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R-030-103.190

AMENDED NOTIFICATION OF ASBESTOS REMOVAL: FEMP-94-009C

04/25/95

C:EC(RTS):95-0036
FERMCO HAMILTON COUNTY
3
LETTER



Restoration Management Corporation

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

April 25, 1995

U. S. Department of Energy
Fernald Environmental Management Project
Letter No. C:EC(RTS):95-0036

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

Dear Mr. Miller:

AMENDED NOTIFICATION OF ASBESTOS REMOVAL: FEMP-94-009C

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

Old Waste Transporter: "Not presently contracted"
New Waste Transporter: Rumpke Container Service

Old Disposal Site: Nevada Test Site
New Disposal Site: Rumpke Sanitary Landfill

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

Sincerely,

A handwritten signature in black ink that reads "Stephen M. Beckman". The signature is written in a cursive style and is positioned above the typed name.

Stephen M. Beckman
Manager
Regulatory Technical Support

SMB:EF:mhv
Attachment

c: D. T. Edwards, FERMCO/MS44
L. A. Fisher, FERMCO/MS51
P. B. Spotts, FERMCO/MS65-2, w/o attachment
D. J. Tashjain, FERMCO/MS51-1
AR Coordinator/MS78
File Record Storage Copy 108.6
RTS Files

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

Operator Project # FEMP-94-009C	Postmark	Date received	Notification #
I. TYPE OF NOTIFICATION:		Original	Revised <input checked="" type="checkbox"/> Canceled
II. FACILITY INFORMATION:			
Owner Name: <u>U. S. Department of Energy</u>		Telephone: <u>(513) 648-3148</u>	
Address: <u>DOE Field Office, Fernald Post Office Box 538705</u>			
City: <u>Cincinnati</u>		State: <u>OH</u>	Zip-code: <u>45253</u>
Removal Contractor: <u>Fernald Env. Rest. Mgt. Corp.</u>		License #: _____	
Address: <u>FEMP, P.O. Box 538704</u>			
City: <u>Cincinnati</u>		State: <u>OH</u>	Zip-code: <u>45253</u>
Contact: <u>Ervin Fisher</u>		Telephone: <u>(513) 738-6053</u>	
Other Operator: (demolition/general) <u>Fernald Environmental Restoration Corp</u>			
Address: <u>FEMP, P.O. Box 538704</u>			
City: <u>Cincinnati</u>		State: <u>OH</u>	Zip-code: <u>45253</u>
Contact: <u>Ervin Fisher</u>		Telephone: <u>(513) 738-6053</u>	
III. TYPE OF OPERATION: (D= Demo O=Ordered Demo R= Renovation E=Emer. Reno)			R
IV. IS ASBESTOS PRESENT? (check one)		YES	X
		NO	
V. FACILITY DESCRIPTION (Include building name, number and floor number)			
Building Name: <u>Fernald Environmental Management Project</u>			
Address: <u>7400 Willey Rd.</u>			
City: <u>Fernald</u>		State: <u>OHIO</u>	County: <u>Hamilton</u>
Site Location (specific): <u>Water Treatment Building Bldg 20B</u>			
Facility Size (Square feet) <u>6 Million</u>		# of Floors: _____	Age in years: <u>39</u>
Present Use: <u>Site Remediation</u>		Prior Use: <u>Uranium Products Mfg.</u>	
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 To Be Removed	Nonfriable ACM Not to be Removed Cat I Cat II	Unit of measure Feet Meters
Pipe	1270		Linear <input checked="" type="checkbox"/>
Surface Area			Square
Volume RACM off Facility Components			Cubic
VIII. DATES FOR ASBESTOS REMOVAL (MM/DD/YY) Start: <u>11/02/94</u> End: <u>03/03/95</u>			
Hours of Operation: <u>Shift work, (24 hours)</u>			
Days of the Week: <input checked="" type="checkbox"/> Mon. <input checked="" type="checkbox"/> Tue. <input checked="" type="checkbox"/> Wed. <input checked="" type="checkbox"/> Thur. <input checked="" type="checkbox"/> Fri. <input type="checkbox"/> Sat. <input type="checkbox"/> Sun.			
IX. SCHEDULE DATES DEMOLITION OR RENOVATION: Start: <u>11/02/94</u> End: <u>03/03/95</u>			

OHIO ENVIRONMENTAL PROTECTION AGENCY

Asbestos Demolition and Renovation Notification Form Page 2

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X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHODS(S) TO BE USED:
Manual Removal.

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: Glove-bag w/negative air or full enclosure as required, HEPA vacuum, adequate wetting with amended water, material kept wet until collected, complete cleaning and lockdown, leak-tight containers.

XII. WASTE TRANSPORTER #1

Name: Rumpke Container Service
 Address: 10795 Hughes Rd.
 City: Cincinnati State: OH Zip-code: 45251
 Contact Person: Joel R. Bradle Telephone: 851-0122

WASTE TRANSPORTER #2

Name: _____
 Address: _____
 City: _____ State: _____ Zip-code: _____
 Contact Person: _____ Telephone: _____

XIII. WASTE DISPOSAL

Name: Rumpke Sanitary Landfill
 Address: 10795 Hughes Rd
 City: Cincinnati State: OH Zip-code: 45251
 Contact Person: Joel R. Bradle Telephone: 851-0122

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 CRUMBLED, 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

Ervin Fisher 04/25/95 Ervin Fisher Reg/Tech Specialist
 Signature Date Type Name and Title

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS TRUE, ACCURATE AND COMPLETE:

Ervin Fisher 04/25/95 Ervin Fisher Reg/Tech Specialist
 Signature Date Type Name and Title