐ **IMMED.** ☐ **24HR** ☐ **48HR** ☒ **72HR** ☐ **5-DAY** OTHER(Specify):

AMPLE DATA:

1. Analysis Type: ☒ Asbestos ☐ Lead ☐ NOB - Whole (PLM/TEM) ☐ NOB Res. Ash (TEM) ☐ Other(Specify)
2. Total Number Of Samples: TEM ____ PCM ____ PLM 74 LEAD ____ OTHER (Specify)
3. ELECTRON MICROSCOPY SAMPLES:
   C **A.** Filter Type: PC☐ MCE☐ **B.** Porosity: ____ Micron **C.** Diameter ☐ 37mm ☐ 25mm
4. Release Critera/Analytical Sensitivity: 0.010 f/cc☐ 0.005 f/cc☐ AHERA☐ %ASBESTOS ☒ S/FT^2☐ OTHER ☐ S
5. Field Sheet Attached? YES ☐ NO ☒ If No Then Please Complete The Following:

SAMPLE ANALYSIS INFORMATION					ANALYSIS					MATRIX				
CLIENT ID NUMBER	AMA ID NUMBER	SAMPLE LOCATION	DATE	VOLUME (LITERS)	TEM	PCM	PLM	LEAD	OTHER	AIR	BLANK	BULK	WIPE	OTHER
351 ~~531~~ 01A							X							
B														
C														
02A														
B														
C														
03A														
B														
C														
04A														
B														
C														

REPORTING DATA:

1. Verbal Results To Whom? Name: Kris Hoiem — Phone: 410-771-4950 — Beeper:
2. Date Written Results Reqired 3 / 13 / 99

LABORATORY STAFF ONLY: (CUSTODY)

1. Date/Time RCVD: 3 / 3 / 99 @ 0915 Via: drop off By (Print): B Holland Sign: Bart Holland
2. Date/Time Analyzed: 3 / 8 / 99 @ ____ By (Print): Adam Max Sign: [illegible]
3. Results Reported To: EA Via: FAX Date: 3 / 8 / 99 Time: ____ Initials: AM
4. Comments:

CHAIN OF CUSTODY

Number For Inquires) 6CC01-3

AIHA (#8863) NVLAP (#1143) NY ELAP (10920)
4475 Forbes Blvd.• Lanham, MD 20706
(301) 459-2640•(800) 346-0961•Fax (301) 459-2643

MAILING ADDRESS:

1. Submittal Date: 3/3/99
2. Client Name: EA Engineering
3. Street/RFD/P.O. Box: 5 Loveton Circle
4. City, State, Zip: Sparks, Md 21152
5. Contact Person: Kris Hoiem

Job Name/location: Marshall ES #351
Job #: 60957.31 P.O. #:
Bill To: EA Engineering
Phone #: 410-771-4950 Fax: 410-771-4204
Submitted By: Christina Vodak (Print) Christina Vodak (Signature)

6. DATE & TIME RESULTS REQUIRED: 3 / 6 / 99, Time: 9:00 AM 9:15 PM ☐ IMMED. ☐ 24HR ☐ 48HR ☒ 72HR ☐ 5-DAY OTHER(Specify):

SAMPLE DATA:

1. Analysis Type: ☒ Asbestos ☐ Lead ☐ NOB - Whole (PLM/TEM) ☐ NOB Res. Ash (TEM) ☐ Other(Specify)
2. Total Number Of Samples: TEM ____ PCM ____ PLM 74 LEAD ____ OTHER (Specify)
3. ELECTRON MICROSCOPY SAMPLES:
   A. Filter Type: PC☐ MCE☐ B. Porosity: ____ Micron C. Diameter ☐ 37mm ☐ 25mm
4. Release Critera/Analytical Sensitivity: 0.010 f/cc☐ 0.005 f/cc☐ AHERA☐ %ASBESTOS☒ S/FT^2☐ OTHER ☐
5. Field Sheet Attached? YES ☐ NO ☒ If No Then Please Complete The Following:

SAMPLE ANALYSIS INFORMATION					ANALYSIS					MATRIX				
CLIENT ID NUMBER	AMA ID NUMBER	SAMPLE LOCATION	DATE	VOLUME (LITERS)	TEM	PCM	PLM	LEAD	OTHER	AIR	BLANK	BULK	WIPE	OTHER
351-05A							X							
07A														
B														
C														
08(a)A														
(a)B														
08(b)A														
(b)B														
(b)C														
09 A														
B														
C														
10 A														

REPORTING DATA:

1. Verbal Results To Whom? Name: Kris Hoiem Phone: 410-771-4950 Beeper:
2. Date Written Results Reqired ____ / ____ / ____

LABORATORY STAFF ONLY: (CUSTODY)

1. Date/Time RCVD: ____ / ____ / ____ @ ____ Via: ____ By (Print): ____ Sign: ____
2. Date/Time Analyzed: ____ / ____ / ____ @ ____ By (Print): ____ Sign: ____
3. Results Reported To: ____ Via: ____ Date: ____ / ____ / ____ Time: ____ Initials: ____

Comments: ____

CHAIN OF CUSTODY

AIHA (#8863) NVLAP (#1143) NY ELAP (10920)
4475 Forbes Blvd.• Lanham, MD 20706
(301) 459-2640•(800) 346-0961•Fax (301) 459-2643

MAILING ADDRESS:

1. Submittal Date: 3/2/99 (3/4) — Job Name/location: Marshall ES #351
2. Client Name: EA Engineering — Job #: 60957.31 — P.O. #:
3. Street/RFD/P.O. Box: 5 Loveton Circle — Bill To: EA Engineering
4. City, State, Zip: Sparks, Md 21152 — Phone #: 410-771-4950 — Fax: 410-771-4204
5. Contact Person: Kris Hoiem — Submitted By: Christina Vodak (Print) Christina Vodak (Signature)
6. **DATE & TIME RESULTS REQUIRED:** 3 / 6 / 99, Time: ~~8:00~~ 9:15 AM PM ☐ IMMED. ☐ 24HR ☐ 48HR ☒ 72HR ☐ 5-DAY OTHER(Specify):

SAMPLE DATA:

1. Analysis Type: ☒ Asbestos ☐ Lead ☐ NOB - Whole (PLM/TEM) ☐ NOB Res. Ash (TEM) ☐ Other(Specify)
2. Total Number Of Samples: TEM ____ PCM ____ PLM 14 LEAD ____ OTHER (Specify)
3. ELECTRON MICROSCOPY SAMPLES:
   A. Filter Type: PC ☐ MCE ☐ B. Porosity: ____ Micron C. Diameter ☐ 37mm ☐ 25mm
4. Release Critera/Analytical Sensitivity: 0.010 f/cc ☐ 0.005 f/cc ☐ AHERA ☐ %ASBESTOS ☒ S/FT² ☐ OTHER ☐
5. Field Sheet Attached? YES ☐ NO ☒ If No Then Please Complete The Following:

SAMPLE ANALYSIS INFORMATION					ANALYSIS					MATRIX				
CLIENT ID NUMBER	AMA ID NUMBER	SAMPLE LOCATION	DATE	VOLUME (LITERS)	TEM	PCM	PLM	LEAD	OTHER	AIR	BLANK	BULK	WIPE	OTHER
351 - 10b							X							
↓c							↓							
11 A														
↓B														
↓C														
12 A														
13 A Tile + mastic														
↓B														
↓C ↓														
14 A														
16 A Tile + mastic														
↓B														
↓C ↓														

REPORTING DATA:

1. Verbal Results To Whom? Name: Kris Hoiem Phone: 410-771-4950 Beeper:
2. Date Written Results Reqired ____ / ____ / ____

LABORATORY STAFF ONLY: (CUSTODY)

1. Date/Time RCVD: ____ / ____ / ____ @ ____ Via: ____ By (Print): ____ Sign: ____
2. Date/Time Analyzed: ____ / ____ / ____ @ ____ By (Print): ____ Sign: ____
3. Results Reported To: ____ Via: ____ Date: ____ / ____ / ____ Time: ____ Initials: ____
4. Comments: ____

AIHA (#8863) NVLAP (#1143) NY ELAP (10920)
4475 Forbes Blvd.• Lanham, MD 20706
(301) 459-2640•(800) 346-0961•Fax (301) 459-2643

CHAIN OF CUSTODY

Number For Inquires) 0001

MAILING ADDRESS:

1. Submittal Date: 3/2/99 (3rd) — Job Name/location: Marshall ES #351
2. Client Name: EA Engineering — Job #: 60957.31 — P.O. #:
3. Street/RFD/P.O. Box: 5 Loveton Circle — Bill To: EA Engineering
4. City, State, Zip: Sparks, Md 21152 — Phone #: 410-771-4950 — Fax: 410-771-4204
5. Contact Person: Kris Hoiem — Submitted By: Christina Vodak (Print) Christina Vodak (Signature)
6. **DATE & TIME RESULTS REQUIRED:** 3 / 6 / 99, Time: ~~8:00~~ 9:15 AM/PM ☐ IMMED. ☐ 24HR ☐ 48HR ☒ 72HR ☐ 5-DAY OTHER(Specify):

SAMPLE DATA:

1. Analysis Type: ☒ Asbestos ☐ Lead ☐ NOB - Whole (PLM/TEM) ☐ NOB Res. Ash (TEM) ☐ Other(Specify)
2. Total Number Of Samples: TEM ____ PCM ____ PLM 14 LEAD ____ OTHER (Specify)
3. ELECTRON MICROSCOPY SAMPLES:
   A. Filter Type: PC ☐ MCE ☐ B. Porosity: ____ Micron C. Diameter ☐ 37mm ☐ 25mm
4. Release Critera/Analytical Sensitivity: 0.010 f/cc ☐ 0.005 f/cc ☐ AHERA ☐ %ASBESTOS ☒ S/FT² ☐ OTHER ☐
5. Field Sheet Attached? YES ☐ NO ☒ If No Then Please Complete The Following:

SAMPLE ANALYSIS INFORMATION					ANALYSIS					MATRIX				
CLIENT ID NUMBER	AMA ID NUMBER	SAMPLE LOCATION	DATE	VOLUME (LITERS)	TEM	PCM	PLM	LEAD	OTHER	AIR	BLANK	BULK	WIPE	OTHER
351-17 A							X							
18 A							↓							
↓ B														
19 A														
20 A														
↓ B														
↓ C														
21 A														
↓ B														
22 A														
↓ B														
26 A														
↓ B														

REPORTING DATA:

1. Verbal Results To Whom? Name: Kris Hoiem Phone: 410-771-4950 Beeper:
2. Date Written Results Reqired ____ / ____ / ____

LABORATORY STAFF ONLY: (CUSTODY)

1. Date/Time RCVD: ____ / ____ / ____ @ ____ Via: ____ By (Print): ____ Sign: ____
2. Date/Time Analyzed: ____ / ____ / ____ @ ____ By (Print): ____ Sign: ____
3. Results Reported To: ____ Via: ____ Date: ____ / ____ / ____ Time: ____ Initials: ____

Comments:

CHAIN OF CUSTODY

AIHA (#8863) NVLAP (#1143) NY ELAP (10920)
4475 Forbes Blvd.• Lanham, MD 20706
(301) 459-2640•(800) 346-0961•Fax (301) 459-2643

MAILING ADDRESS:

1. Submittal Date: 3/~~2~~ 3/99 — Job Name/location: Marshall ES #351
2. Client Name: EA Engineering — Job #: 60957.31 — P.O. #:
3. Street/RFD/P.O. Box: 5 Loveton Circle — Bill To: EA Engineering
4. City, State, Zip: Sparks, MD 21152 — Phone #: 410-771-4950 — Fax: 410-771-4204
5. Contact Person: Kris Hoiem — Submitted By: Christina Vodak (Print) Christina Vodak (Signature)
6. **DATE & TIME RESULTS REQUIRED:** 3 / 6 / 99, **Time:** ~~8:00~~ 9:15 ~~AM~~ PM ☐ **IMMED.** ☐ **24HR** ☐ **48HR** ☒ **72HR** ☐ **5-DAY** OTHER(Specify):

SAMPLE DATA:

1. Analysis Type: ☒ Asbestos ☐ Lead ☐ NOB - Whole (PLM/TEM) ☐ NOB Res. Ash (TEM) ☐ Other(Specify)
2. Total Number Of Samples: TEM ____ PCM ____ PLM 14 LEAD ____ OTHER (Specify)
3. ELECTRON MICROSCOPY SAMPLES:
   A. Filter Type: PC ☐ MCE ☐ B. Porosity: ____ Micron C. Diameter ☐ 37mm ☐ 25mm
4. Release Critera/Analytical Sensitivity: 0.010 f/cc ☐ 0.005 f/cc ☐ AHERA ☐ %ASBESTOS ☒ S/FT² ☐ OTHER ☐
5. Field Sheet Attached? YES ☐ NO ☒ If No Then Please Complete The Following:

SAMPLE ANALYSIS INFORMATION					ANALYSIS					MATRIX				
CLIENT ID NUMBER	AMA ID NUMBER	SAMPLE LOCATION	DATE	VOLUME (LITERS)	TEM	PCM	PLM	LEAD	OTHER	AIR	BLANK	BULK	WIPE	OTHER
351-27 A Tile + Mastic							X							
28 A														
B														
C														
29 A														
B														
C														
30 A														
B														
C														
31 A														
B														
C														

REPORTING DATA:

1. Verbal Results To Whom? Name: Kris Hoiem Phone: 410-771-4950 Beeper:
2. Date Written Results Reqired ____ / ____ / ____

LABORATORY STAFF ONLY: (CUSTODY)

1. Date/Time RCVD: ____ / ____ / ____ @ ____ Via: ____ By (Print): ____ Sign: ____
2. Date/Time Analyzed: ____ / ____ / ____ @ ____ By (Print): ____ Sign: ____
3. Results Reported To: ____ Via: ____ Date: ____ / ____ / ____ Time: ____ Initials: ____
4. Comments: ____

AIHA (#8863) NVLAP (#1143) NY ELAP (10920)
4475 Forbes Blvd.• Lanham, MD 20706
(301) 459-2640•(800) 346-0961•Fax (301) 459-2643

CHAIN OF CUSTODY

MAILING ADDRESS:

1. Submittal Date: 3/29/99 — Job Name/location: Marshall ES #351
2. Client Name: EA Engineering — Job #: 60957.31 — P.O. #:
3. Street/RFD/P.O. Box: 5 Loveton Circle — Bill To: EA Engineering
4. City, State, Zip: Sparks, Md 21152 — Phone #: 410-771-4950 — Fax: 410-771-4204
5. Contact Person: Kris Hoiem — Submitted By: Christina Vodak (Print) Christina Vodak (Signature)
6. **DATE & TIME RESULTS REQUIRED:** 3 / 6 / 99, **Time:** ~~8:00~~ 9:15 AM PM ☐ **IMMED.** ☐ **24HR** ☐ **48HR** ☒ **72HR** ☐ **5-DAY** OTHER(Specify):

SAMPLE DATA:

1. Analysis Type: ☒ Asbestos ☐ Lead ☐ NOB - Whole (PLM/TEM) ☐ NOB Res. Ash (TEM) ☐ Other(Specify)
2. Total Number Of Samples: TEM ____ PCM ____ PLM 14 LEAD ____ OTHER (Specify)
3. ELECTRON MICROSCOPY SAMPLES:
   A. Filter Type: PC ☐ MCE ☐ **B.** Porosity: ____ Micron **C.** Diameter ☐ 37mm ☐ 25mm
4. Release Critera/Analytical Sensitivity: 0.010 f/cc ☐ 0.005 f/cc ☐ AHERA ☐ %ASBESTOS ☒ S/FT² ☐ OTHER ☐
5. Field Sheet Attached? YES ☐ NO ☒ If No Then Please Complete The Following:

SAMPLE ANALYSIS INFORMATION					ANALYSIS					MATRIX				
CLIENT ID NUMBER	AMA ID NUMBER	SAMPLE LOCATION	DATE	VOLUME (LITERS)	TEM	PCM	PLM	LEAD	OTHER	AIR	BLANK	BULK	WIPE	OTHER
351 32 A Tile + mastic							X							
↓ B ↓							↓							
33A ↓														
34A														
35A VT and VTA														
36A tile + mastic														
37A														
38A tile + mastic														
38B ↓														
39A														

REPORTING DATA:

1. Verbal Results To Whom? Name: Kris Hoiem Phone: 410-771-4950 Beeper:
2. Date Written Results Reqired ____ / ____ / ____

LABORATORY STAFF ONLY: (CUSTODY)

1. Date/Time RCVD: ____ / ____ / ____ @ ____ Via: ____ By (Print): ____ Sign: ____
2. Date/Time Analyzed: ____ / ____ / ____ @ ____ By (Print): ____ Sign: ____
3. Results Reported To: ____ Via: ____ Date: ____ / ____ / ____ Time: ____ Initials: ____

Comments:

APPENDIX C

LABORATORY CERTIFICATES OF ANALYSIS

Electron & Optical Microscopy Services

CERTIFICATE OF ANALYSIS

NY ELAP
AIHA

Client:	EA Engineering Science & Technology	**Job Name:**	District of Columbia Public Schools	**Chain Of Custody:**	62201
Address:	15 Loveton Circle	**Job Location:**	Marshall Elementary School - #351	**Date Analyzed:**	3/8/99
	Sparks, Maryland 21152	**Job Number:**	60957.31	**Person Submitting:**	Christina Vodak
		P.O. Number:	Not Provided		

Attention: Kris Hoiem

Summary of Polarized Light Microscopy

AMA Sample Number	Client Sample #	Total Asbestos	Chrysotile Percent	Amosite Percent	Crocidolite Percent	Other Asbestos Percent	Mineral Wool Percent	Fiberglass Percent	Organic Percent	Synthetic Percent	Other Percent	Particulate Percent	Sample Color	Analyst ID	Comments
9916014	351-01A	NAD	--	--	--	--	--	2	2	--	--	96	Off-White	AM	
9916015	351-01B	NAD	--	--	--	--	--	--	15	--	--	85	Brown	AM	
9916016	351-01C	NAD	--	--	--	--	--	--	15	--	--	85	Beige	AM	
9916017	351-02A	NAD	--	--	--	--	--	2	2	--	--	96	Beige	AM	
9916018	351-02B	NAD	--	--	--	--	--	--	--	5	--	95	White	AM	
9916019	351-02C	NAD	--	--	--	--	--	--	12	--	--	88	Beige	AM	
9916020	351-03A	NAD	--	--	--	--	--	--	20	--	--	80	Beige	AM	
9916021	351-03B	NAD	--	--	--	--	--	--	20	--	--	80	Beige	AM	
9916022	351-03C	NAD	--	--	--	--	--	--	10	--	--	90	Beige	AM	
9916023	351-04A	NAD	--	--	--	--	--	15	2	--	--	83	Off-White	AM	
9916024	351-04B	NAD	--	--	--	--	--	25	TR	--	--	75	Off-White	AM	
9916025	351-04C	NAD	--	--	--	--	--	30	TR	--	--	70	Off-White	AM	
9916026	351-05A	NAD	--	--	--	--	10	--	2	--	--	88	Gray	AM	
9916027	351-07A	NAD	--	--	--	--	10	--	15	--	--	75	Gray	AM	
9916028	351-07B	NAD	--	--	--	--	15	--	10	--	--	75	Gray	AM	
9916029	351-07C	NAD	--	--	--	--	15	--	10	--	--	75	Gray	AM	
9916030	351-08(a)A	NAD	--	--	--	--	2	--	5	--	3	90	Beige	AM	
9916031	351-08(a)B	NAD	--	--	--	--	--	--	40	--	--	60	Off-White	AM	

This report applies only to the sample, or samples, investigated and is not necessarily indicative of the quality or condition of apparently identical or similar products. As a mutual protection to clients, the public and these Laboratories, this report is submitted and accepted for the exclusive use of the client to whom it is addressed and upon the condition that it is not to be used, in whole or in part, in any advertising or publicity matter without prior written authorization from us. Sample types, locations and collection protocols are based upon the information provided by the persons submitting them and, unless collected by personnel of these Laboratories, we expressly disclaim any knowledge and liability for the accuracy and completeness of this information. Residual sample material will be discarded in accordance with the appropriate regulatory guidelines, unless otherwise requested by the client. NVLAP Accreditation applies only to polarized light microscopy of bulk samples and transmission electron microscopy of air samples.
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CERTIFICATE OF ANALYSIS

NY ELAP
AIHA

Client:	EA Engineering Science & Technology	**Job Name:**	District of Columbia Public Schools	**Chain Of Custody:**	62201
Address:	15 Loveton Circle	**Job Location:**	Marshall Elementary School - #351	**Date Analyzed:**	3/8/99
	Sparks, Maryland 21152	**Job Number:**	60957.31	**Person Submitting:**	Christina Vodak
		P.O. Number:	Not Provided		

Attention: Kris Hoiem

Summary of Polarized Light Microscopy

AMA Sample Number	Client Sample #	Total Asbestos	Chrysotile Percent	Amosite Percent	Crocidolite Percent	Other Asbestos Percent	Mineral Wool Percent	Fiberglass Percent	Organic Percent	Synthetic Percent	Other Percent	Particulate Percent	Sample Color	Analyst ID	Comments
9916032	351-08(b)A	NAD	--	--	--	--	--	--	2	--	2	96	Brown	AM	
9916033	351-08(b)B	NAD	--	--	--	--	--	--	TR	--	--	100	Brown	AM	
9916034	351-08(b)C	NAD	--	--	--	--	--	--	TR	--	--	100	Brown	AM	
9916035	351-09A	NAD	--	--	--	--	10	--	50	--	--	40	Gray	AM	
9916036	351-09B	NAD	--	--	--	--	10	--	50	--	--	40	Gray	AM	
9916037	351-09C	NAD	--	--	--	--	10	--	50	--	--	40	Gray	AM	
9916038	351-10A	NAD	--	--	--	--	--	--	2	--	--	98	Gray	AM	
9916039	351-10B	NAD	--	--	--	--	--	--	3	--	--	97	Gray	AM	
9916040	351-10C	NAD	--	--	--	--	--	--	TR	--	--	100	Off-White	AM	
9916041	351-11A	NAD	--	--	--	--	10	--	55	--	--	35	Gray	AM	
9916042	351-11B	NAD	--	--	--	--	10	--	50	--	--	40	Gray	AM	
9916043	351-11C	NAD	--	--	--	--	10	--	50	--	--	40	Beige	AM	
9916044	351-12A	NAD	--	--	--	--	TR	--	TR	--	--	100	Gray	AM	
9916045	351-13A (FT)	NAD	--	--	--	--	--	--	--	--	--	100	Off-White	AM	
9916046	351-13B (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Off-White	AM	
9916047	351-13C (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Off-White	AM	
9916048	351-13A (M)	2	2	--	--	--	--	--	2	--	--	96	Black	AM	
9916049	351-13B (M)	--	--	--	--	--	--	--	--	--	--	--		AM	Sample Not Analyzed

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Electron & Optical Microscopy Services

CERTIFICATE OF ANALYSIS

NY ELAP
AIHA

Client:	EA Engineering Science & Technology	**Job Name:**	District of Columbia Public Schools	**Chain Of Custody:**	62201
Address:	15 Loveton Circle	**Job Location:**	Marshall Elementary School - #351	**Date Analyzed:**	3/8/99
	Sparks, Maryland 21152	**Job Number:**	60957.31	**Person Submitting:**	Christina Vodak
		P.O. Number:	Not Provided		

Attention: Kris Hoiem

Summary of Polarized Light Microscopy

AMA Sample Number	Client Sample #	Total Asbestos	Chrysotile Percent	Amosite Percent	Crocidolite Percent	Other Asbestos Percent	Mineral Wool Percent	Fiberglass Percent	Organic Percent	Synthetic Percent	Other Percent	Particulate Percent	Sample Color	Analyst ID	Comments
9916050	351-13C (M)	--	--	--	--	--	--	--	--	--	--	--		AM	Sample Not Analyzed
9916051	351-14A	NAD	--	--	--	--	--	--	2	--	--	98	Brown	AM	
9916052	351-16A (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Off-White	AM	
9916053	351-16B (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Off-White	AM	
9916054	351-16C (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Off-White	AM	
9916055	351-16A (M)	NAD	--	--	--	--	--	--	2	--	--	98	Beige	AM	
9916056	351-16B (M)	2	2	--	--	--	--	--	TR	--	--	98	Beige	AM	
9916057	351-16C (M)	--	--	--	--	--	--	--	--	--	--	--		AM	Sample Not Analyzed
9916058	351-17A	NAD	--	--	--	--	15	--	2	--	--	83	Gray	AM	
9916059	351-18A	2	2	--	--	--	--	10	5	--	2	81	White	AM	
9916060	351-18B	--	--	--	--	--	--	--	--	--	--	--		AM	Sample Not Analyzed
9916061	351-19A	35	35	--	--	--	10	--	--	--	--	55	Gray	AM	
9916062	351-20A	NAD	--	--	--	--	--	--	2	-	--	98	Brown	AM	
9916063	351-20B	NAD	--	--	--	--	--	--	TR	--	--	100	Brown	AM	
9916064	351-20C	NAD	--	--	--	--	--	--	TR	--	--	100	Brown	AM	
9916065	351-21A	NAD	--	--	--	--	10	--	30	--	--	60	Gray	AM	
9916066	351-21B	NAD	--	--	--	--	10	--	35	--	--	55	Gray	AM	
9916067	351-22A	NAD	--	--	--	--	--	--	TR	--	--	100	Brown	AM	

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Address:	15 Loveton Circle	**Job Location:**	Marshall Elementary School - #351	**Date Analyzed:**	3/8/99
	Sparks, Maryland 21152	**Job Number:**	60957.31	**Person Submitting:**	Christina Vodak
		P.O. Number:	Not Provided		

Attention: Kris Hoiem

Summary of Polarized Light Microscopy

AMA Sample Number	Client Sample #	Total Asbestos	Chrysotile Percent	Amosite Percent	Crocidolite Percent	Other Asbestos Percent	Mineral Wool Percent	Fiberglass Percent	Organic Percent	Synthetic Percent	Other Percent	Particulate Percent	Sample Color	Analyst ID	Comments
9916068	351-22B	2	2	--	--	--	--	--	TR	--	--	98	Brown	AM	
9916069	351-26A	NAD	--	--	--	--	10	--	40	--	--	50	Gray	AM	
9916070	351-26B	NAD	--	--	--	--	10	--	50	--	--	40	Gray	AM	
9916071	351-27A (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Red	AM	
9916072	351-27A (M)	2	2	--	--	--	--	--	2	--	--	96	Black	AM	
9916073	351-28A	NAD	--	--	--	--	--	--	2	--	--	98	Brown	AM	
9916074	351-28B	NAD	--	--	--	--	--	--	3	--	--	97	Beige	AM	
9916075	351-28C	NAD	--	--	--	--	--	--	TR	--	--	100	Beige	AM	
9916076	351-29A	NAD	--	--	--	--	--	--	2	--	2	96	Gray	AM	
9916077	351-29B	NAD	--	--	--	--	--	--	TR	--	2	98	Gray	AM	
9916078	351-29C	NAD	--	--	--	--	--	--	TR	--	TR	100	Brown	AM	
9916079	351-30A	NAD	--	--	--	--	15	--	2	--	--	83	Off-White	AM	
9916080	351-30B	NAD	--	--	--	--	15	--	2	--	--	83	Gray	AM	
9916081	351-30C	NAD	--	--	--	--	15	--	--	--	--	85	Gray	AM	
9916082	351-31A	NAD	--	--	--	--	15	--	TR	--	--	85	Gray	AM	
9916083	351-31B	NAD	--	--	--	--	15	--	TR	--	--	85	Gray	AM	
9916084	351-31C	NAD	--	--	--	--	15	--	TR	--	--	85	Gray	AM	
9916085	351-32A (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Beige	AM	

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9916086	351-32B (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Beige	AM	
9916087	351-32A (M)	NAD	--	--	--	--	--	--	5	TR	--	95	Brown	AM	
9916088	351-32B (M)	NAD	--	--	--	--	--	--	2	--	--	98	Brown	AM	
9916089	351-33A (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Off-White	AM	
9916090	351-33A (M)	2	2	--	--	--	--	--	--	--	--	98	Beige	AM	
9916091	351-34A	NAD	--	--	--	--	20	--	TR	--	--	80	Gray	AM	
9916092	351-35A (VT)	NAD	--	--	--	--	--	--	TR	--	--	100	Blue	AM	
9916093	351-35A (VTA)	2	2	--	--	--	--	--	--	--	--	98	Black	AM	
9916094	351-36A (FT)	NAD	--	--	--	--	--	--	TR	--	--	100	Black	AM	
9916095	351-36A (M)	NAD	--	--	--	--	--	--	TR	--	--	100	Brown	AM	
9916096	351-37A	NAD	--	--	--	--	--	--	2	--	--	98	Off-White	AM	
9916097	351-38A (FT)	NAD	--	--	--	--	--	--	--	--	--	100	White	AM	
9916098	351-38B (FT)	NAD	--	--	--	--	--	--	--	--	--	100	White	AM	
9916099	351-38A (M)	TR	TR	--	--	--	--	--	2	--	--	98	Black	AM	
9916100	351-38B (M)	NAD	--	--	--	--	--	--	TR	--	--	100	Brown	AM	
9916101	351-39A	3	3	--	--	--	--	--	3	--	--	94	Brown	AM	

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		P.O. Number:	Not Provided		

Attention: Kris Hoiem

Summary of Polarized Light Microscopy

AMA Sample Number	Client Sample #	Total Asbestos	Chrysotile Percent	Amosite Percent	Crocidolite Percent	Other Asbestos Percent	Mineral Wool Percent	Fiberglass Percent	Organic Percent	Synthetic Percent	Other Percent	Particulate Percent	Sample Color	Analyst ID	Comments

The following footnotes only apply to those samples which the total asbestos result is flagged with a note number.

1 TEM RECOMMENDATION - Please note, due to resolution limitations with optical microscopy and/or interference from matrix components of this sample, results which are reported via PLM as negative or trace (<1%) for asbestos may contain a significant quantity of asbestos. It is recommended that the additional analytical technique of TEM be used to check for asbestos fibers below the resolution limits of optical microscopy.

2 MATRIX REDUCTION RECOMMENDATION - Please note, due to interference from the matrix components of this sample, results which are reported via PLM as negative or trace (<1%) for asbestos may contain a significant quantity of asbestos which is obscured from view. It is recommended that the additional preparation technique of gravimetric reduction be performed on this sample to minimize the obscuring effects of matrix components, followed by reanalysis by PLM and/or TEM.

Analysis Method - EPA/600/R-93/116 dated July 1993

NAD = "No Asbestos Detected" TR = "Trace equals less than 1% of this component"

Adam Marx

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APPENDIX D

ASBESTOS INSPECTOR CERTIFICATES

ManTech Environmental Corporation
1901 Research Blvd, Suite 240 • Rockville, MD 20850
Phone: (301) 315-0080 • FAX: (301) 315-8188

This is to certify that

CHRISTINA VODAK

has successfully completed an EPA approved course and examination for

AHERA Building Inspector and Management Planner Refresher—8 Hours

and has completed training for accreditation under TSCA Title II

June 15, 1998

Location of Training:	Rockville, MD
Certificate Number:	98-06-15-07
Certificate Expires:	June 15, 1999
Exam Date:	June 15, 1998

Rachel Riley
Instructor: Rachel Riley, CET

Rachel Riley
Course Director: Rachel M. Riley, CET

This Course Meets the Maryland State Training Requirements (ManTech Approval #21-17-10).

A ManTech International Corporation

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AEROSOL MONITORING & ANALYSIS, INC.

THIS IS TO CERTIFY THAT

CHRISTINA M. VODAK

**HAS MET THE ATTENDANCE REQUIREMENTS
AND SUCCESSFULLY COMPLETED
THE COURSE ENTITLED**

8 HR EPA AHERA SUPERVISOR/COMPETENT PERSON RECERTIFICATION
FOR ACCREDITATION UNDER TSCA TITLE II

July 17, 1997		**July 17, 1998**
COURSE DATE		**EXPIRATION DATE**
E. RUSH BARNETT	BCSPOA E. RUSH BARNETT 7912 CERTIFIED SAFETY PROFESSIONAL	**032356**
COURSE DIRECTOR		**CERTIFICATE NO.**

1331 Ashton Road ✖ *P.O. Box 646* ✖ *Hanover, MD 21076* ✖ *410-684-3327* ✖ *FAX: 410-684-3724*

AEROSOL MONITORING & ANALYSIS, INC.

THIS IS TO CERTIFY THAT

CHRISTINA M. VODAK

HAS MET THE ATTENDANCE REQUIREMENTS
AND SUCCESSFULLY COMPLETED
THE COURSE ENTITLED

8 HR EPA AHERA INSPECTOR MANAGEMENT PLANNER RECERTIFICATION
FOR ACCREDITATION UNDER TSCA TITLE II

July 18, 1997		**July 18, 1998**
COURSE DATE		**EXPIRATION DATE**
E. RUSH BARNETT E. Rush Barnett	BCSPOA E. RUSH BARNETT 7912 CERTIFIED SAFETY PROFESSIONAL	**032456**
COURSE DIRECTOR		**CERTIFICATE NO.**

1331 Ashton Road ✖ *P.O. Box 646* ✖ *Hanover, MD 21076* ✖ *410-684-3327* ✖ *FAX: 410-684-3724*

AEROSOL MONITORING & ANALYSIS, INC.

THIS IS TO CERTIFY THAT

CHRISTINA M. VODAK

**HAS MET THE ATTENDANCE REQUIREMENTS
AND SUCCESSFULLY COMPLETED
THE COURSE ENTITLED**

8 HR EPA AHERA SUPERVISOR/COMPETENT PERSON RECERTIFICATION
FOR ACCREDITATION UNDER TSCA TITLE II

July 17, 1997		**July 17, 1998**
COURSE DATE		**EXPIRATION DATE**
E. RUSH BARNETT	BCSPOA E. RUSH BARNETT 7912 CERTIFIED SAFETY PROFESSIONAL	**032356**
COURSE DIRECTOR		**CERTIFICATE NO.**

1331 Ashton Road ✖ *P.O. Box 646* ✖ *Hanover, MD 21076* ✖ *410-684-3327* ✖ *FAX: 410-684-3724*

CERTIFICATE NUMBER: [illegible]

CHRISTINA VODAK

HAS MET THE ATTENDANCE REQUIREMENTS AND SUCCESSFULLY COMPLETED THE EXAM IN THE ASBESTOS TRAINING COURSE ENTITLED

8-HR EPA AHERA INSPECTOR/MANAGEMENT PLANNER RECERTIFICATION

FOR ACCREDITATION UNDER TSCA TITLE II.

AEROSOL MONITORING & ANALYSIS, INC.	JULY 29, 1996
TRAINING PROVIDER	COURSE DATE(S)
1340 ASHTON ROAD	JULY 29, 1997 / JULY 29, 1996
STREET	EXPIRATION DATE / EXAMINATION DATE
HANOVER, MARYLAND 21076	21-02-02 IMP/R
CITY, STATE, ZIP	COURSE APPROVAL NUMBER
(410) 684-3327	Christina M Vodak
TELEPHONE NUMBER	STUDENT'S SIGNATURE

E. RUSH BARNETT

COURSE DIRECTOR (NAME AND SIGNATURE)

BCSPOA E. RUSH BARNETT 7912 CERTIFIED SAFETY PROFESSIONAL

STATE OF MARYLAND

FOR MORE INFORMATION CALL MD DEPT. OF THE ENVIRONMENT (410) 631-3801

ORIGINAL STATE SEAL IS BLUE

CERTIFICATE NUMBER: 020934

CHRISTINA VODAK

HAS MET THE ATTENDANCE REQUIREMENTS AND SUCCESSFULLY COMPLETED THE EXAM IN THE ASBESTOS TRAINING COURSE ENTITLED

EPA AHERA INSPECTOR/MANAGEMENT PLANNER

FOR ACCREDITATION UNDER TSCA TITLE II.

AEROSOL MONITORING & ANALYSIS, INC.
TRAINING PROVIDER

1340 ASHTON ROAD
STREET

HANOVER, MARYLAND 21076
CITY, STATE, ZIP

(410) 684-3327
TELEPHONE NUMBER

AUGUST 14, 1995 - AUGUST 18, 1995 .
COURSE DATE(S)

~~AUGUST 18, 1996~~ ~~AUGUST 18, 1995~~
EXPIRATION DATE EXAMINATION DATE

21-02-02 IMP
COURSE APPROVAL NUMBER

Christina Vodak
STUDENT'S SIGNATURE

E. RUSH BARNETT E. Rush Barnett
COURSE DIRECTOR (NAME AND SIGNATURE)

BCSPOA E. RUSH BARNETT 912

STATE OF MARYLAND

FOR MORE INFORMATION CALL MD DEPT. OF THE ENVIRONMENT (410) 631-3801

ORIGINAL STATE SEAL IS BLUE

APPENDIX E

LABORATORY ACCREDITATION (NVLAP)

United States Department of Commerce
National Institute of Standards and Technology

NVLAP®

ISO/IEC GUIDE 25:1990
ISO 9002:1987

Certificate of Accreditation

AMA ANALYTICAL SERVICES, INC.

LANHAM, MD

is recognized under the National Voluntary Laboratory Accreditation Program for satisfactory compliance with criteria established in Title 15, Part 285 Code of Federal Regulations. These criteria encompass the requirements of ISO/IEC Guide 25 and the relevant requirements of ISO 9002 (ANSI/ASQC Q92-1987) as suppliers of calibration or test results. Accreditation is awarded for specific services, listed on the Scope of Accreditation for:

BULK ASBESTOS FIBER ANALYSIS

June 30, 1999

Effective through

For the National Institute of Standards and Technology

NVLAP Lab Code: 101143-0

NVLAP-01C (11-95)

nerce
chnology

NVLAP®

on

INC.

am for satisfactory compliance with
criteria encompass the requirements
l/ASQC Q92-1987) as suppliers of
d on the Scope of Accreditation for:

LYSIS

ational Institute of Standards and Technology

NVLAP Lab Code: 101143-0

The American Industrial Hygiene Association

is proud to acknowledge that

AMA Analytical Services, Inc.

Lanham, MD

Laboratory ID # 8863

has fulfilled the requirements for Industrial Hygiene Laboratory Accreditation and has earned distinguished recognition as an

AIHA IH Accredited Laboratory

Originally Accredited March 1, 1984, current certificate effective March 1, 1996 until March 1, 1999, subject to continued compliance with AIHA accreditation criteria.

President
American Industrial Hygiene Association

January 22, 1996
Date Prepared

Chair
Analytical Accreditation Board

244
Certificate Number

Chairman
IH Laboratory Accreditation Committee

THE AMERICAN INDUSTRIAL HYGIENE ASSOCIATION

is proud to acknowledge that

AMA Analytical Services, Inc.
Lanham, MD
Laboratory ID# 8863

has fulfilled the requirements for the Environmental Lead Laboratory Accreditation Program and has earned distinguished recognition as an

AIHA ELLAP ACCREDITED LABORATORY

October 28, 1996 through October 28, 1999

In the following matrices: Paint Soil Dust

This program is recognized by the EPA as meeting the requirements of the National Lead Laboratory Accreditation Program established under Title X of the Residential Lead-Based Paint Hazard Reduction Act of 1992.

Zack Mansdorf

Zack Mansdorf, PhD., CIH, CSP
President, American Industrial Hygiene Association

Lisa A Constantine

Lisa A. Constantine, CIH
Chair, Environmental Lead Laboratory Accreditation Committee

Donald J. Hart

Don Hart, Ph.D., CIH
Chair, Analytical Accreditation Board

DOH-3317 (3/97)

-16-99 13:33

NEW YORK STATE DEPARTMENT OF HEALTH

BARBARA A. DEBUONO, M.D., M.P.H. Commissioner

Expires 12:01 AM April 1, 1999
ISSUED April 1, 1998
REVISED June 26, 1998

CERTIFICATE OF APPROVAL FOR LABORATORY SERVICE

Issued in accordance with and pursuant to section 502 Public Health Law of New York State

ID No.: 10920

Director: MR. G.EDWARD CARNEY
Lab Name: AMA ANALYTICAL SERVICES INC
Address : 4485 FORBES BLVD
LANHAM MD 20706

is hereby APPROVED as an Environmental Laboratory for the category

ENVIRONMENTAL ANALYSES/AIR AND EMISSIONS

All approved subcategories and/or analytes are listed below:

Air :

Wadsworth Center

ial No.: 102891

erty of the New York State Department of Health. Valid only at the address shown.
t be conspicuously posted. Valid certificate has a red serial number.

-3317 (3/97)

NEW YORK STATE DEPARTMENT OF HEALTH

BARBARA A. DEBUONO, M.D., M.P.H. Commissioner

Expires 12:01 AM April 1, 1999
ISSUED April 1, 1998
REVISED June 26, 1998

CERTIFICATE OF APPROVAL FOR LABORATORY SERVICE

Issued in accordance with and pursuant to section 502 Public Health Law of New York State

b ID No.: 10920

Director: MR. G.EDWARD CARNEY
Lab Name: AMA ANALYTICAL SERVICES INC
Address : 4485 FORBES BLVD
LANHAM MD 20706

is hereby APPROVED as an Environmental Laboratory for the category

ENVIRONMENTAL ANALYSES/ POTABLE WATER

All approved subcategories and/or analytes are listed below:

ter Metals I :
Total
otal

D.V. Miscellaneous :
Asbestos

rial No.: 102890

Wadsworth Center

perty of the New York State Department of Health. Valid only at the address shown.
st be conspicuously posted. Valid certificate has a red serial number.

H-3317 (3/97)

№ 712

STATE OF MARYLAND

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
LABORATORIES ADMINISTRATION

Certifies That

AMA ANALYTICAL SERVICES, INC.
4475 Forbes Boulevard, Lanham, Maryland 20706

having duly met the requirements of the

Regulations Governing Laboratory Certification
And Standards Of Performance In Accordance With
The Annotated Code of Maryland,
is hereby approved as a

State Certified Water Quality Laboratory

To perform the analyses indicated on the Annual Certified Parameter List,
which must accompany this certificate.

Certification # 262

Date Issued September 30, 1998

Expiration Date September 30, 1999
(Not Transferable)

J. Melvin Joseph
Director, Laboratories Administration

This certification is subject to unannounced laboratory inspections

CONSPICUOUSLY DISPLAY IN THE LABORATORY WITH THE ANNUAL CERTIFIED PARAMETER LIST

State of Maryland

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
LABORATORIES ADMINISTRATION

This is to certify that the following personnel of the

AMA ANALYTICAL SERVICES, INC.
Laboratory

4475 Forbes Boulevard, Lanham, Maryland 20706
Address

have been approved to perform the indicated procedures on Drinking Water
in connection with interstate regulations, and/or Maryland Law.

Name	Tests approved
Mr. G. Edward Carney Laboratory Director & Laboratory Manager	* Trace Metals Group 1 -- Lead Copper
Mr. Yassin Jeilani	

* Denotes Provisional Certification

This certificate expires Sept.30, 1999 unless sooner withdrawn.
Certification No. 262
Date Issued: September 30, 1998

Director, Laboratories Administration

DHMH-00155 6/94

POST IN A CONSPICUOUS PLACE

Commonwealth of Virginia
Department of General Services
Division of Consolidated Laboratory Services

Certifies That

AMA ANALYTICAL SERVICES, INC.

Having Duly Met the Requirements of the
Regulations for the Certification of Laboratories Analyzing Drinking Water
Is hereby Approved as a

Certified Drinking Water Laboratory

To Perform the Analyses as indicated on the Annual Certified Parameter List
Which must accompany this to be valid.

Laboratory ID Number 00006 Effective July 1998 Through June 1999

Virginia Laboratory Officer
Safe Drinking Water Program

This certification is subject to unannounced laboratory inspections.
Conspicuously display in the laboratory with the annual certified parameter list.

This laboratory has met the minimum requirements for certification to analyze drinking water.
THIS CERTIFICATION DOES NOT GUARANTEE ACCURATE RESULTS.

Certificate Not Transferable

Surrender upon Revocatio

Commonwealth of Virginia
Department of General Services
Division of Consolidated Laboratory Services

Annual Certified Parameter List
July 1, 1998 - June 30, 1999

AMA Analytical Services, Inc.
4485 Forbes Boulevard
Lanham, MD 20706

ID Number 00006

Inorganic Chemical:

A:	Asbestos
Trace Metal 1:	Lead, Copper

James L. Pearson, Dr. P.H., BCLD
Virginia Laboratory Officer
Safe Drinking Water Program

*** Denotes Provisional Certification**

DEPARTMENT OF PROFESSIONAL AND OCCUPATIONAL REGULATION
COMMONWEALTH OF VIRGINIA
3600 West Broad Street, Richmond, VA 23230
Telephone: 1 (804) 367-8500

EXPIRES ON
01-31-2000

NUMBER
3333 000067

VIRGINIA ASBESTOS LICENSE

ASBESTOS ANALYTICAL LABORATORY LICENSE

TEM
PLM
PCM

AMA ANALYTICAL SERVICES INC
4475 FORBES BLVD

LANHAM, MD 20706

Jack E. Kotvas, Director

ALTERATION OF THIS DOCUMENT, USE AFTER EXPIRATION, OR USE BY PERSONS OR FIRMS OTHER THAN THOSE NAMED MAY RESULT IN CRIMINAL PROSECUTION UNDER THE CODE OF VIRGINIA

(SEE REVERSE SIDE FOR NAME AND/OR ADDRESS CHANGE)

(POCKET CARD)

COMMONWEALTH OF VIRGINIA
VIRGINIA ASBESTOS LICENSE
ASBESTOS ANALYTICAL LABORATORY
NUMBER: 3333 000067 EXPIRES: 01-31-2000
TEM PLM PCM

AMA ANALYTICAL SERVICES INC
4475 FORBES BLVD

LANHAM MD 20706

(FOLD)

(DETACH HERE)

DEPARTMENT OF PROFESSIONAL AND OCCUPATIONAL REGULATION
3600 West Broad Street Richmond, Virginia 23230

LICENSE

C I T Y O F P H I L A D E L P H I A
DEPARTMENT OF LICENSES AND INSPECTIONS

LICENSE ISSUANCE UNIT
1401 JOHN F. KENNEDY BLVD.
PHILADELPHIA, PA 19102
MU6-2490

AMA ANALYTICAL SERVICES INC
4435 FORBES BLV
LANHAM MD 20706-0000

DEPARTMENT OF LICENSES AND INSPECTIONS

3625 000013 ANALYTICAL TESTING LAB
AMA ANALYTICAL SERVICES INC
PCM,TEM,PLM

06/25/1998

DISPLAY PROMINENTLY
IF REQUIRED BY LAW

THIS LICENSE IS GRANTED TO THE PERSON AND LOCATION FOR THE PURPOSE STATED ABOVE. IT IS SUBJECT TO IMMEDIATE CANCELLATION BY THIS DEPARTMENT FOR VIOLATIONS OF CITY ORDINANCES AND REGULATIONS.

LICENSE CODE	LICENSE NUMBER	BUSINESS TAX	EXPIRES LAST DAY OF	CURRENT FEE DUE	DELINQ FEE DUE	PENALTY DUE
3625	000013	6224877	04/1999	0.00	0.00	0.00

PAID THIS AMOUNT: 300.00

ON DATE: 06/25/1998

LICENSE