

**5124**

**AMENDED NOTIFICATION OF ASBESTOS  
REMOVAL: FEMP-94-002**

**01/28/94**

**C:RP(RTS):94-0014  
FERMCO/HAMILTON CO  
3  
LETTER  
OU3**



Restoration Management Corporation

P.O. Box 398704 Cincinnati, Ohio 45239-8704 (513) 738-6200

January 28, 1994

U. S. Department of Energy  
Fernald Environmental Management Project  
Letter No. C:RP(RTS):94-0014

Mr. Bradley Miller  
Environmental Scientist  
Hamilton County Department  
of Environmental Services  
Air Quality Management  
1632 Central Parkway  
Cincinnati, OH 45210

Dear Mr. Miller:

**AMENDED NOTIFICATION OF ASBESTOS REMOVAL: FEMP-94-002**

The enclosed Asbestos Demolition/Renovation Notification has been amended in the following manner:

Old: Start:	<u>02/14/94</u>	End:	<u>12/01/94</u>
New: Start:	<u>02/28/94</u>	End:	<u>07/14/94</u>

If you have any question concerning this removal, please contact Ervin Fisher, of my staff, at (513) 738-6053.

Sincerely,

A handwritten signature in cursive script, appearing to read "Stephen M. Beckman".

Stephen M. Beckman  
Manager  
Regulatory Technical Support

SMB:PBS:mhv  
Attachment

cc: L. A. Fisher, FERMCO  
R. P. McCullough, FERMCO  
P. B. Spotts, FERMCO, w/o attachment  
AR Coordinator  
RTS Files  
File Record Storage Copy 108.6

**OHIO ENVIRONMENTAL PROTECTION AGENCY  
NOTIFICATION OF DEMOLITION AND RENOVATION**

Operator Project # FEMP-94-002A	Postmark	Date received	Notification #
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I. TYPE OF NOTIFICATION:      Original      Revised       Canceled

II. FACILITY INFORMATION:

Owner Name: U. S. Department of Energy      Telephone: (513) 648-3148  
 Address: DOE Field Office, Fernald Post Office Box 398705  
 City: Cincinnati      State: OH      Zip-code: 45239

Removal Contractor: Project Devel. Group Inc.      License #: 1033  
 Address: 300 Oxford Dr.  
 City: Monroeville      State: PA      Zip-code: 15146  
 Contact: Larry Horvat      Telephone: (412) 856-2200

Other Operator: (demolition/general) Fernald Environmental Restoration Corp  
 Address: FEMP, P.O. Box 398704  
 City: Cincinnati      State OH      Zip-code 45239  
 Contact: Ervin Fisher      Telephone: (513) 738-6053

III. TYPE OF OPERATION: (D= Demo    O=Ordered Demo    R= Renovation    E=Emer. Reno) | D

IV. IS ASBESTOS PRESENT? (check one)      YES    X    NO

V. FACILITY DESCRIPTION (Include building name, number and floor number)

Building Name: Fernald Environmental Management Project  
 Address: 7400 Willey Rd.  
 City: Fernald      State: OHIO      County: Hamilton  
 Site Location (specific): CERCLA dismantling of Building 7  
 Facility Size (Square feet) 6 Million    # of Floors:           Age in years: 39  
 Present Use: Site Remediation      Prior Use: Uranium Products Mfg.

VI. PROCEDURE, AND ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:  
Material assumed to be asbestos based on prior testing of similar material.

VII. APPROXIMATE AMOUNT OF ASBESTOS MATERIALS

	RACM		Nonfriable ACM		Unit of measure	
	To Be Removed		Not to be Removed Cat I	Cat II	Feet	Meters
Pipe					Linear	
Surface Area	5500				Square	X
Volume RACM off Facility Components					Cubic	

VIII. DATES FOR ASBESTOS REMOVAL (MM/DD/YY)      Start: 02/28/94      End: 07/14/94  
 Hours of Operation: 6:30 A.M. to 5:00 P.M.  
 Days of the Week: |Mon.| X|Tue.| X|Wed.| X |Thur.| X |Fri.| |Sat.| |Sun.| |

IX. SCHEDULE DATES DEMOLITION OR RENOVATION: Start: 02/16/94      End: 07/14/94

OHIO ENVIRONMENTAL PROTECTION AGENCY

Asbestos Demolition and Renovation Notification Form Page 2

FEMP-94-002A

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHODS(S) TO BE USED:
Removal 5500 Sq. Ft. of friable transite and approximately 64,700 Sq. Ft. of non-friable transite. Manual Removal.

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: Transite panels will be wetted down and removed intact to the extent possible. Friable panels will be locked down. Panels will be wrapped in poly containers.

XII. WASTE TRANSPORTER #1
Name: Not presently contracted
Address:
City: State: Zip-code:
Contact Person: Telephone:

WASTE TRANSPORTER #2
Name:
Address:
City: State: Zip-code:
Contact Person: Telephone:

XIII. WASTE DISPOSAL
Name: Nevada Test Site
Address: P.O. Box 98518
City: Las Vegas State: NV Zip-code: 89193-8518
Contact Person: Telephone:

XIV. EMERGENCY DEMOLITION
Not applicable

XV. EMERGENCY RENOVATION
Not applicable

XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLLED, PULVERIZED OR REDUCED TO POWDER.
All asbestos related work will stop until proper notification and controls are in place.

XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF NESHAP (40 CFR PART 61, SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE DURING NORMAL BUSINESS HOURS.
Not applicable until 11/20/91
Signature: [Signature] Date: 01/28/94 Type Name and Title: P.B. Spotts, Mgr. AWQS

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS TRUE, ACCURATE AND COMPLETE:
Signature: [Signature] Date: 01/28/94 Type Name and Title: P.B. Spotts, Mgr. AWQS