EXCELTECH

ASBESTOS SURVEY

FOR

FLOOD CONTROL DISTRICT
OF
MARICOPA COUNTY

ARIZONA CANAL PROJECT
PHOENIX AND
PARADISE VALLEY, ARIZONA

EXCELTECH PROJECT NO. 5-50036-51

Arizona Regional Office 1520 W. Mineral Road, Suite A-1, Tempe, AZ 85283 (602) 345-6640 Fax: (602) 345-8149

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	ENGR	3	RC

REMARKS

EXCELTECH

December 10, 1990

Flood Control District of Maricopa County
3335 West Durango Street
Phoenix, Arizona 85009

Attention: Catesby W. Moore

Subject: Final Report for the Asbestos Abatement Project; FCD Contract No. 90-32
ET Project No. 5-50036-51

Property of
Flood Control District of MC Library
Please Return to
2801 W. Durango
Phoenix, AZ 85009

Dear Ms. Moore:

Along with this letter please find two copies of our final report for the Asbestos Abatement Project under the FCD Contract No. 90-32. The report includes the descriptions of each site, results of the air monitoring and bulk samples, site maps, and copies of the laboratory analyses and chain-of-custody forms.

ET appreciates the opportunity to have performed this work for the Flood Control District of Maricopa County . Please call if you have any questions regarding the report, or require further assistance.

Sincerely,
Exceltech

Janice Petticrew

Janice Petticrew
Industrial Hygienist

Marilyn Moots

Marilyn Moots
Manager of Assessments, Compliance, & Training

jp
Enclosures

EXCELTECH

ASBESTOS SURVEY

FOR

FLOOD CONTROL DISTRICT
OF
MARICOPA COUNTY

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ARIZONA CANAL PROJECT
PHOENIX AND
PARADISE VALLEY, ARIZONA

EXCELTECH PROJECT NO. 5-50036-51

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EXECUTIVE SUMMARY

The Flood Control District of Maricopa County (FCDMC) has scheduled 11 structures for demolition. These 11 structures were previously identified as containing asbestos containing materials (ACMs). Prior to demolition, the asbestos containing materials within each structure were removed. The 11 structures, included in the abatement activities, were located at various locations in Phoenix and Paradise Valley, Arizona. The asbestos abatement contractor was ASNET, of Phoenix, Arizona. The FCDMC retained Exceltech, Inc. (ET) to serve as the project manager for the asbestos abatement project.

The abatement activities involved the removal and proper disposal of the asbestos containing materials (ACM) located within each structure. Final clearance air sampling and a final clearance visual inspection were conducted at the conclusion of each abatement activity, inside each containment, and prior to the dismantling of each containment. The abatement activities commenced on September 20, 1990, and were completed on October 31, 1990.

During the period of September 20 to October 31, 1990, Exceltech, Inc. (ET) supervised the work performed by ASNET for the abatement of asbestos containing materials (ACMs) within the 11 structures. The results of the final clearance air sampling and the final clearance visual inspections indicate that the abatement activities were completed and that the asbestos health hazard associated with the 11 structures was minimized. Each of the containments passed the final air clearance requirement of less than 0.01 fibers per cubic centimeter (f/cc) and passed the final visual clearance inspection.

Drafted By:

Janice Petticrew

Janice Petticrew
Industrial Hygienist

Reviewed By:

Marilyn Moots

Marilyn Moots
Manager of Assessment, Compliance, and Training

1.0 INTRODUCTION AND PURPOSE

The Flood Control District of Maricopa County (FCDMC) has scheduled 11 structures for demolition. These 11 structures were previously identified as containing asbestos containing materials (ACMs). Prior to demolition, the asbestos containing materials within each structure were removed. The asbestos abatement contractor was ASNET, of Phoenix, Arizona. The FCDMC retained Exceltech, Inc. (ET) to serve as the project manager for the asbestos abatement project. ET was to: 1) supervise the asbestos abatement activities each day; 2) conduct air monitoring prior to abatement, during the abatement, and for final air clearance once the abatement was complete; 3) visually inspect the abatement areas for final clearance; and 4) provide a written report of the abatement activities and the air monitoring results.

Prior to the commencement of the abatement activities, ET conducted a walk-through visual inspection of the containment areas. The general locations of the structures are included in this report as Appendix A. Maps illustrating the floor plans for each of the structures are included as Appendix B. A summary table of the analytical results, and copies of the laboratory reports and the chain-of-custody forms, are included as Appendix C. Copies of the EPA Notification documents are included as Appendix D and copies of the Waste Manifests are included as Appendix E. Copies of the Contractors Documentation is included as Appendix F. Representative photographs of the abatement activities are included as Appendix G.

2.0 GENERAL ASBESTOS INFORMATION AND BACKGROUND

Before the Environmental Protection Agency (EPA) restricted the use of asbestos containing materials (ACM) in 1978, asbestos was widely used in insulation materials, blow-on ceilings, and acoustical tiles because of its fire resistant properties and high tensile strength. Prior to restriction, asbestos was a component of over 3,000 types of building materials.

Today, asbestos is considered by the EPA and the Occupational Health and Safety Administration (OSHA) to be a health hazard, especially when it is in a friable or airborne state. Friable is defined as any material that contains more than 1% asbestos and can be easily crumbled, pulverized, or reduced to powder using hand pressure. There are several forms of asbestos; the most common being chrysotile, amosite, and crocidolite. There are several less common forms of asbestos; anthophyllite, tremolite and actinolite.

Asbestos has been linked with the following diseases:

1. Asbestosis - a non-malignant, scarring of the lungs.
2. Mesothelioma - cancer of the lining around the lungs (pleural mesothelioma) or of the lining of the abdomen (peritoneal mesothelioma).
3. Bronchogenic carcinoma - a malignancy of the interior of the lungs (lung cancer).*
4. Other cancers - some medical studies have suggested that exposure to asbestos is responsible for some cancers of internal organs including the esophagus, larynx, oral cavity, stomach, colon, and kidneys.

* Asbestos exposure coupled with cigarette smoking has been shown to have a synergistic effect in the development of lung cancer.

3.0 SITE DESCRIPTIONS

The 11 structures included in the abatement activities were located in Phoenix, and Paradise Valley, Arizona. The abatement activities involved the removal and proper disposal of the asbestos containing materials (ACM) located within each structure.

Prior to commencement of the abatement activities, containments were constructed to completely enclose the ACMs involved in the removal within each structure. The

abatement activities were performed by ASNET. The types of abatement procedures utilized by ASNET included: full containments with negative air and three-stage decontamination units; mini-containments; and wet removal methods. Final air clearance sampling and a final clearance visual inspection were conducted at the conclusion of each abatement activity, inside each containment, prior to the dismantling of each containment within each structure.

The abatement activities commenced on September 20, 1990, and were completed on October 31, 1990. The locations for each structure, listed in order of abatement, are as follows:

Structure M - 2643 East Siesta Lane, Phoenix
Structure D - 1417 East State Avenue, Phoenix
Structure C - 1407 East State Avenue, Phoenix
Structure B - 1407 East State Avenue, Phoenix
Structure A - 7303 North 14th Street, Phoenix
Structure L - 5419 North Calle La Paz, Paradise Valley
Structure K - 5418 North Calle La Paz, Paradise Valley
Structure J - 3411 East Stanford Drive, Paradise Valley
Structure H - 3197 East San Miguel Avenue, Phoenix
Structure F - 3021 East San Miguel Avenue, Phoenix
Structure E - 3001 East San Miguel Avenue, Phoenix

Structure M

Structure M was located at 2643 East Siesta Lane in Phoenix, Arizona. The structure was a church and consisted of an auditorium, library, cry room, two restrooms, and two storage rooms. The two storage rooms contained the following ACM: sprayed-on acoustical "popcorn" ceiling material and 12 inch by 12 inch (12"x12") tan floor tile with black mastic. The "popcorn" ceiling, 12"x12" tan floor tile, and black mastic were all removed from Structure M. There was an asbestos containing roof seam compound on the roof protrusions and the air conditioner/heater (Ac/Ht.) units on the roof. The seam compound was also removed from Structure M.

Structure D

Structure D was located at 1417 East State Avenue in Phoenix, Arizona. The structure was a single family residence and consisted of a livingroom, family room, two bedrooms, laundry room, one bathroom, and a carport. The structure contained the following ACMs: the kitchen contained 12"x12" blue and white floor tile and mastic; the family room contained rough textured gypsum wallboard; and the silver colored top layer of the roof material. The blue and white tile and mastic, the rough textured gypsum wallboard, and the roof material were all removed from Structure D.

Structure C

Structure C was located at 1407 East State Avenue in Phoenix, Arizona. The structure was a single family residence and consisted of a livingroom, kitchen, one bathroom, and two bedrooms (west and east). The structure contained the following ACM: the west bedroom contained 9"x9" black floor tile and mastic; the east bedroom contained 9"x9" white floor tile and mastic; the livingroom contained vinyl floor tile; the entryway contained white vinyl floor material; and the furnace vent had vent seam tape. The black floor tile and mastic, the white floor tile and mastic, the vinyl floor tile, the white vinyl floor material, and the furnace vent tape were all removed from Structure C.

Structure B

Structure B was located at 1407 East State Avenue in Phoenix, Arizona. The structure was an apartment duplex designated as Duplex 1 and Duplex 2 (refer to the map in Appendix B). Duplex 1 consisted of a livingroom, kitchen, one bathroom, and two bedrooms (east and west). The following ACMs were removed from Duplex 1: the apartment contained sprayed-on acoustical "popcorn" ceiling material; the kitchen contained floor tile mastic; the hallway, livingroom, and west bedroom all contained 12"x12" green floor tile and mastic; the bathroom contained white floor tile and mastic; the east bedroom contained green floor tile; two transite vent pipes on the water heaters in the storage room; and vent seam tape on the furnaces. Duplex 2 consisted of a livingroom, kitchen, one bathroom, and two bedrooms (east and west). Duplex 2

contained sprayed-on acoustical "popcorn" ceiling material; the east bedroom contained 12"x12" white patterned floor tile and tan/brown mastic; the living-room, hallway, and west bedroom all contained 9"x9" white floor tile and mastic; and the bathroom and kitchen contained tan vinyl floor material. The ACMs listed above for Structure B were all removed from Duplex 1 and Duplex 2.

Structure A

Structure A was located at 7303 North 14th Street in Phoenix, Arizona. The structure was a single family residence and consisted of a livingroom, kitchen, one bathroom, one storage room, and three bedrooms. The structure contained the following ACMs: sprayed-on acoustical "popcorn" ceiling material; 12"x12" brown vinyl floor tile (two layers of tile and one layer of mastic); 9"x9" brown vinyl floor tile and mastic; and 12"x12" white vinyl floor tile (2nd layer of tile and 2nd layer of mastic). The acoustical "popcorn" ceiling; brown vinyl floor tile and mastic; brown vinyl floor tile and mastic; and 12"x12" white vinyl floor tile were all removed from Structure A.

Structure L

Structure L was located at 5419 North Calle La Paz in Paradise Valley, Arizona. The structure was a single family residence and consisted of a living room, kitchen, sauna, dining room, two bathrooms, four bedrooms, and a carport. The structure and carport contained the following ACMs: gypsum ceiling wallboard; and vent seam compound on the Ac/Ht. unit. The gypsum ceiling wallboard and the vent seam compound were all removed from Structure L.

Structure K

Structure K was located at 5418 North Calle La Paz in Paradise Valley, Arizona. The structure was a two story single family residence and consisted of a livingroom, kitchen, dining room, den, family room, study, two and one-half bathrooms, three bedrooms, and a detached bath house. The structure contained the following ACMs: white linoleum with a brick design; 12"x12" white floor tile and mastic; and smooth textured gypsum

wallboard. The white linoleum, white floor tile and mastic, and smooth textured gypsum wallboard were all removed from Structure K.

Structure J

Structure J was located at 3411 East Stanford Drive in Paradise Valley, Arizona. The structure was a single family residence and consisted of a livingroom, kitchen, family room, one bathroom, two bedrooms, a carport, and a detached guest house. The single family residence contained the following ACMs: rough textured gypsum wallboard in the hallway; and roof material. The guest house contained the following ACMs: textured gypsum ceiling wallboard; and built-up roof material. The rough textured gypsum wallboard in the hallway of the residence; roof material on the residence, textured gypsum ceiling wallboard in the guest house; and the built-up roof material on the guest house were all removed from Structure J.

Structure H

Structure H was located at 3197 East San Miguel Avenue in Phoenix, Arizona. The structure was a single family residence and consisted of a livingroom, kitchen, two bathroom, and three bedrooms. The structure contained the following ACMs: lavender colored rough textured plaster wall; 9"x9" pink vinyl floor tile; gray colored plaster wall; and asphalt shingle roof material. The lavender colored rough textured plaster wall; pink vinyl floor tile; gray colored plaster wall; and asphalt shingle roof material were all removed from Structure H.

Structure F

Structure F is located at 3021 East San Miguel Avenue in Phoenix, Arizona. The structure was a single family residence and storage building and consisted of a living-room, dining room, two kitchens, den, utility room, two bathrooms, and three bedrooms. The structure contained the following ACMs: "orange peel" textured gypsum wallboard; and vinyl linoleum with an orange colored brick design. The "orange peel" textured

gypsum wallboard and the vinyl linoleum with an orange colored brick design were all removed from Structure F.

Structure E

Structure E was located at 3001 East San Miguel Avenue in Phoenix, Arizona. The structure was a guest house and consisted of a livingroom, kitchen, one bathroom, one bedroom, and a carport. The structure contained the following ACMs: linoleum flooring in the kitchen; and roof material. The linoleum flooring in the kitchen and the roof material were all removed from Structure E.

4.0 METHODS

4.1 SAMPLING

Air sampling was conducted by ET for pre-abatement, during abatement, and final air clearance. For pre-abatement monitoring, air samples were collected from the areas where abatement was scheduled. During the abatement activities, air samples were collected each day near the containment entrances and near the negative air outlets. Final clearance air sampling was conducted inside the containments at the completion of the abatement activities. Copies of the chain-of-custody forms and analytical results for the air samples are included in Appendix C, Section 1.

Bulk samples were collected from some of the structures. These bulk samples were placed inside sealed, labeled containers. The samples were logged into the field notebook which contains a brief description of the sampling area, sample location, sampler identification, date of sampling, and a description of the materials sampled. Copies of the chain-of-custody forms and analytical results for the bulk samples are included in Appendix C, Section 2. The bulk samples were collected as follows:

Structure E - Three bulk samples were collected on October 2, 1990. The following materials were sampled: roof material from the east side of

gypsum wallboard and the vinyl linoleum with an orange colored brick design were all removed from Structure F.

Structure E

Structure E was located at 3001 East San Miguel Avenue in Phoenix, Arizona. The structure was a guest house and consisted of a livingroom, kitchen, one bathroom, one bedroom, and a carport. The structure contained the following ACMs: linoleum flooring in the kitchen; and roof material. The linoleum flooring in the kitchen and the roof material were all removed from Structure E.

4.0 METHODS

4.1 SAMPLING

Air sampling was conducted by ET for pre-abatement, during abatement, and final air clearance. For pre-abatement monitoring, air samples were collected from the areas where abatement was scheduled. During the abatement activities, air samples were collected each day near the containment entrances and near the negative air outlets. Final clearance air sampling was conducted inside the containments at the completion of the abatement activities. Copies of the chain-of-custody forms and analytical results for the air samples are included in Appendix C, Section 1.

Bulk samples were collected from some of the structures. These bulk samples were placed inside sealed, labeled containers. The samples were logged into the field notebook which contains a brief description of the sampling area, sample location, sampler identification, date of sampling, and a description of the materials sampled. Copies of the chain-of-custody forms and analytical results for the bulk samples are included in Appendix C, Section 2. The bulk samples were collected as follows:

Structure E - Three bulk samples were collected on October 2, 1990. The following materials were sampled: roof material from the east side of

the carport roof; roof material from the south side of the house roof; and the linoleum and mastic from the northeast corner of the kitchen. Laboratory analyses identified that the roof material from the south side of the house contained 2-5% chrysotile and the linoleum and mastic in the kitchen contained 10-20% chrysotile. The carport roof sample did not contain asbestos.

Structure F - One bulk sample was collected on October 5, 1990. A sample was collected of the moisture barrier beneath the floor of the utility room. Laboratory analysis identified that this sample did not contain asbestos.

Structure J - Two bulk samples were collected on October 9, and 10, 1990. Samples were collected of a texture compound found on a pressed wood wall in the family room near the kitchen; and the roof felt from around the roof skylight. Laboratory analyses identified that the roof felt and tar from the main roof skylight contained 2-5% chrysotile. The texture compound sample did not contain asbestos.

Structure H - Six bulk samples were collected on October 11, 1990. These samples were collected from a gypsum wallboard with a double-coated, smooth textured, plaster from the south porch roof overhang; plaster gypsum wallboard from the south entryway; textured gypsum wallboard from the north porch roof overhang; double-coated plaster gypsum wallboard from the north roof overhang; white plaster gypsum wallboard from the bathroom; and roof felt layers and tar from the east side of the roof. Two bulk samples were collected on October 15, 1990. These samples were collected from the joint compound/texture on the gypsum wallboard of the southeast addition ceiling; and mastic used on acoustical wall tile from the south wall of the northwest bedroom. Two bulk samples were collected on October 23, 1990. These samples were collected from the roofing material - granular and felt pieces. Laboratory analyses identified that the following contained asbestos: the

5.0 RESULTS

The analytical results of the air samples for area and final clearance monitoring indicate that the asbestos health hazard has been minimized and that the containment structures remained intact throughout the course of the abatement activities within each structure. Copies of the chains-of-custody forms and the analytical laboratory results are included in Appendix C, Sections 1 and 2. The visual final clearance inspections of each of the containments indicated that all of the abatements were complete.

6.0 CONCLUSIONS

During the period of September 20 to October 31, 1990, Exceltech, Inc. (ET) supervised the work performed by ASNET for the abatement of asbestos containing materials (ACMs) within 11 structures. The 11 structures were located at various locations in Phoenix and Paradise Valley, Arizona. ET was retained by the Flood Control District of Maricopa County to serve as the project manager for the abatement project. In the course of ET's inspections of the abatement activities, the following regulations were reviewed and properly complied with:

1) OSHA Asbestos Standard for Industry, 29 CFR 1910 - Respirators
2) EPA Worker Protection Rule, 40 CFR 763.10
3) EPA National Emission Standards for Hazardous Air Pollutants, NESHAPS, 40 CFR 61 Subpart M - Asbestos

The results of the final clearance air sampling and the final clearance visual inspections indicate that the abatement activities are complete and that the asbestos health hazard associated with the 11 structures has been minimized. The containment areas have passed the final air clearance requirement of less than 0.01 fibers per cubic centimeter (f/cc).

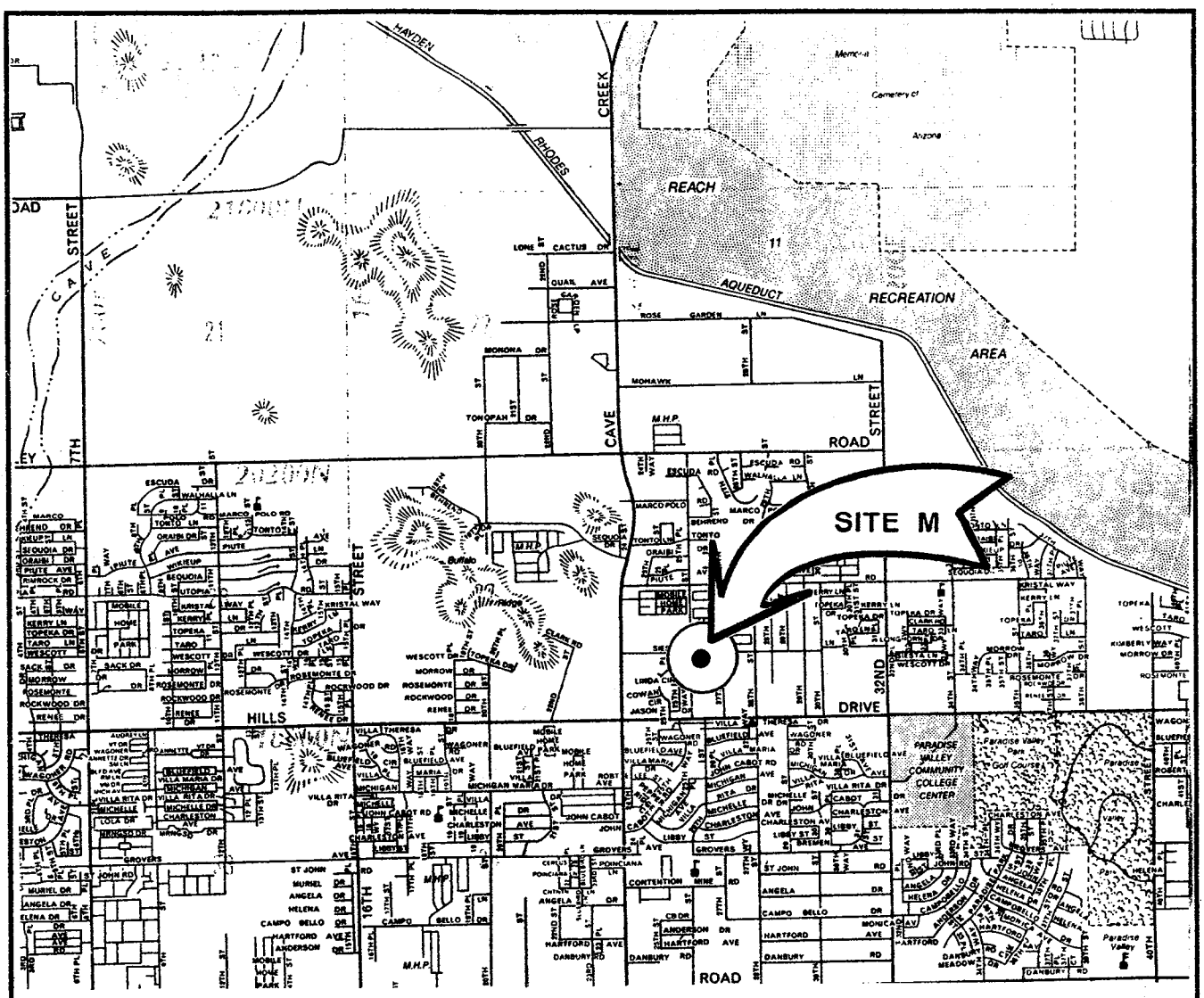
7.0 LIMITATIONS

Environmental regulations on local, state or Federal level can vary significantly over time. Similarly, property conditions will inevitably change over time. Consequently, the conclusions presented in this asbestos survey are strictly applicable to the status of the environmental regulations and the property conditions existing at the time that Exceltech (ET) performs the study. Exceltech believes the data obtained and the inferences made in the course of this survey are reasonably representative of the facility.

Exceltech makes no warranty, expressed or implied, except that these services have been performed in accordance with generally accepted existing environmental engineering, health and safety principles, and applicable regulations at the time and location of the study.

APPENDIX A

SITE LOCATION MAP



LEGEND

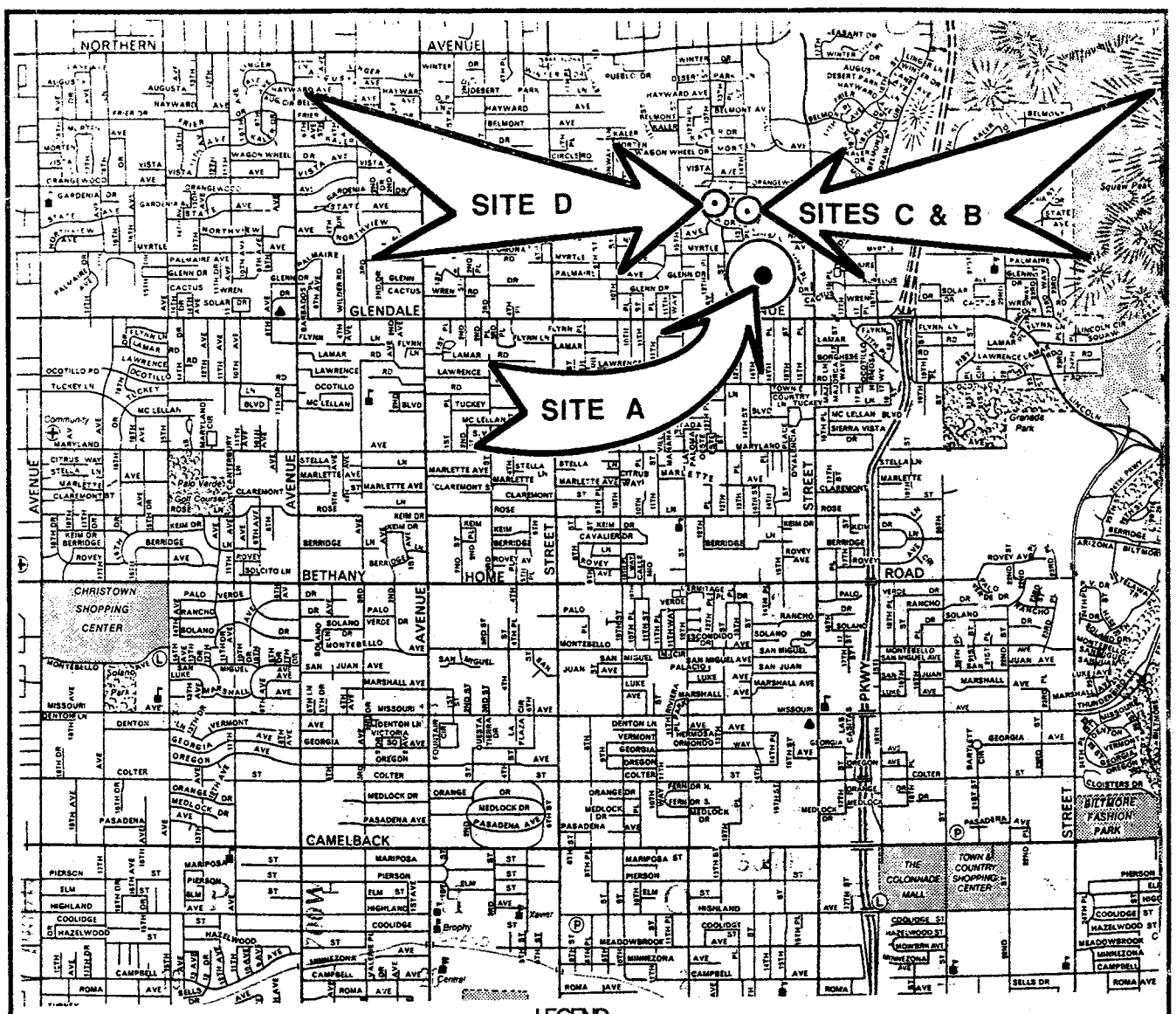
SITE LOCATION

ATLAS SCALE IN MILES

0 1 2 mi.

N

EXCELTECH	SITE LOCATION MAP	REVIEWED BY: JED	APPROVED BY: MM
	STRUCTURE M - CHURCH		
	2642 EAST SIESTA LANE	JOB #: 5-50036-51	DRAWN BY: JMP/TED
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-A1



LEGEND

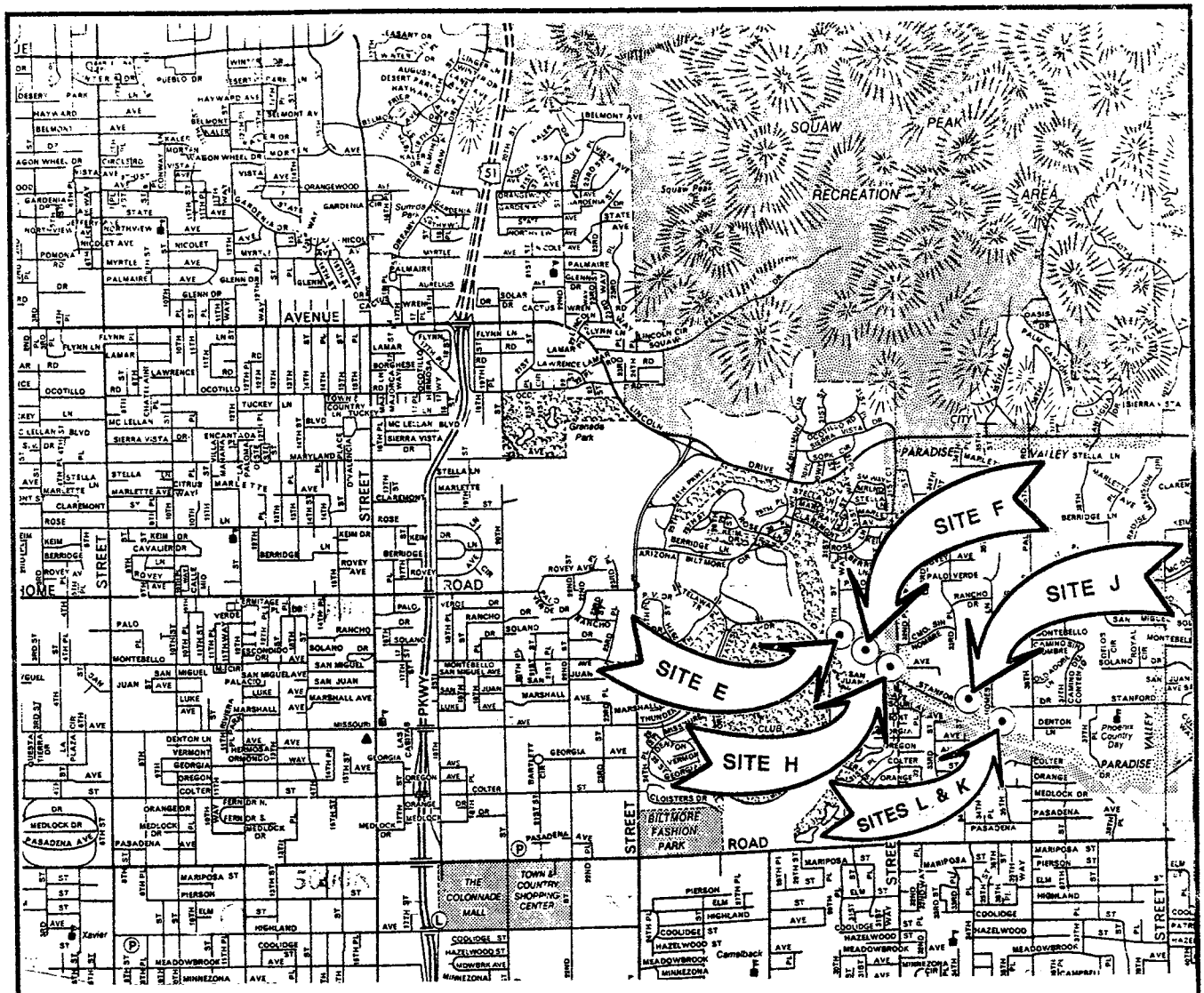
SITE LOCATION

ATLAS SCALE IN MILES

0 1 2 mi.

N

EXCELTECH	SITE LOCATION MAP	REVIEWED BY: 2ED	APPROVED BY: JM
	STRUCTURES D, C, B, AND A		
	STATE AVENUE AND NORTH 14TH STREET	JOB #: 5-50036-51	DRAWN BY: JMP/TED
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-A2



LEGEND

SITE LOCATION

ATLAS SCALE IN MILES

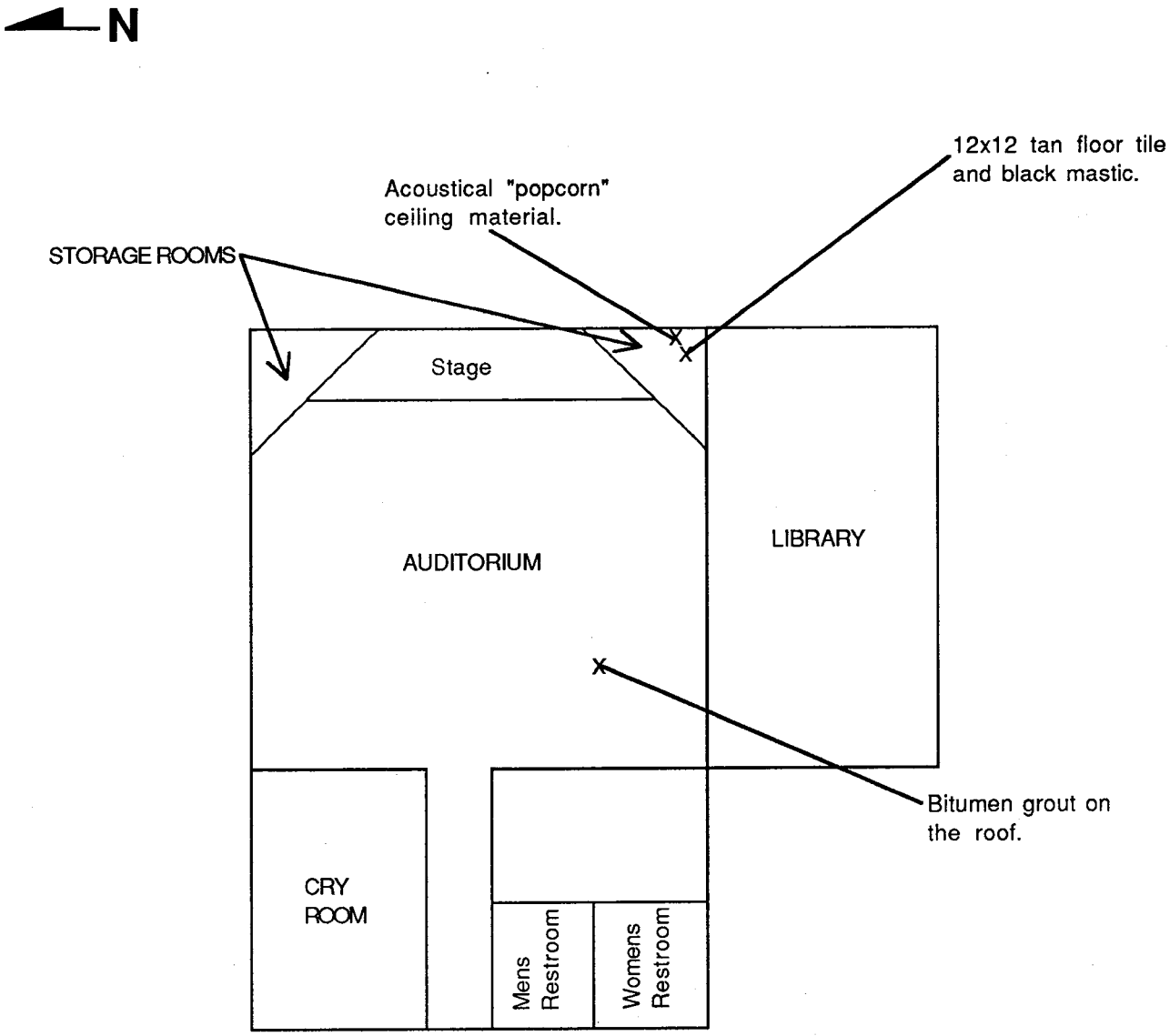
0 1 2 mi.

N

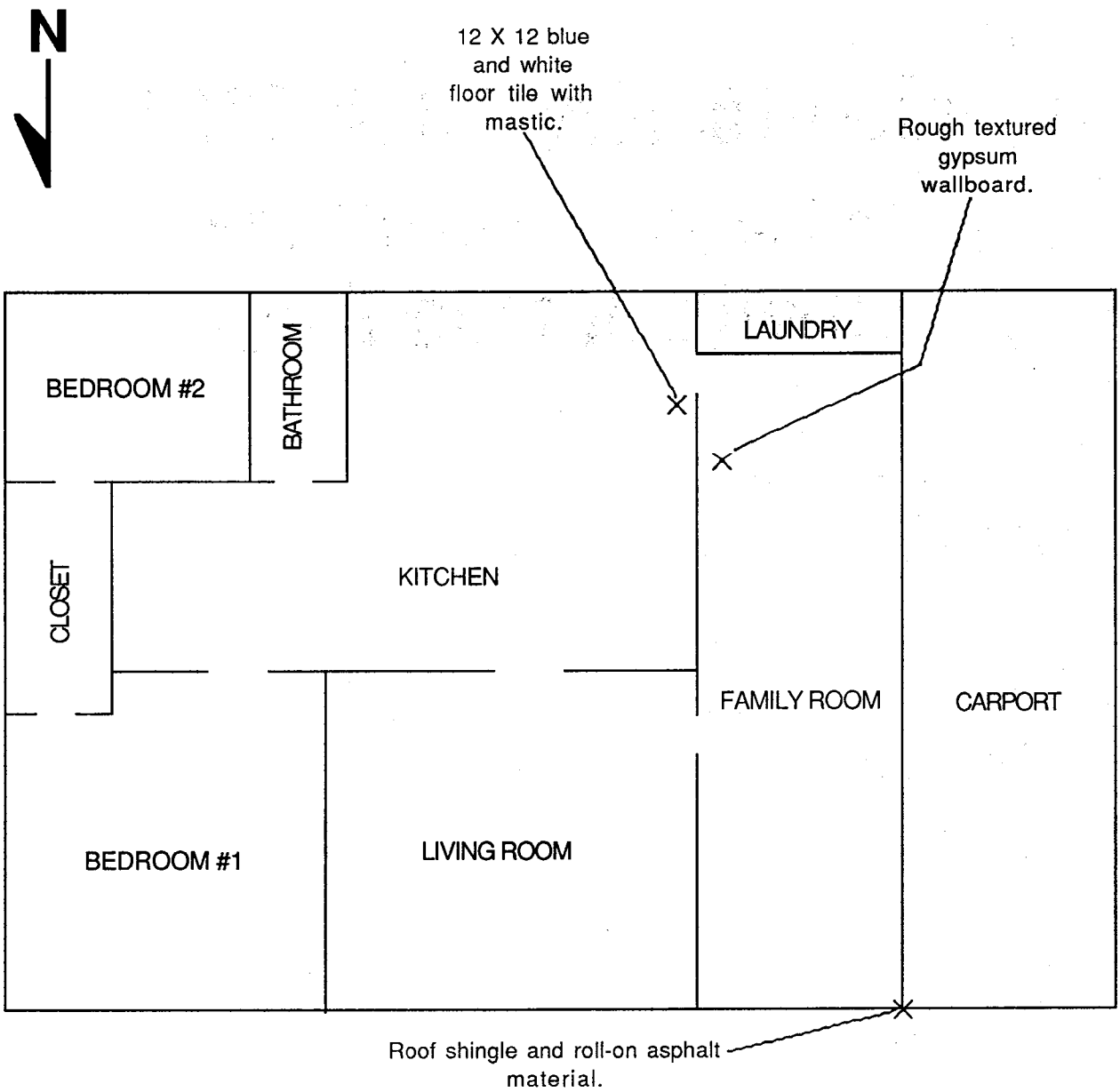
EXCELTECH	SITE LOCATION MAP	REVIEWED BY: 2ED	APPROVED BY: MM
	STRUCTURES L, K, J, H, F, AND E		
	CALLE LA PAZ, STANFORD, AND SAN MIGUEL	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-A3

APPENDIX B

SITE SPECIFIC MAPS

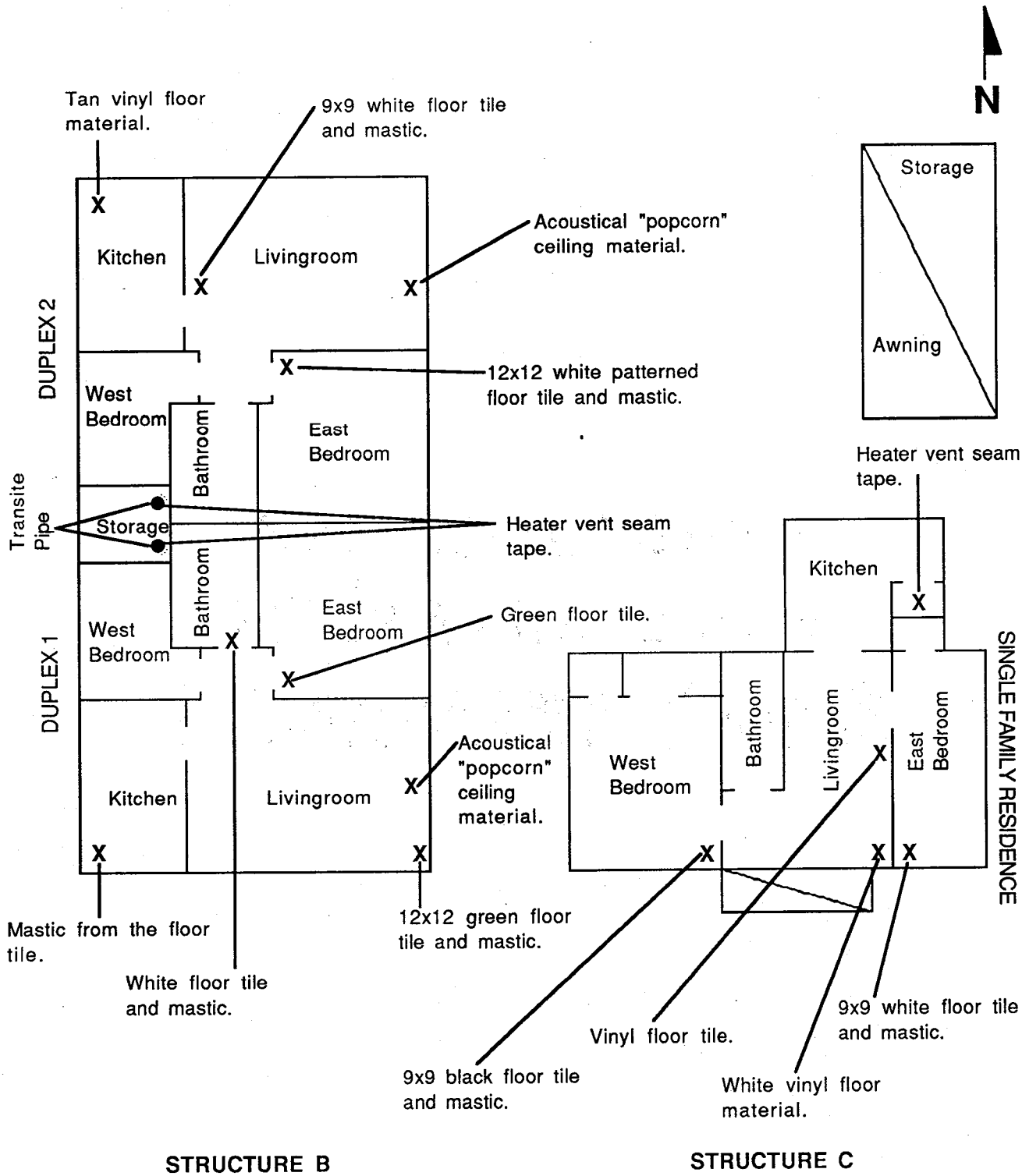


EXCELTECH	**SITE SPECIFIC MAP**	REVIEWED BY: JMP	APPROVED BY: MM
	STRUCTURE M - CHURCH		
	2642 EAST SIESTA LANE	JOB #: 5-50036-51	DRAWN BY: JMP
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B1

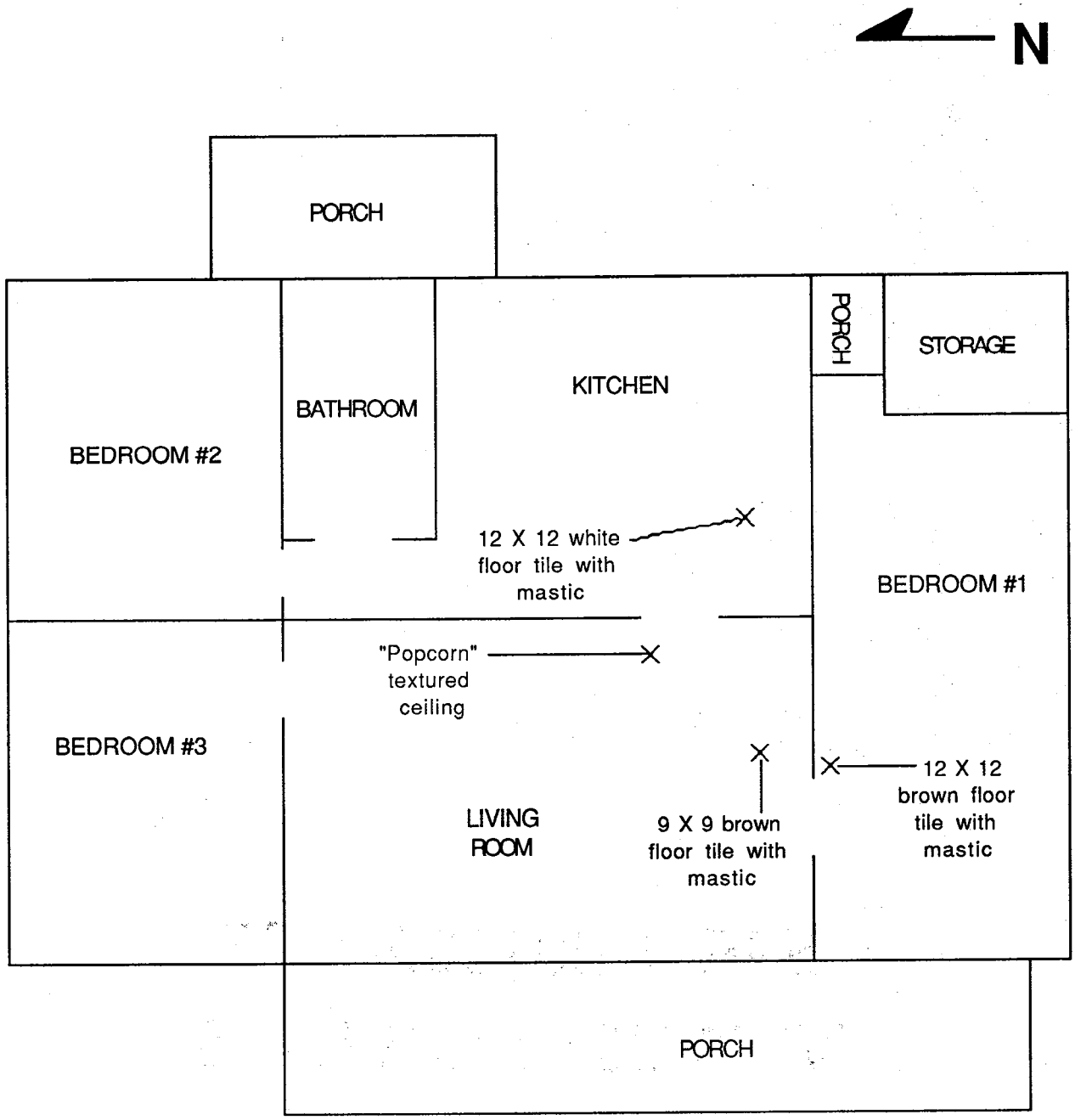


map not to scale

EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY: JMP	APPROVED BY:
	STRUCTURE D		
	1417 E. STATE AVENUE	JOB #: 5-50036-51	DRAWN BY: JAB/TED
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B2

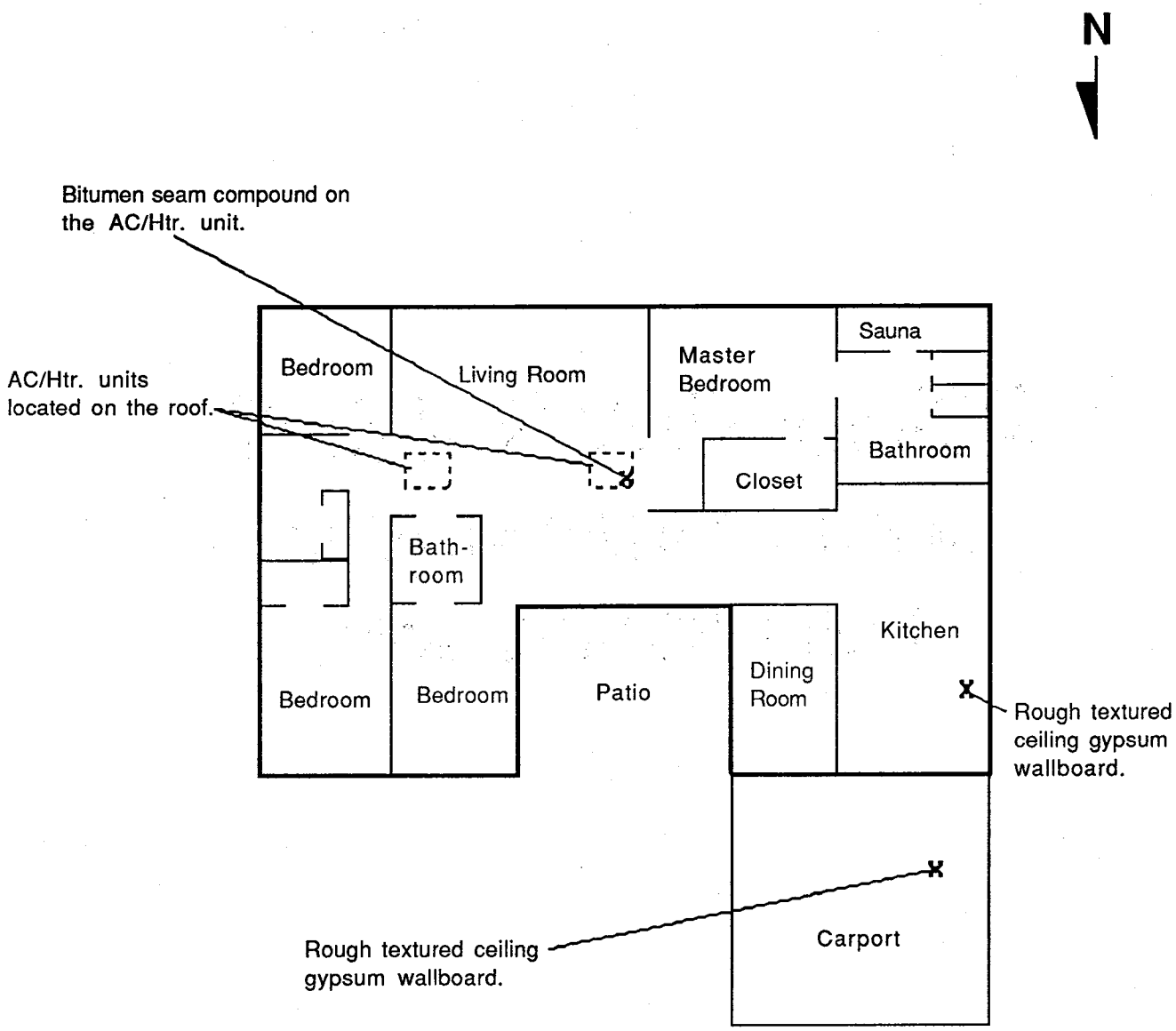


EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY: JMP	APPROVED BY:
	STRUCTURES B AND C		
	1407 EAST STATE AVENUE	JOB #: 5-50036-51	DRAWN BY: JMP/TED
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B3

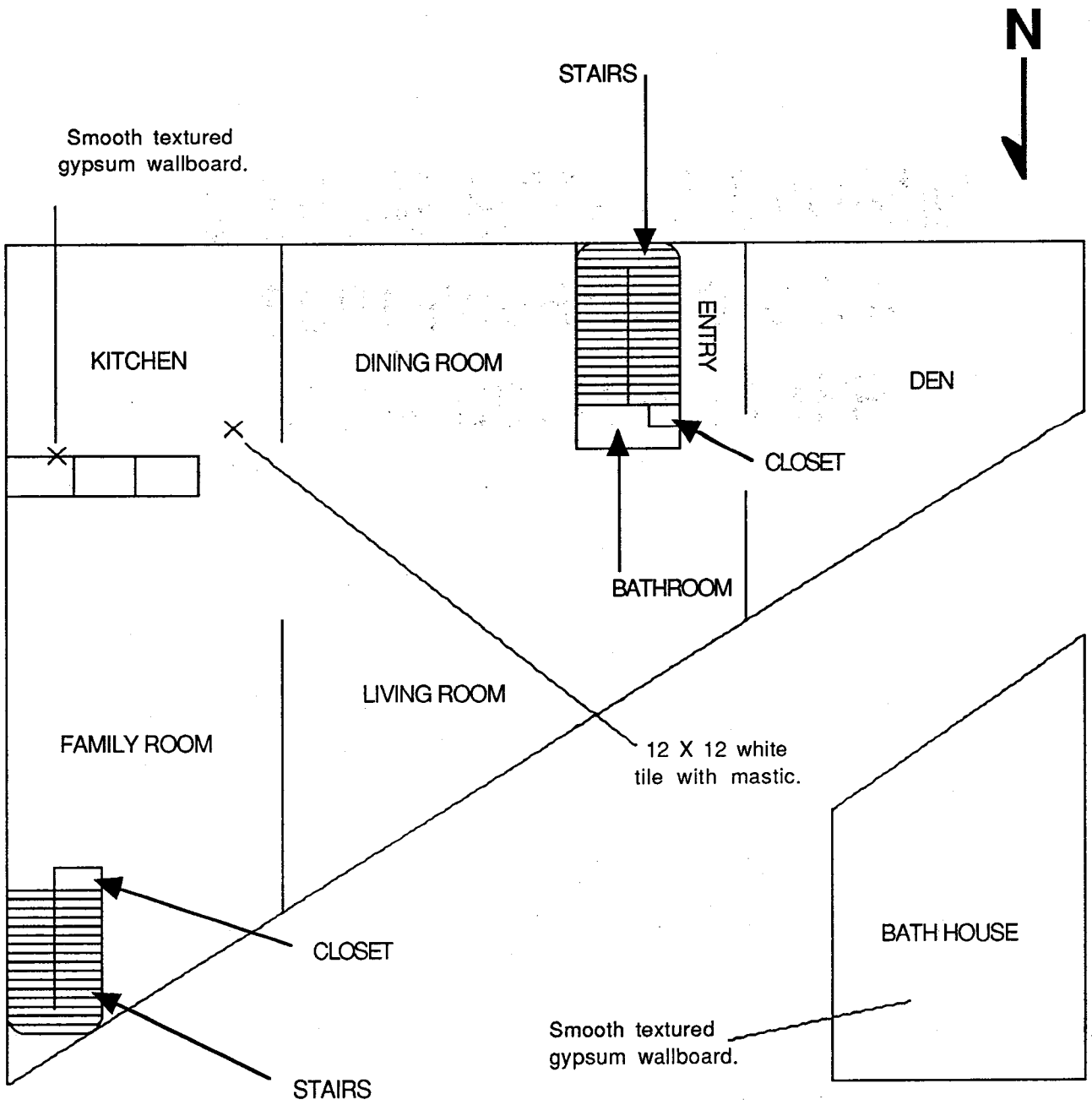


map not to scale

EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY: JMP	APPROVED BY: MM
	STRUCTURE A		
	7303 NORTH 14TH STREET	JOB #: 5-50036-51	DRAWN BY: JAB/TED
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B4



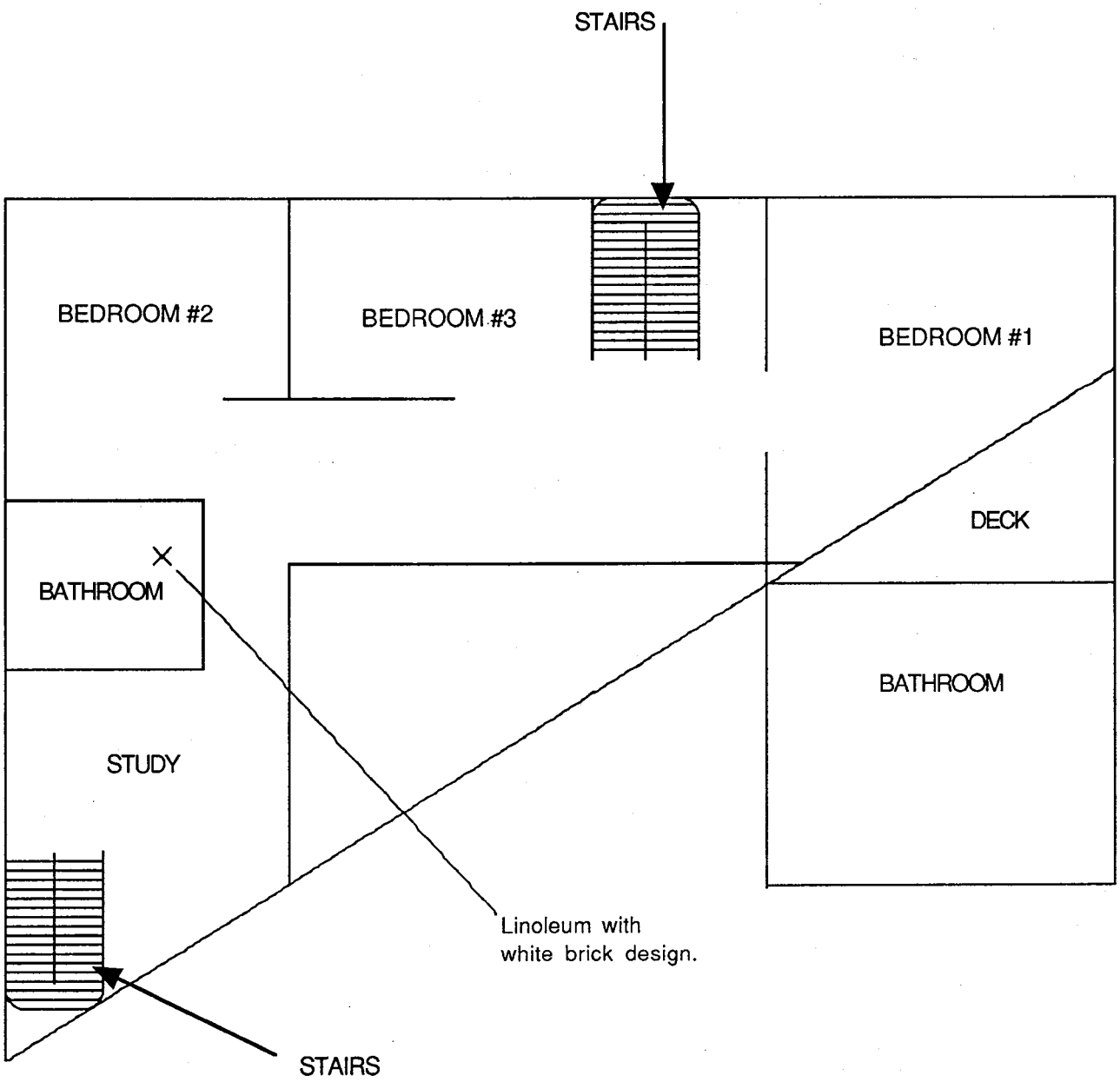
EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY:	APPROVED BY:
	STRUCTURE L		
	5419 NORTH CALLE LA PAZ	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY, ARIZONA	DATE: 21 NOV 90	DRAWING #: 50036-B5



map not to scale

FIRST FLOOR

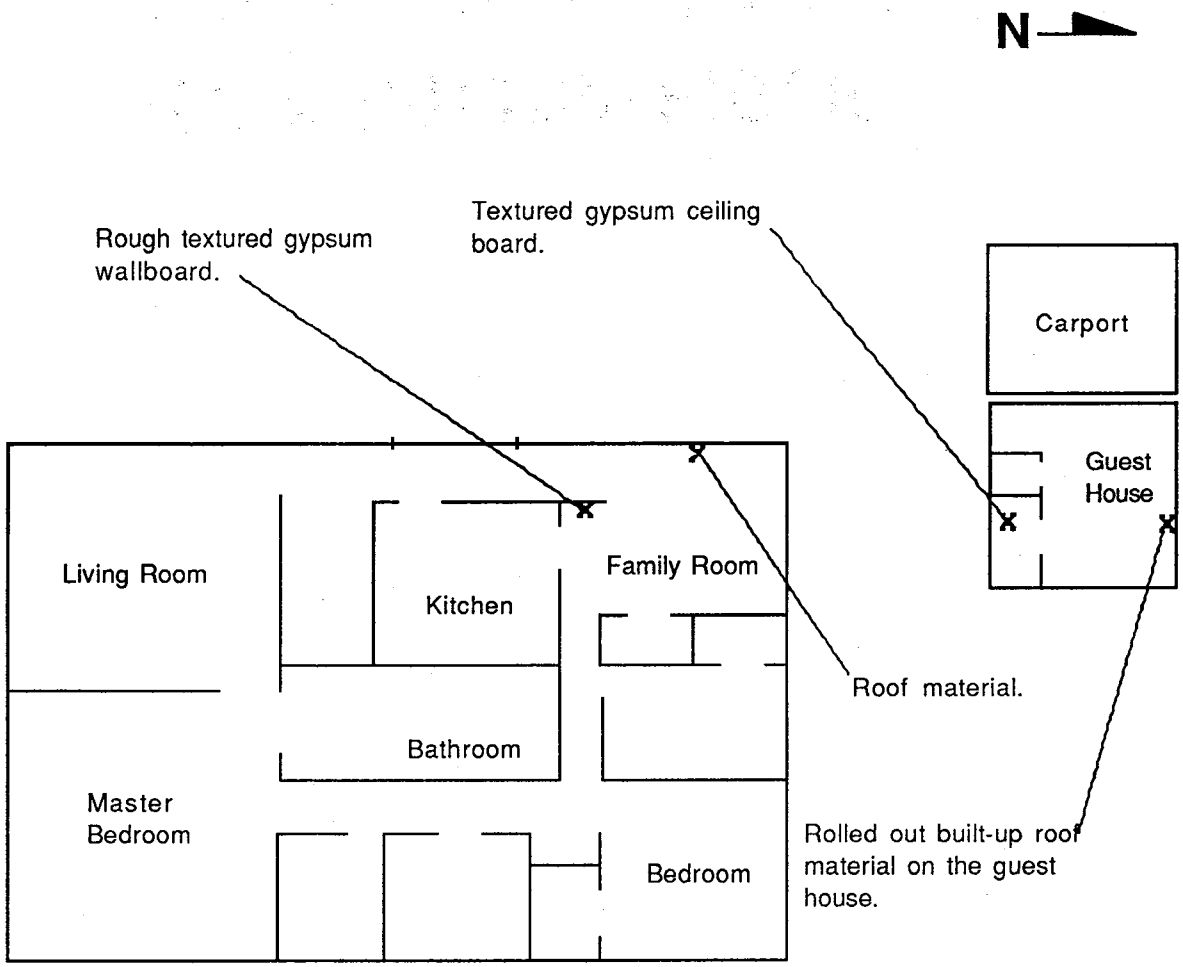
EXCELTECH	**SITE SPECIFIC MAP**	REVIEWED BY:	APPROVED BY:
	STRUCTURE K		
	5418 NORTH CALLE LA PAZ	JOB #: 5-50036-51	DRAWN BY: JAB/TED
	PARADISE VALLEY, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B6



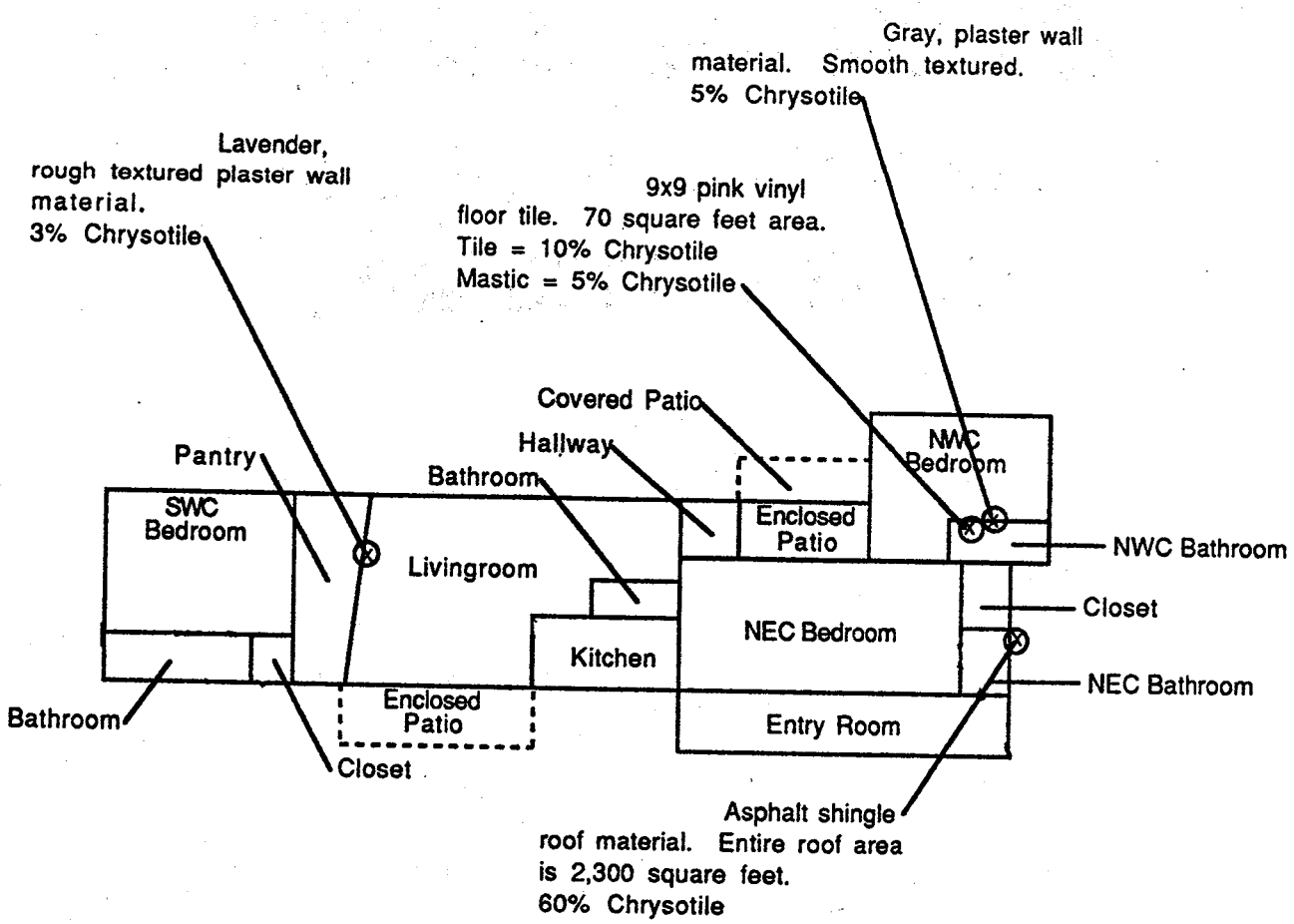
not to scale

SECOND FLOOR

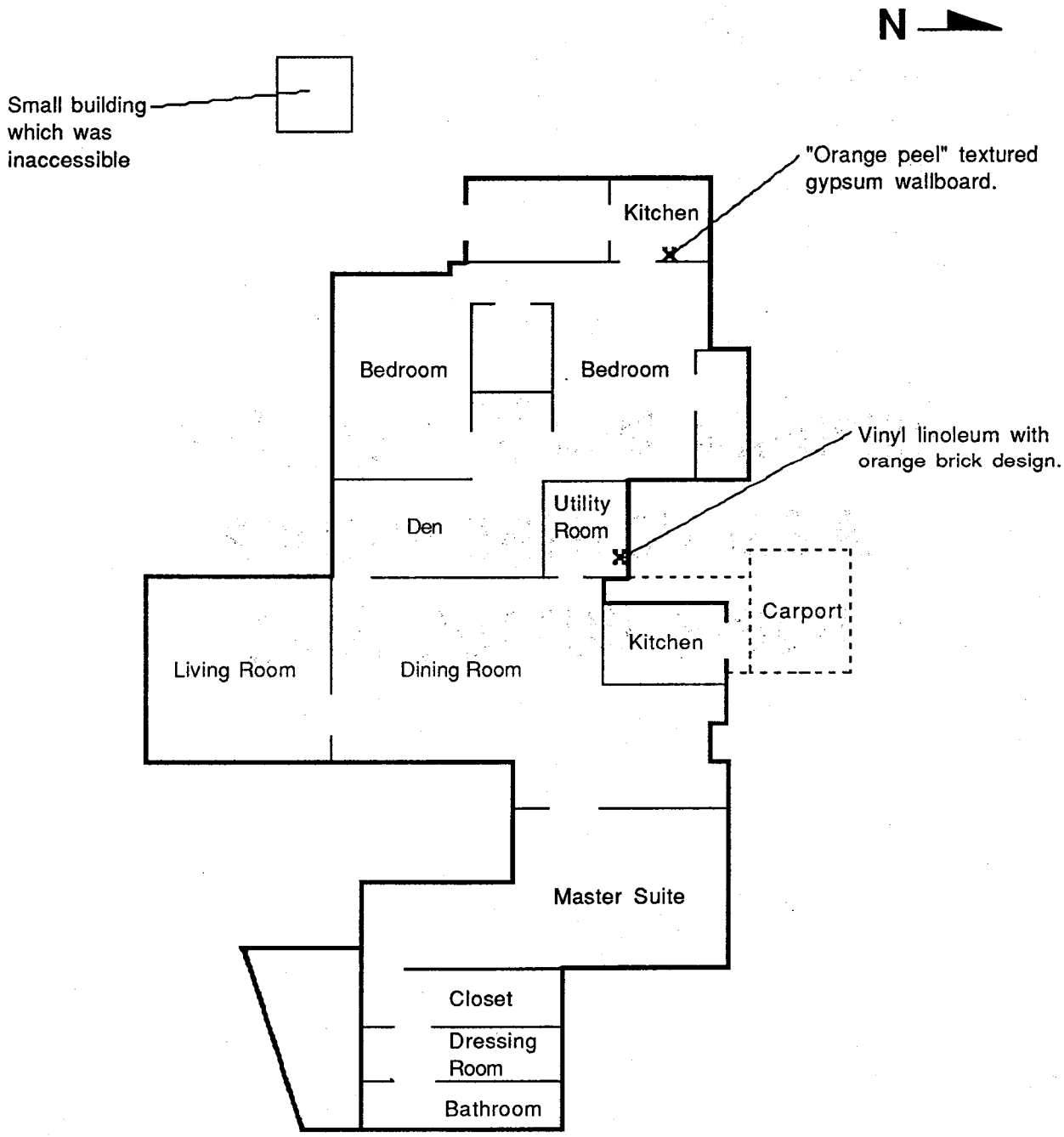
EXCELTECH	**SITE SPECIFIC MAP**	REVIEWED BY:	APPROVED BY:
	STRUCTURE K		
	5418 NORTH CALLE LA PAZ	JOB #: 5-50036-51	DRAWN BY: JAB/TED
	PARADISE VALLEY, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B7



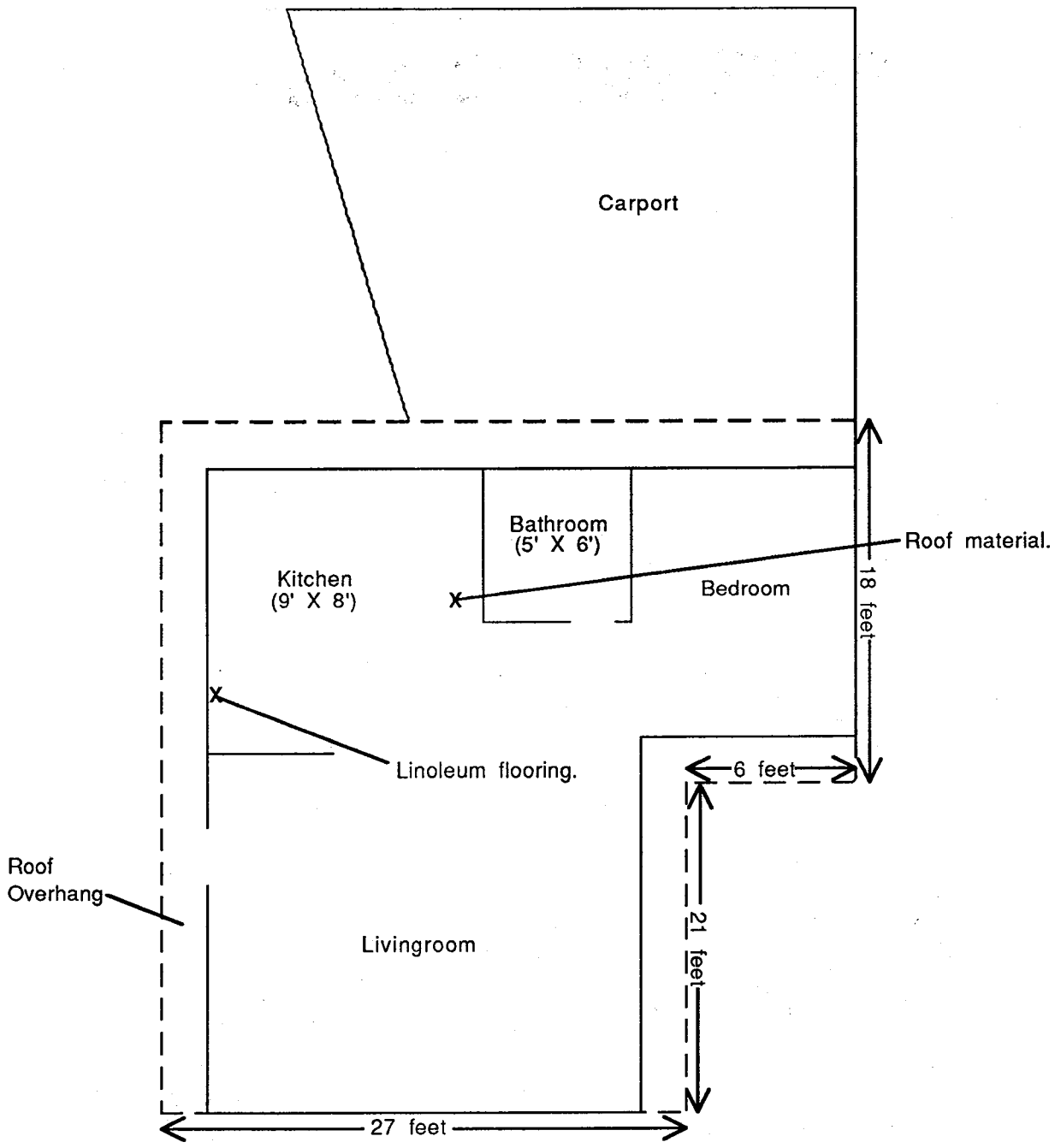
EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY:	APPROVED BY:
	STRUCTURE J		
	3411 EAST STANFORD DRIVE	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY, ARIZONA	DATE: 21 NOV 90	DRAWING #: 50036-B8



EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY: JMP	APPROVED BY:
	STRUCTURE H		
	3197 EAST SAN MIGUEL AVENUE	JOB #: 5-50036-51	DRAWN BY: JMP
	PHOENIX, ARIZONA	DATE: 21 NOV 90	DRAWING #: 50036-B9



EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY: JMP	APPROVED BY:
	STRUCTURE F		
	3021 EAST SAN MIGUEL AVENUE	JOB #: 5-50036-51	DRAWN BY: JMP/TED
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B10



EXCELTECH	SITE SPECIFIC MAP	REVIEWED BY: JMP	APPROVED BY: MM
	BUILDING E		
	3001 EAST SAN MIGUEL	JOB #: 5-50036-51	DRAWN BY: JMP
	PHOENIX, ARIZONA	DATE: 20 NOV 90	DRAWING #: 50036-B11

APPENDIX C

CHAIN OF CUSTODY
AND
ANALYTICAL RESULTS

ARIZONA CANAL - TABLE 1 (Bulk Sample Results)

SAMPLE I.D.	TYPE	SAMPLE LOCATION	RESULTS	PERCENTAGE ASBESTOS AND TYPE	FRIABILITY
50036-51	White and black built up roof material.	East side of carport roof of Structure E.	No	NA	NA
50036-52	Silver, black, and tan flat roof material.	South side of house roof of Structure E.	Yes	2-5% chrysotile.	Nonfriable
50036-53	Yellow, brown, and grey linoleum and mastic.	Northeast corner of kitchen of Structure E.	Yes	10-20% chrysotile.	Nonfriable
50036-105-1	Beige/black floor and moisture barrier.	Utility room of Structure F.	No	NA	NA
50036-109-1	White, yellow, and tan texture on pressed wood.	Family room near kitchen of Structure J.	No	NA	NA
50036-1010-1	Black, white, and tan roof felt and tar.	Main roof skylight of Structure J.	Yes	2-5% chrysotile.	Friable
50036-1011H-1	Green, white, and brown ceiling plaster and gypsum board.	South porch roof edge of Structure H.	No	NA	NA
50036-1011H-2	Green, white, and brown ceiling plaster and gypsum board.	South entry hall roof edge of Structure H.	No	NA	NA
50036-1011H-3	Green, white, and brown textured gypsum board.	North porch roof edge of Structure H.	Yes	<1% chrysotile.	Nonfriable
50036-1011H-4	Green, white, and brown plaster and gypsum board.	North overhang roof edge of Structure H.	No	NA	NA
50036-1011H-5	Tan and white plaster over gypsum.	Bathroom by middle kitchen of Structure H.	No	NA	NA
50036-1011H-6	Silver, gray, and black roofing material.	Roof from east section of house of Structure H.	Yes	5-10% chrysotile.	Nonfriable
50036-5-Hbulk	Brown mastic used on acoustical wall tile.	South wall of northwest room of Structure H.	No	NA	NA
50036-6-Hbulk	Grey/tan joint compound/texture from gypsum board.	Ceiling from southeast addition of Structure H.	Yes	2-5% chrysotile.	Nonfriable
50036-4-Hbulk	Granular roofing debris.	On top of edge of roof for Structure H.	No	NA	NA
50036-5-Hbulk	Roofing debris and felt pieces.	On top of edge of roof for Structure H.	Yes	2-5% chrysotile.	Friable

SECTION 1

AIR MONITORING RESULTS

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: Proj. Mgmt. - Az Canal - Pre
SAMPLERS (Signature): Janice Petticrew

TEST REQUESTED: Area PCM

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	Area PCM	REMARKS
1M	9-18-90	11:36	Out in the auditorium by stage	X	15 LPM for 60 min.
2M		11:36	North room	X	15 for 60
3M		11:36	South room	X	15 for 60
1A		1:24	Outside by west door	X	15 for 60
2A		1:24	Inside south bedroom	X	15 for 60
3A		1:24	Inside north bedroom	X	15 for 60
Blank		2:00	Blank	X	Lot # 0590-55

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Janice Petticrew	9/18/90	12:42	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots or Janice Petticrew

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

FORM DATED

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-5000 36-51
PROJECT NAME: Pre-abatement — Az Canal
SAMPLERS (Signature): Janice Pettiewer
P.O. #: 20621
LAB: Fibergunt
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	AREA PCM							REMARKS
5000-A1	9/19/90	9:46	SE Bedroom in north duplex	X							15 LPM for 50 min
5000-C2		9:46	Hallway in south duplex	X							15 LPM for 50
5000-B1		9:47	East bedroom in residence	X							15 LPM for 50
5000-B2		9:47	Kitchen in the residence	X							15 LPM for 50
5000-D1		11:32	North side outside by carport	X							15 LPM for 40
5000-D2	✓	11:32	South side by door	X							15 LPM for 40
Blank	9/19/90	11:00	Blank	X							Lot # 0590-55

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Janice Pettiewer	9/19/90	12:42	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots or Janice Pettiewer

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

FORM DATED

CHAIN OF CUSTODY RECORD

PROJECT NO. 5-50036-51

PROJECT NAME: Az Canal - During

SAMPLERS (Signature): Janice Petticrew [illegible]

P.O.# 20621

LAB: Fiberquant

TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	AREA PCM							REMARKS
M1	9/20/90	1:06	Outside north containment	X							12 LPM for 100 min.
~~M2~~	~~9/20/90~~		~~Outside north containment~~	~~X~~							~~12 LPM for~~ JP 9/20/90
Blank	9/20/90	1:25	Blank	X							

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Janice Petticrew	9/21/90	11:48	Karen E Johnston 9/21/90 16:55				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots or Janice Petticrew

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

Final Clearance - RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-5536-51
PROJECT NAME: Az Canal - Abatement
SAMPLERS (Signature): Janice Petterson
Final - RUSH

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCM	REMARKS
MC1	9-21-90	8:23	North containment - east	X	12 LPM for 100 min.
MC2		8:23	North containment - center	X	12 LPM for 100 min.
MC3		8:23	North containment - west	X	12 LPM for 100 min.
MC4		8:29	South containment - South	X	12 LPM for 100 min.
MC5		8:29	South containment - center	X	12 LPM for 100 min.
MC6		8:29	South containment - North	X	12 LPM for 100 min.
Blank		9:00	Blank	X	

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Janice Petterson	9/21/90	11:48	Karen E Johnston 9-21-90 11:52A				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: Verbals to office

REPORT TO: Marilyn Moots or Janice Petterson

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: MARICOPA COUNTY FLOOD CONTROL DISTRICT
SAMPLERS (Signature): Lawrence Guy McGee Durling

P.O. #: 20621
LAB: FQ
TURN AROUND TIME: Normal

	NO.	DATE	TIME	STATION AND LOCATION	PCH							REMARKS
500	36C-1A	9-24-90	3:30 PM	BLDG "C" MONITOR, SE CORNER	x							
500	36C-2A	9-24-90	3:35 PM	BLDG "C" MONITOR, NE CORNER	x							

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
LGMcGee	9-24-90	4:10 P	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO:

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-50226-51	During Abatement samples Az Canal - Proj. Mgmt.

SAMPLERS (Signature): Janice Pettiman Laurie McGee

P.O. # 20621

LAB: Fiberquant

TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	AREA PCM							REMARKS
1136 - D-1R	9/25/90	8:05	SW Corner of house	X							7 LPM for 185 min.
1136 - D-2R	9/25/90	8:15	NW Corner of house	X							7 LPM for 178 min.
1136 - D-3R	9/25/90	8:25	East side of house.	X							7 LPM for 170 min.
1136 - Blank-C	9/25/90	12:50	Blank	X							—
1136 - C1	9/25/90	12:39	North side of duplex by neg. air	X							12 LPM for 170 min
1136 - C2	9/25/90	12:40	South side of duplex by neg. air	X							12 LPM for 170 min

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Janice Pettiman	9/25/90	3:43	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: Results to office

REPORT TO: Marilyn Moots or Janice Pettiman

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: 50036 Proj Management
SAMPLERS (Signature): Laurence Gary McGuie

P.O.#: 20621
LAB: Fiberquant
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	TEST REQUESTED: RCH							REMARKS
036-J-1B	9-25-90	2:55 PM	Bldg J outside	X							675 liters
036-J-2B	9-25-90	3:00 PM	Bldg J Guesthouse	X							675 liters
036-J-3B	9-25-90	3:05 PM	Bldg J Kitchen area	X							600 liters

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Gary McGuie	9-25-90	3:10P	Janice Pettiereno	Janice Pettiereno	9/25/90	3:43	John Sol
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: ~~Work~~ 9/25/90

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: 50036 During Abatement Proj Management
SAMPLERS (Signature): Laurie Jay McGee
P.O.#: 20621
LAB: Fiber quant
TURN AROUND TIME: RUSH

	NO.	DATE	TIME	STATION AND LOCATION	TEST REQUESTED: AREA PCM	REMARKS
36-	C-1	9-26-90	10:45	Bldg C, South end	X	TOT TIME: 150 min TOT LTR: 1200
36-	C-2	9-26-90	10:50	Bldg C, North end	X	TOT TIME: 150 min TOT LTR: 1200
36-	C-3	9-26-90	11:05	Bldg C, East side (Decon)	X	TOT TIME: 120 min TOT LTR: 1200

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurie Jay McGee	9-26-90	12:30p	Janice Petterson	Janice Petterson	9/26/90	2:52	Karen Johnston 2:55P 9-26-90
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: Verbals to office

REPORT TO: Marilyn Morris or Janice Petterson

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

FORM DATED

CHAIN OF CUSTODY RECORD

PROJECT NO: C-50036-51
PROJECT NAME: 50036 Asbestos Abtmt Proj Mngmt
SAMPLERS (Signature): Lawrence Guy McGee

P.O. #: 20621
LAB: Fibergnant
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
036-L-1B	9-26-90	3:55P	Bldg L Dining room	X							TIME: 45 LTR: 675
036-L-2B	9/26/90	3:55P	Bldg L carport	X							TIME: 45 LTR: 675
036-L-3B	9/26/90	4:00P	Bldg L roof	X							TIME: 45 LTR: 675

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGee	9-26-90	4:34	Karen E Johnston 9-26-90				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-7-36-51
PROJECT NAME: AC Canal - Pre-abatement on Building K
SAMPLERS (Signature): Laurence Gary McGill

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	TEST REQUESTED	REMARKS
7-36-K-1B	9/27/90	9:25	Outside south	X	15 LPM for 75 min
7-36-K-3B		9:30	Upstairs west bathroom	X	15 LPM for 70 min.
7-36-K-2B		9:35	Kitchen	X	15 LPM for 62 min.
7-36-K-4B		9:40	Upstairs bathroom	X	15 LPM for 60 min.
7-36-K-Blank		9:50	Blank Lot #0590-55 Track #00771	X	

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Gary McGill	9-27-90	2:30	Janice Pettiscrew	Janice Pettiscrew	9/27/90	3:20	Karen E Johnston 9-27-90 3:20
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Monts or Janice Pettiscrew

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

NU-311.

CHAIN OF CUSTODY RECORD

Building C - Final Clearance

PROJECT NO.	PROJECT NAME
5-50036-51	Fr. Canal - During abatement-B

SAMPLERS (Signature) Janice Patterson Lawrence Jay McKee

TEST REQUESTED: AREA FOM

P.O.# 20621

LAB Fibergnant

TURN AROUND TIME RUSH

NO.	DATE	TIME	STATION AND LOCATION	AREA FOM	REMARKS
36-927-B1	9/27/90	8:20	Building B Kitchen near neg. air	X	12 LPM for 100 min.
36-927-B2	9/27/90	1:13	Building B North side near entry	X	12 LPM for 100 min.
36-C-1F		1:10	North unit living room B&C	X	12 LPM for 100 min.
36-C-2F		1:10	North unit SE bedroom B&C	X	12 LPM for 100 min.
36-C-3F		1:10	North unit SW bedroom B&C	X	12 LPM for 100 min.
36-C-4F		1:10	South unit NW bedroom B&C	X	12 LPM for 100 min.
36-C-5F		1:10	South unit NE Bedroom B&C	X	12 LPM for 100 min.
36-C-6F		1:10	South unit living room B&C	X	12 LPM for 100 min.
36-Blank-F	✓	2:00	Field blank outside entrance	X	

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Janice Patterson	9/27/90	3:20	Karen E Johnston 9-27-90 3:22P				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: Verbals to office

REPORT TO: Marilyn Matts or Janice Patterson

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-SC36-51
PROJECT NAME: 5C036 Asbestos Abatement Proj Mangmt
SAMPLERS (Signature): Laurence Gary McGuire During

P.O.#: 20621
LAB: Fibersquare
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
036 A-1M	9-28-90	10:45	Bldg A, East side (area)	X							TOT TIME: 40 TOT LTR 600
036 A-2M	9-28-90	10:50	Bldg A, SW corner (decon-area)	X							TOT TIME 40 TOT LTR 600

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Gary McGuire	9-28-90	4:15	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots or Janice Petticrew

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-50036-51	50036 Asbestos Abatement Proj Mngmt

SAMPLERS (Signature): Lawrence Gray McGee

P.O. #: 20621

LAB: Fibergnant

TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
36 B-1F	9-28-90	3:10p	Bldg B, East Bedroom	X							TIME: 100 LTR: 1200
36 B 2F	9-28-90	3:10p	Bldg B, bathroom	X							TIME: 100 LTR: 1200
36 B-3F	9-28-90	3:10p	Bldg B, living room	X							TIME: 100 LTR: 1200
36 B-4F	9-28-90	3:10p	Bldg B, West bedroom	X							TIME: 100 LTR: 1200
36 B-Blank	9-28-90	N/A	Blank #05 90 55, Track 00771	X							N/A Blank

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Gray McGee	9-28-90	4:15	Karen E Johnston
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Moore or Jenice Petterson

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

Call if can't do by 10:AM

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: 50036 Asbestos Abatement Programs
SAMPLERS (Signature): Lawrence Gary McGee

P.O. #: 20621
LAB: Fibergwant
TURN AROUND TIME

NO.	DATE	TIME	STATION AND LOCATION	TEST REQUESTED: RCS	REMARKS
36 A-1F	10-1-90	9:45A	Bldg A NE Bedroom	X	TIME 80 LTR 1200
A-2F	10-1-90	9:45A	Bldg A Kitchen	X	TIME 80 LTR 1200
A-3F	10-1-90	9:45A	Bldg A S. Bedroom	X	TIME 80 LTR 1200
A-4F	10-1-90	9:45A	Bldg A Liv. Room	X	TIME 80 LTR 1200
A-5F	10-1-90	9:45A	Bldg A NW Bedroom	X	TIME 80 LTR 1200
A-blnk	10-1-90	N/A	N/A. Blank	X	Blank

RUSH

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence G. McGee	10-1-90	10:30A	Janice Patterson	Janice Patterson	10/1/90	10:58	[illegible]
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Moots / Janice Patterson

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-500365-1
PROJECT NAME: 50036 Asbestos Abatement Proj Mangmt
SAMPLERS (Signature): Laurence Guy McGee

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
36- H-1B	10-1-90	12:35 P	Bldg H, Living room	X							30 min 450 LTR
- H-2B	10-1-90	12:35	Bldg H, NW Bedroom	X							30 min 450 LTR
- H-3B	10-1-90	12:35	Bldg H, SW Bathroom	X							30 Min 450 LTR
- H-4B	10-1-90	12:35	Bldg H, South side (outside)	X							30 Min 450 LTR
- F-1B	10-1-90	2:00	Bldg F, Utility room	X							45 Min 675 LTR
- F-2B	10-1-90	2:00	Bldg F, North side (outside)	X							45 Min 675 LTR

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Guy McGee	10-1-90	3:05 PM	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Mock / Guy McGee

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-5036-51

PROJECT NAME: Bulk Samples - Bldg. E

SAMPLERS (Signature): Janice Pettieiew

P.O. #: 20621

LAB: Fibergenic

TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PLM	REMARKS
5036-S1	10/2/90	8:50	Import roof - east side	X	Built up roof
5036-S2	↓	8:55	House roof - south side by AC unit	X	Flat roof
5036-S3	↓	9:01	Kitchen - NEC Linoleum + Mastic	X	

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Janice Pettieiew	10/2/90	10:16	[illegible]
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: Verbals to Office

REPORT TO: Marilyn Moots or Janice Pettieiew

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-57
PROJECT NAME: 50036 Proj. Magnet
SAMPLERS (Signature): Lawrence Guy McGee

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
56- L-1M	10-2-90	13:10	Bldg L, roof south side	X							Time 30 LTR 450
- L-2M	10-2-90	13:10	Bldg L, roof north side	X							Time 25 LTR 375
- L-Blank	10-2-90	N/A	Blank	X							NA-QC

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGee	10-2-90	3:49P	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Moots / Guy McGee

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: 50036 Project Mngm't
SAMPLERS (Signature): Lawrence Guy McGee

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
36 L-Blnk 2	10-3-90	N/A	Blank	X							Time N/A
L-3H	10-3-90	12:50 P	Bldg L, outside, East side (Neg Air)	X							Time: 120 LTR: 1200
L-4H	10-3-90	12:50 P	Bldg L, outside, North side (Decon)	X							Time: 120 LTR: 1200
L-5M	10-3-90	12:50 P	Bldg L, outside, west side (Neg air)	X							Time: 60 LTR: 600

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGee	10-3-90	3:30P	Karen G Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Moats / Guy McGee

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
G-50036-51	50036 Asb. Abtmt Proj Mugut

SAMPLERS (Signature) Lawrence Guy McGee

NO.	DATE	TIME	STATION AND LOCATION	Poly							
L-6M	10-4-90	8:15 A	Bldg L, East side (Neg. Air)	X							
L-7M	10-4-90	8:15 A	Bldg L, North side (Decon)	X							
L-8M	10-4-90	8:15 A	Bldg L, West side (Neg Air)	X							
L-Blnk 3	10-4-90	N/A	N/A Blank	X							

TEST REQUESTED

P.O.# 20621

LAB Fiberquant

TURN AROUND TIME Normal

REMARKS

Time 165 LTR 1320
Time 165 LTR 1320
Time 165 LTR 1320
P.C.

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGee	10-4-90	3:25	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Moots / Guy McGee

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
S-50036-57	50036 Prog Mngmt

SAMPLERS (Signature) Laurence Greg McFee

NO.	DATE	TIME	STATION AND LOCATION	Rad							REMARKS
L-9M	10-5-90	2:15	Bldg L, outside east (Neg air)	X							TIME 315 LTR 2205
L-10M	10-5-90	2:15	Bldg L, South (Decon)	X							TIME 315 LTR 2205
L-11M	10-5-90	2:15	Bldg L, Southwest (neg air)	X							TIME 315 LTR 2205

TEST REQUESTED

P.O. # 20621

LAB Fibergram

TURN AROUND TIME Normal

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Greg McFee	10-5-90	4:00	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
G-50036-51	50036 Proj Mngmt

SAMPLERS (Signature) Laurence Guy McGill

P.O. # 20621

LAB Fitzgerald

TURN AROUND TIME RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCB							REMARKS
6-F-1F	10-5-90	3:20	Bldg F, UTILITY Room	1							TIME 100 LTR 1500
6-F-2F	10-5-90	3:20	Bldg F, UTILITY ROOM	1							TIME 100 LTR 1500
6-F-Blank	10-5-90	N/A	BLANK	1							QC

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Guy McGill	10-5-90	4:00	Jo Ann [illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylen Moots

FORM DATED

RUSH

ET EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-52036-51	52036 Proj. Mngmt

SAMPLERS (Signature) Laurence Gary McGill

TEST REQUESTED: DCM

P.O. # 20621

LAB Fiberquant

TURN AROUND TIME RUSH

NO.	DATE	TIME	STATION AND LOCATION	DCM	REMARKS
L-1F	10-8-90	8:50	Bldg L, Middle North Bedroom	X	Time 145 LTR 1740
L-2F	↓	↓	Bldg L, Living room	X	Time 145 LTR 1740
L-3F	↓	↓	Bldg L, South Porch	X	Time 145 LTR 1740
L-4F	↓	↓	Bldg L, West bathroom Hall	X	Time 145 LTR 1740
L-5F	↓	↓	Bldg L, Carport	X	Time 145 LTR 1740
L-BlankF	↓	↓	Blank Lot 0590-55 track 00773	X	QC.

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Gary McGill	10-8-90	12:09	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-50036-51	50036 Proj Mgt

SAMPLERS (Signature): Lauren Gray McGrin

NO.	DATE	TIME	STATION AND LOCATION	TEST REQUESTED: PCM	
K-1M	10-9-90	7:45	Bldg K, bathhouse breezeway	X	135 min 1350 LTR
K-2M	10-9-90	8:20	Bldg K, outside kitchen (north side)	X	160 min 1600 LTR
K-3M	10-9-90	10:00	Bldg K, upstairs hall by bathroom (west)	X	270 min 2700 LTR

P.O.# 20621

LAB: Fiberguard

TURN AROUND TIME: Normal

REMARKS

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lauren Gray McGrin	10-9-90	4:34	Karen E Johnston
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 6-52036-51
PROJECT NAME: 52036 Proj Mngt
SAMPLERS (Signature): Laurence Gary McGrey

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
KC1-1F	10-9-96	8:00	Bldg K, front closet, north side	X							1200 min 1440 LTR
KC1-2F		"	Bldg K, front closet, south side	X							720 min 1440 LTR
KC2-1F		8:40	Bldg K, stairs closet, west side	X							140 min 1680 LTR
KC2-2F		"	Bldg K, stairs closet, east side	X							140 min 1680 LTR
~~K-1A~~											
K-Blank F1		N/A	Blank	X							QC.

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Gary McGrey	10-9-96	4:34	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marylin Meots

FORM DATED

RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-7
PROJECT NAME: 50036 Proj Mngt
SAMPLERS (Signature): Lawrence Gary McGuire

P.O.#: 20621
LAB: Fiberguard
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCB							REMARKS
KRR-1F	10-10-90	12:35	Bldg K, upstair Restroom	X							195 Min 1950 LTR
KRR-2F			" " "								" " " "
KK-1F			Bldg K, Kitchen								155 Min 1550 LTR
KK-2F			" "								" " "
KK-3F			" "								" " "
JG-1F		1:10	Bldg J, Guest House								130 Min 1560 LTR
JG-2F			" " "								" "
JG-3F			" " "								" "
KBH-1F		2:35	Bldg K, Bath House								100 Min 1200 LTR
KBH-2F			" " "								" "
KBH-3F			" " "								" "
~~JGR-1M~~		~~3:30~~	~~Bldg J, Guest House Roof area~~								
~~JGR-2M~~			~~" " " " "~~								
KC2-3FR		3:35	Bldg K, closet under stairs (C2)								85 Min 1275 LTR
KC2-3FR			" " " " " "								85 min "
K/J Blank	10-10-90	N/A	Blank	X							PCM Blank (QC)

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Gary McGuire	10-10-90	4:40	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moore / Janice Petticrew

FORM DATED

RUSH

per Janice 10/10 4:58P

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-50036-51	50036 Proj. Magnit.

SAMPLERS (Signature): Laurina Amy McGeis

P.O. # 20621

LAB: Fibergunt

TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM	REMARKS
X JGR-1M	10-10-90	3:35	Bldg J, Guest house roof area monitor	X	100 min 800 LTR
JGR-2M	"	"	" " " " " "	X	100 min 800 LTR

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurina Amy McGeis	10-10-90	4:40	Glenn [illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moore / James Petterson

FORM DATED

EXCELTECH
1620 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-50036-51	50036 MCFCD, H

SAMPLERS (Signature) Lawrence Guy McGill Lawrence Guy McGill

NO.	DATE	TIME	STATION AND LOCATION	PCM
6- 4-HM	10-15-90	9:50A/1:20P	Bldg H, near Decon, 1' N/N wall, 8' W of Decon	X

TEST REQUESTED

P.O.# 20621

LAB Fibergrant

TURN AROUND TIME NORMAL

REMARKS

Time 210 LTR 1680

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-15-90	4:42	[illegible]
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: 50036 - MCFCD, J/H
SAMPLERS (Signature): Lawrence Guy McGill Lawrence Guy McGill

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCM	PLM	REMARKS
1-JLF	10-15-90	8:30A/12:35P	Bldg J, Liv. Rm, 6'N/S, 0' E/W	X		245 min 2940 LTR
2-JLF	10-15-90	8:30A/12:35P	Bldg J, Liv. Room, 2'N/S, 0' W/E	X		245 min 2940 LTR
3-Blank	10-15-90	N/A	QC Blank	X		
6-H bulk	10-15-90	2:30 PM	Bldg H, SE addition large room ceiling 6' S/N 12' E/W		X	joint compound/texture from gypbrd

RUSH

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-15-90	4:42	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH

REPORT TO: Marilyn Moots

EXCELTECH
1620 West Mineral Drive, Suite A-1
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FAX: (602) 345-8149

FORM DATED
RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-50036-51	50036 MCFCD, H

SAMPLERS (Signature) Lawrence Guy McGill Lawrence Guy McGill

TEST REQUESTED: PCM

P.O.# 20621

LAB Fiberquant

TURN AROUND TIME RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCM	REMARKS	
5-HF	10-16-90	3:10P/4:30P	Bldg H, Liv. Room, 5'W/E, 9'N/S	X	Time 80 LTR ~~1500~~ 1200	900
6-HF			Bldg H, Liv. Room, 7'E/W, 2'N/S		Time 80 LTR ~~1500~~ 1200	
7-HF			Bldg H, NW Porch, 8'W/E, 3'S/N		Time 80 LTR ~~1500~~ 1200	
8-HF			Bldg H, SW Bedroom Hall, 3'W/E, 4'S/N		Time 80 LTR ~~1500~~ 1200	
9-HF			Bldg H, SW Bedroom, 5'E/W, 8'N/S		Time 80 LTR ~~1500~~ 1200	
10-HOF		3:30P/4:30P	Bldg H, outside, 3'W of decon flaps		Time 60 LTR ~~900~~ 1200	
11-HOF		3:45P/4:30P	Bldg H, outside, 2'W of W. Bathroom window		Time 45 LTR 675	
4-Blank		N/A	QC Blank Lot 0590-55 Pack 00773		QC Blank	

Lawrence Guy McGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-16-90	5:22P	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH

REPORT TO: Marilyn Moots

FORM DATED

RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-J7
PROJECT NAME: 50036 MCFCD, J/H
SAMPLERS (Signature): Lawrence Guy McGill Lawrence Guy McGill

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: NORMAL

NO.	DATE	TIME	STATION AND LOCATION	TEST REQUESTED: PCM	REMARKS
36 1-JSLM	10-16-90	8:20A/11:00A	Blag J, 3'N, 11'W of NW corner	X	Time 160 LTR 1600
2-JSLM			Blag J, 15'S, 9'W of NW corner	X	Time 160 LTR 1600
3-HM		9:10A/11:30	Bldg H, near decon, 8'W decon, 1'N/N wall	X	Time 140 LTR 1120
~~4-Blank~~			(Blank QC sample)	X	~~Blank QC Sample~~

Lawrence Guy McGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-16-90	5:22P	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

ECOLUTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

FORM DATED

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-57
PROJECT NAME: 50036 MCFCD, H · Finals
SAMPLERS (Signature): Lawrence Guy McGill · Lawrence Guy McGill

P.O.#: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCM	REMARKS
0335 1-HFR	10-17-90	1:05P/2:25P	Living Rm, 5'W/E, 10'N/S, Bldg H	X	Time 80 LTR 1200
" 2-HFR	↓	↓	Lv. Rm, 7'E/W, 2'N/S, Bldg H	X	Time 80 LTR 1200
" 3-HFR			NW Porch, 7'W/E, 3'S/N Bldg H	X	Time 80 LTR 1200
" 4-HFR			SW Bedroom Hall, 1'E/W, 3'N/S Bldg H	X	Time 80 LTR 1200
" 5-HFR			SW Bedroom, 4'E/W, 5'N/S, Bldg H	X	Time 80 LTR 1200
" 6-Blank	10-17-90	N/A	Blank	X	QC Blank

Lawrence Guy McGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10/17/90	3:32P	Karen E Johnston
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH

REPORT TO: Marilyn Mouts

FORM DATED

RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-57
PROJECT NAME: 50036 MCFCD, H Dunway
SAMPLERS (Signature): Lawrence Guy McGill
Lawrence Guy McGill

P.O.#: 20621
LAB: Fiberquant
TURN AROUND TIME: NORMAL

NO.	DATE	TIME	STATION AND LOCATION	PCH							REMARKS
36 1-HRM	10-18-90	9:35A/2:05P	Bldg H, 3'E & 18'N of NW corner of house	X							Time 270 LTR 2160
2-HRM	10-18-90	↓	Bldg H, 15'W, 25'N of SW corner	X							Time 270 LTR 2160
3-blank	10-18-90	N/A	QC Blank	X							Blank

LGMcGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10/18/90	3:29P	Karen E. Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Mats

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY

PROJECT NO.	PROJECT NAME
5-50036-57	50036 MCFCD, H Durina

SAMPLERS (Signature) Lawrence Guy McGill Lawrence Guy McGill

P.O. # 20621

LAB Fibergvant

TURN AROUND TIME NORMAL

NO.	DATE	TIME	STATION AND LOCATION	PCM	REMARKS
36 1-HRM	10-19-90	8:45A/12:25P	Bldg H, 6'E, 9'N of NW corner of N Porch	X	Time 220 LTR 1760
2-HRM	10-19-90	8:50A/	Bldg H, 3'E, 18'N of NW corner of house	X	Time 275 LTR 2200
3-HRM	10-19-90	8:55A/1:30P	Bldg H, 25'N, 15'W of SW corner of house	X	Time 275 LTR 2200
4-Blank	10-19-90	N/A	QC Blank	X	QC Blank

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-19-90	5:14	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: 50036 - MCFCD, H Durning
SAMPLERS (Signature): Lawrence Guy McGill Lawrence Guy McGill

P.O.#: 20621
LAB: Fibertguard
TURN AROUND TIME: NORMAL

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
50036-1-HRM	10-23-90	8:40A/10:25A	Bldg H; 5'N, 7'E of N. Porch's NW corner	X							TIME 105 LTR 840
" -2-HRM	10-23-90	"	Bldg H; 16'N, 6'E of NW corner of house	X							TIME 105 LTR 840
" -3-HRM											
50036-3-Blank	10-23-90	N/A	QC Blank	X							Blank

L Guy McGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-23-90	2:04	[illegible signature]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-S0036-51
PROJECT NAME: S0036 MCFCD H/E
SAMPLERS (Signature): Lawrence Guy McGill / Lawrence Guy McGill

P.O. #: 20621
LAB: E.Q.
TURN AROUND TIME: Normal

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
86- 1 - HM	10-24-90	9:30 a / 12:05 p	Bldg H, 6'N, 7'E of NW corner N Porch	X							Time 155 LTR 1550
1 2-ERB		9:45 a / 12:40 p	Bldg E, 8'N/S, 13'W/E (ROOF)	X							Time 175 LTR 2100
1 3-EKB		10:05 a / 12:40 p	Bldg E, 5'W/E, 0'S/N (KITCHEN)	X							Time 155 LTR 1560
1 4-blank		N/A	Blank QC	X							Blank

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10/25/90	2:30	Karen E. Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-5003651
PROJECT NAME: 50036 - MCFCD, H/E
SAMPLERS (Signature): Lawrence Guy McGill Lawrence Guy McGill

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: NORMAL

NO.	DATE	TIME	STATION AND LOCATION	TEST REQUESTED: PCM	REMARKS
36 1-AM	10-25-90	1:40P / 11:46A	Bldg H monitor, 6'E, 7'N of N Porch NW corner	X	TIME 245
2-EM	↓		Bldg E monitor, 1'N, 13'W of NW corner	X	115
3-EM	↓		" " , 3'N, 8'E of NE corner	X	LTR 2450
					1380

L G McGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10/25/90	4:31P	Karen E Johnston
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-50036-51
PROJECT NAME: 50036 – MCFCD, H
SAMPLERS (Signature): Lawrence Guy McGill Lawrence Guy McGill

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCM							REMARKS
50036 4-HEF	10-25-90	1:25P	Bldg H East, 10'S, 5'E of N Porch NW corner	X							Time 100 LTR 1200
5-HEF	↓	↓	, 10'S, 6'W of N Porch NE corner	X							↓ ↓ ↓ ↓
6-HEF			, 15'N, 0'N of NE corner of house (under overhang)	X							
7-HEF			, 8'E, 1'S of SW corner of E section (under overhang)	X							
8-HEF			, 8'W/E, 10'S/N in east end section	X							
9-blank		N/A	Blank	X							QC Blank

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10/25/90	4:31P	Karen E Johnston				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH

REPORT TO: Marilyn Roots

FORM DATED: RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5500365-7
PROJECT NAME: 52036-MCFCD, E
SAMPLERS (Signature): Lawrence Guy McGill, Lawrence Guy McGill

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PCM	REMARKS
036 1-EF	10-26-90	8:50a/10:50a	Bldg E Kitchen, 3' W/E, 0' S/N	X	Time 120 Lin 1440
" 2-EF	↓	"	Bldg E Bathroom Hall, 2' E/W, 0' S/N	X	Time 120 Lin 1440
" 3-blank		N/A	Blank	X	Q.C

Lawrence McGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-26-90	1:15	[illegible]
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH

REPORT TO: Marilyn Moots

FORM DATED: RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

FIBERQUANT INC.

4624 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2883

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / PROJECT MANAGEMENT
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

7 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1M	90-9-1189	9-18-90	900	0.003	0.002	0.01	0.003	8
50036-2M	90-9-1190	9-18-90	900	0.005	0.002	0.01	0.003	11
50036-3M	90-9-1191	9-18-90	900	0.003	0.002	0.01	0.003	8
50036-1A	90-9-1192	9-18-90	900	0.002	0.0008	0.007	0.003	4
50036-2A	90-9-1193	9-18-90	900	0.02	0.009	0.03	0.003	40
50036-3A	90-9-1194	9-18-90	900	0.01	0.005	0.02	0.003	23
BLANK	90-9-1195	9-18-90	0	BLANK:	1 COUNT PER 100 FIELDS			1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 9/25/90

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2882

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

7 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-C1	90-9-1182	9-19-90	750	0.001	0.0002	0.006	0.004	2
50036-C2	90-9-1183	9-19-90	750	0.003	0.001	0.01	0.004	5
50036-B1	90-9-1184	9-19-90	750	0.006	0.003	0.02	0.004	11
50036-B2	90-9-1185	9-19-90	750	0.003	0.002	0.01	0.004	6
50036-D1	90-9-1186	9-19-90	600	0.004	0.002	0.02	0.004	6
50036-D2	90-9-1187	9-19-90	600	0.002	0.0007	0.01	0.004	3
BLANK	90-9-1188	9-19-90	0	BLANK:	0 COUNTS PER 100 FIELDS			<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 9/25/90

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ASBESTOS ANALYSIS.

JOB #: 90-2904

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

2 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-M1	90-9-1272	9-20-90	1200	0.008	0.004	0.02	0.002	24
50036-BLNK	90-9-1273	9-20-90	0	BLANK:	0 COUNTS PER 100 FIELDS			<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 9/25/90

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ASBESTOS ANALYSIS

JOB #: 90-2903

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

7 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-MC1	90-9-1265	9-21-90	1200	0.002	0.0009	0.008	0.002	6
50036-MC2	90-9-1266	9-21-90	1200	0.003	0.001	0.008	0.002	9
50036-MC3	90-9-1267	9-21-90	1200	0.002	0.0009	0.008	0.002	6
50036-MC4	90-9-1268	9-21-90	1200	0.002	0.001	0.01	0.002	8
50036-MC5	90-9-1269	9-21-90	1200	0.005	0.003	0.01	0.002	16
50036-MC6	90-9-1270	9-21-90	1200	0.003	0.001	0.01	0.002	8
50036-MCBLNK	90-9-1271	9-21-90	0	BLANK:	0 COUNTS PER 100 FIELDS			<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 9/25/90

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2929

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

2 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036C-1A	90-9-1427	9-24-90	600	0.006	0.003	0.02	0.004	9
50036C-2A	90-9-1428	9-24-90	600	0.003	0.001	0.01	0.004	4

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/4/90

FIBERQUANT INC.

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(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2946

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

6 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-D-1R	90-9-1577	9-25-90	1295	0.002	0.0008	0.008	0.002	6
50036-D-2R	90-9-1578	9-25-90	1246	0.001	0.0007	0.006	0.002	4
50036-D-3R	90-9-1579	9-25-90	1190	0.002	0.001	0.008	0.002	6
50036-BLK-C	90-9-1580	9-25-90	0	BLANK: 0 COUNTS PER 100 FIELDS				<1
50036-C1	90-9-1581	9-25-90	1200	0.002	0.0009	0.008	0.002	6
50036-C2	90-9-1582	9-25-90	1200	0.001	0.0007	0.006	0.002	4

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/5/90

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2947

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-J-1B	90-9-1583	9-25-90	675	0.002	0.001	0.01	0.004	4
50036-J-2B	90-9-1584	9-25-90	675	0.006	0.003	0.02	0.004	11
50036-J-3B	90-9-1585	9-25-90	600	0.004	0.002	0.02	0.004	7

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/5/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2960

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-C1	90-9-1628	9-26-90	1200	0.001	0.0006	0.005	0.002	4
50036-C2	90-9-1629	9-26-90	1200	0.003	0.001	0.01	0.002	8
50036-C3	90-9-1630	9-26-90	1200	0.003	0.001	0.008	0.002	9

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/5/90

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(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2964

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-L-1B	90-9-1646	9-26-90	675	0.001	0.0003	0.006	0.004	2
50036-L-2B	90-9-1647	9-26-90	675	0.002	0.001	0.01	0.004	4
50036-L-3B	90-9-1648	9-26-90	675	0.001	0.0003	0.006	0.004	2

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/5/90

FIBERQUANT INC.
4624 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2975

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

5 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-K-1B	90-9-1684	9-27-90	1125	0.003	0.002	0.01	0.002	10
50036-K-2B	90-9-1685	9-27-90	1050	0.003	0.002	0.01	0.003	9
50036-K-3B	90-9-1686	9-27-90	930	0.001	0.0004	0.007	0.003	3
50036-K-4B	90-9-1687	9-27-90	900	0.004	0.002	0.01	0.003	9
50036-K-BLK	90-9-1688	9-27-90	0	BLANK: 0 COUNTS PER 100 FIELDS				<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/5/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-2971

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

9 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-927-B1	90-9-1665	9-27-90	1200	0.007	0.004	0.02	0.002	23
50036-927-B2	90-9-1666	9-27-90	1200	0.003	0.001	0.01	0.002	8
50036-C-1F	90-9-1667	9-27-90	1200	0.004	0.002	0.01	0.002	11
50036-C-2F	90-9-1668	9-27-90	1200	0.003	0.002	0.008	0.002	9
50036-C-3F	90-9-1669	9-27-90	1200	0.002	0.0008	0.007	0.002	5
50036-C-4F	90-9-1670	9-27-90	1200	0.002	0.001	0.008	0.002	6
50036-C-5F	90-9-1671	9-27-90	1200	0.002	0.001	0.01	0.002	8
50036-C-6F	90-9-1672	9-27-90	1200	0.003	0.002	0.009	0.002	10
50036-BLK-F	90-9-1673	9-27-90	0	BLANK: 1 COUNT PER 100 FIELDS				1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/5/90

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ASBESTOS ANALYSIS

JOB #: 90-2983

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

2 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF	RANGE	LOD	F/MM2
50036-A-1M	90-9-1717	9-28-90	600	0.004	0.002	0.02	0.004	7
50036-A-2M	90-9-1718	9-28-90	600	0.003	0.002	0.01	0.004	5

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/5/90

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ASBESTOS ANALYSIS

JOB #: 90-2982

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

5 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-B-1F	90-9-1712	9-28-90	1200	0.001	0.0007	0.006	0.002	4
50036-B-2F	90-9-1713	9-28-90	1200	0.003	0.001	0.01	0.002	8
50036-B-3F	90-9-1714	9-28-90	1200	0.002	0.001	0.008	0.002	6
50036-B-4F	90-9-1715	9-28-90	1200	0.002	0.001	0.009	0.002	7
50036-B-BLK	90-9-1716	9-28-90	0	BLANK: 0 COUNTS PER 100 FIELDS				<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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ASBESTOS ANALYSIS

JOB #: 90-2992

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

6 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-A-1F	90-10-29	10-01-90	1200	0.005	0.002	0.01	0.002	14
50036-A-2F	90-10-30	10-01-90	1200	0.004	0.002	0.01	0.002	12
50036-A-3F	90-10-31	10-01-90	1200	0.004	0.002	0.01	0.002	11
50036-A-4F	90-10-32	10-01-90	1200	0.004	0.002	0.01	0.002	11
50036-A-5F	90-10-33	10-01-90	1200	0.003	0.002	0.009	0.002	10
50036-A-BLK	90-10-34	10-01-90	0	BLANK: 0 COUNTS PER 100 FIELDS				<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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ASBESTOS ANALYSIS

JOB #: 90-2997

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

6 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-H-1B	90-10-47	10-01-90	450	0.007	0.004	0.03	0.006	8
50036-H-2B	90-10-48	10-01-90	450	0.007	0.004	0.03	0.006	8
50036-H-3B	90-10-49	10-01-90	450	0.009	0.004	0.02	0.006	10
50036-H-4B	90-10-50	10-01-90	450	0.002	0.0007	0.01	0.006	3
50036-F-1B	90-10-51	10-01-90	675	0.003	0.001	0.01	0.004	4
50036-F-2B	90-10-52	10-01-90	675	0.002	0.001	0.01	0.004	4

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/5/90

FIBERQUANT INC.

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ASBESTOS ANALYSIS

JOB #: 90-3006

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-L-1M	90-10-89	10-02-90	450	0.005	0.002	0.02	0.006	6
50036-L-2M	90-10-90	10-02-90	375	0.005	0.002	0.02	0.007	4
50036-L-BLK	90-10-91	10-02-90	0	BLANK:	0 COUNTS PER 100 FIELDS			<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB #: 90-3026

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

4 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-L-BLK2	90-10-213	10-03-90	0	BLANK:	1 COUNT PER 100 FIELDS			1
50036-L-3M	90-10-214	10-03-90	1200	0.001	0.0007	0.006	0.002	4
50036-L-4M	90-10-215	10-03-90	1200	0.002	0.001	0.009	0.002	7
50036-L-5M	90-10-216	10-03-90	600	0.003	0.001	0.01	0.004	4

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/5/90

FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB #: 90-3041

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

4 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-L-6M	90-10-309	10-04-90	1320	0.0004	0.00009	0.002	0.002	1
50036-L-7M	90-10-310	10-04-90	1320	0.0006	0.0001	0.003	0.002	2
50036-L-8M	90-10-311	10-04-90	1320	0.001	0.0007	0.007	0.002	5
50036-L-BLK-3	90-10-312	10-04-90	0	BLANK: 2 COUNTS PER 100 FIELDS				3

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/5/90

FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB #: 90-3052

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-L-9M	90-10-337	10-05-90	2205	0.001	0.0007	0.005	0.001	8
50036-L-10M	90-10-338	10-05-90	2205	0.003	0.001	0.006	0.001	15
50036-L-11M	90-10-339	10-05-90	2205	0.001	0.0006	0.005	0.001	7

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/10/90

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ASBESTOS ANALYSIS

JOB #: 90-3051

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-F-1F	90-10-334	10-05-90	1500	0.005	0.002	0.01	0.002	18
50036-F-2F	90-10-335	10-05-90	1500	0.003	0.002	0.008	0.002	13
50036-F-BLK	90-10-336	10-05-90	0	BLANK: 1 COUNT PER 100 FIELDS				1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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ASBESTOS ANALYSIS

JOB #: 90-3071

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

6 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-L-1F	90-10-418	10-08-90	1740	0.006	0.003	0.01	0.002	26
50036-L-2F	90-10-419	10-08-90	1740	0.005	0.003	0.01	0.002	23
50036-L-3F	90-10-420	10-08-90	1740	0.004	0.002	0.009	0.002	18
50036-L-4F	90-10-421	10-08-90	1740	0.005	0.003	0.01	0.002	24
50036-L-5F	90-10-422	10-08-90	1740	0.003	0.002	0.008	0.002	16
50036-L-BLK-F	90-10-423	10-08-90	0	BLANK: 0 COUNTS PER 100 FIELDS				<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

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DATE 10/10/90

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ASBESTOS ANALYSIS

JOB #: 90-3096

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-K-1M	90-10-606	10-09-90	1350	0.002	0.001	0.008	0.002	7
50036-K-2M	90-10-607	10-09-90	1600	0.005	0.003	0.01	0.002	21
50036-K-3M	90-10-608	10-09-90	2700	0.04	0.02	0.07	0.001	268

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

JULIE W O'GARA

DATE 10/10/90

FIBERQUANT INC.

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ASBESTOS ANALYSIS

JOB #: 90-3095

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

5 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-KC1-1F	90-10-601	10-09-90	1440	0.003	0.001	0.008	0.002	10
50036-KC1-2F	90-10-602	10-09-90	1440	0.002	0.0008	0.007	0.002	6
50036-KC2-1F	90-10-603	10-09-90	1680	0.08	0.04	0.1	0.002	364
50036-KC2-2F	90-10-604	10-09-90	1680	0.07	0.04	0.1	0.002	312
50036-K-BLK-F1	90-10-605	10-09-90	0	BLANK:	1 COUNT PER 100 FIELDS			1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/10/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3116

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

14 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
KRR-1F	90-10-713	10-10-90	1950	0.003	0.002	0.008	0.001	18
KRR-2F	90-10-714	10-10-90	1950	0.004	0.002	0.009	0.001	20
KK-1F	90-10-715	10-10-90	1550	0.003	0.002	0.008	0.002	13
KK-2F	90-10-716	10-10-90	1550	0.004	0.002	0.01	0.002	16
KK-3F	90-10-717	10-10-90	1550	0.004	0.002	0.01	0.002	16
JG-1F	90-10-718	10-10-90	1560	0.002	0.001	0.007	0.002	10
JG-2F	90-10-719	10-10-90	1560	0.004	0.002	0.009	0.002	15
JG-3F	90-10-720	10-10-90	1560	0.005	0.003	0.01	0.002	21
KBH-1F	90-10-721	10-10-90	1200	0.004	0.002	0.01	0.002	14
KBH-2F	90-10-722	10-10-90	1200	0.006	0.003	0.01	0.002	18
KBH-3F	90-10-723	10-10-90	1200	0.003	0.002	0.009	0.002	10
KC2-3FR	90-10-724	10-10-90	1275	0.004	0.002	0.009	0.002	13
KC2-4FR	90-10-725	10-10-90	1275	0.005	0.002	0.01	0.002	15
K/JBLK	90-10-726	10-10-90	0	BLANK:	3 COUNTS PER 100 FIELDS			4

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES: SAMPLES NOT CORRECTED FOR BLANK VALUE.

VICTOR G GOLUBIC

DATE 10/16/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3117

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / AZ CANAL
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

2 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-JGR-1M	90-10-727	10-10-90	800	0.004	0.002	0.02	0.003	8
50036-JGR-2M	90-10-728	10-10-90	800	0.005	0.002	0.01	0.003	10

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/16/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3156

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

1 sample was received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-4-HM	90-10-920	10-15-90	1680	0.03	0.01	0.05	0.002	127

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

LINDA S LEWIS

DATE 10/17/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3154

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, J/H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-JFL	90-10-916	10-15-90	2940	0.006	0.003	0.01	0.0009	47
50036-2-JFL	90-10-917	10-15-90	2940	0.006	0.003	0.01	0.0009	49
50036-3-BLK	90-10-918	10-15-90	0	BLANK: 1 COUNT PER 100 FIELDS				1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

LINDA S LEWIS

DATE 10/17/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3165

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

8 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-05-HF	90-10-964	10-16-90	1200	0.01	0.005	0.02	0.002	33
50036-06-HF	90-10-965	10-16-90	1200	0.01	0.005	0.02	0.002	34
50036-07-HF	90-10-966	10-16-90	1200	0.01	0.005	0.02	0.002	30
50036-08-HF	90-10-967	10-16-90	1200	0.003	0.002	0.009	0.002	10
50036-09-HF	90-10-968	10-16-90	1200	0.003	0.001	0.008	0.002	9
50036-10-HF	90-10-969	10-16-90	900	0.01	0.005	0.02	0.003	23
50036-11-HF	90-10-970	10-16-90	675	0.002	0.001	0.01	0.004	4
50036-4BLNK	90-10-971	10-16-90	0	BLANK:	4 COUNTS PER 100 FIELDS			5

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES: SAMPLES NOT CORRECTED FOR BLANK VALUE.

VICTOR G GOLUBIC

DATE 10/17/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3167

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / MCFCD, J/H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-JSLM	90-10-981	10-16-90	1600	0.004	0.002	0.009	0.002	15
50036-2-JSLM	90-10-982	10-16-90	1600	0.003	0.001	0.008	0.002	12
50036-3-HM	90-10-983	10-16-90	1120	0.005	0.002	0.01	0.002	13

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

VICTOR G GOLUBIC

DATE 10/18/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3182

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 / MCFCD, H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

6 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-HFR	90-10-1065	10-17-90	1200	0.006	0.003	0.01	0.002	18
50036-2-HFR	90-10-1066	10-17-90	1200	0.004	0.002	0.01	0.002	13
50036-3-HFR	90-10-1067	10-17-90	1200	0.005	0.003	0.01	0.002	16
50036-4-HFR	90-10-1068	10-17-90	1200	0.005	0.002	0.01	0.002	15
50036-5-HFR	90-10-1069	10-17-90	1200	0.005	0.002	0.01	0.002	15
50036-6-BLK	90-10-1070	10-17-90	0	BLANK: 2 COUNTS PER 100 FIELDS				3

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

VICTOR G GOLUBIC

DATE 10/18/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3201

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-HRM	90-10-1163	10-18-90	2160	0.003	0.001	0.006	0.001	14
50036-2-HRM	90-10-1164	10-18-90	2160	0.003	0.001	0.006	0.001	15
50036-3-BLK	90-10-1165	10-18-90	0	BLANK: 1 COUNT PER 100 FIELDS				1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/24/90

FIBERQUANT INC.

4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3220

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

4 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-HRM	90-10-1267	10-19-90	1760	0.01	0.005	0.02	0.002	47
50036-2-HRM	90-10-1268	10-19-90	2760	0.008	0.004	0.03	0.001	55
50036-3-HRM	90-10-1269	10-19-90	2200	0.006	0.003	0.01	0.001	37
50036-4-BLK	90-10-1270	10-19-90	0	BLANK: 0 COUNTS PER 100 FIELDS				<1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assumed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Larry S. Pierce

LARRY S PIERCE

DATE 10/24/90

FIBERQUANT INC.

4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3236

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-HRM	90-10-1342	10-23-90	840	0.03	0.02	0.06	0.003	69
50036-2-HRM	90-10-1343	10-23-90	840	0.005	0.003	0.01	0.003	11
50036-3-BLK	90-10-1344	10-23-90	0	BLANK:	3 COUNTS PER 100 FIELDS			4

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES: SAMPLE 1: PART OF SAMPLE ON PAD.
SAMPLES NOT CORRECTED FOR BLANK VALUE.

LINDA S LEWIS

DATE 10/30/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3248

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H/E
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

4 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-HM	90-10-1406	10-24-90	1550	0.008	0.004	0.02	0.002	31
50036-2-ERB	90-10-1407	10-24-90	2100	0.002	0.001	0.006	0.001	13
50036-3-EKB	90-10-1408	10-24-90	1860	0.002	0.001	0.007	0.001	11
50036-4-BLK	90-10-1409	10-24-90	0	BLANK: 1 COUNT PER 100 FIELDS				1

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/30/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3264

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H/E
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-HM	90-10-1494	10-25-90	2450	NO ANALYSIS: NOT MOUNTED				
50036-2-EM	90-10-1495	10-25-90	1380	0.002	0.0009	0.007	0.002	6
50036-3-EM	90-10-1496	10-25-90	1380	0.002	0.0008	0.007	0.002	6

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES: SAMPLE 1: SAMPLE ON PAD.

Julie W. O'Gara
JULIE W O'GARA

DATE 10/30/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3263

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD., STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, H
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

6 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-4-HEF	90-10-1488	10-25-90	1200	0.003	0.001	0.008	0.002	9
50036-5-HEF	90-10-1489	10-25-90	1200	0.001	0.0006	0.005	0.002	4
50036-6-HEF	90-10-1490	10-25-90	1200	0.001	0.0006	0.005	0.002	4
50036-7-HEF	90-10-1491	10-25-90	1200	0.002	0.0008	0.007	0.002	5
50036-8-HEF	90-10-1492	10-25-90	1200	0.001	0.0007	0.006	0.002	4
50036-9-BLK	90-10-1493	10-25-90	0	BLANK:	2 COUNTS PER 100 FIELDS			3

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

VICTOR G GOLUBIC

DATE 10/30/90

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB #: 90-3272

FIBER DETERMINATION BY PHASE CONTRAST MICROSCOPY (PCM)

CLIENT: EXCELTECH CORPORATION
ADDRESS: 1520 W. MINERAL RD. STE. A-1
TEMPE, AZ 85283

PROJECT: 5-50036-51 ; MCFCD, E
METHOD: 7400A Interlab STD.DEV. S_r = 0.30 + POISSON COMPONENT

3 samples were received for phase contrast optical analysis. The analyst has successfully completed a NIOSH 582 training course in this type of analysis. Fiberquant participates in the Proficiency Analytical Testing Program (PAT) as well as intra- and inter-lab quality assurance programs. The results of the analyses can be summarized as follows:

SAMPLE #	LAB#	DATE SMPD	VOL(L)	F/CC(MEAS)	90% CONF RANGE		LOD	F/MM2
50036-1-EF	90-10-1545	10-26-90	1440	0.002	0.001	0.008	0.002	8
50036-2-EF	90-10-1546	10-26-90	1440	0.003	0.001	0.007	0.002	9
50036-3-BLK	90-10-1547	10-26-90	0	BLANK:	1 1/2 COUNTS PER 100 FIELDS			2

SAMPLE # = client designation; LAB # = unique # assigned upon receipt at lab; DATE SAMPLED = supplied by client; VOL(L) = sample volume in liters; F/CC(MEAS) = fibers per cubic centimeter of air as counted; 90% CONF RANGE = F/CC(MEAS) plus or minus twice the assummed standard deviation; LOD = limit of detection for the sample volume, as stated in the method; F/MM2=fibers per square millimeter of filter. Intralab std. dev. = 0.2 + Poisson Component.

NOTES:

Julie W. O'Gara
JULIE W O'GARA

DATE 10/31/90

SECTION 2

BULK ASBESTOS RESULTS

RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO.	PROJECT NAME
5-52036-51	Bulk Samples - Bldg. E

SAMPLERS (Signature): Sonice Pettiview

P.O. # 20621

LAB: Fiberquant

TURN AROUND TIME: RUSH

	NO.	DATE	TIME	STATION AND LOCATION	PLM							REMARKS
0036	S1	10/2/90	8:50	Carport roof - east side	X							Built up roof
0036	S2	↓	8:55	House roof - south side by AC unit	X							Flat roof
0036	S3	↓	9:01	Kitchen - NEC Linoleum + Mastic	X							

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Sonice Pettiview	10/2/90	0:16	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: Verbals to Office

REPORT TO: Marilyn Moots or Sonice Pettiview

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

FORM DATED

RUSH

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-5003657
PROJECT NAME: 50036 Proj. Managmt.
SAMPLERS (Signature): Laurence Guy McGee
P.O. #: 20621
LAB: Fiberguard
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PLM							REMARKS
036-105-1	10-5-90	11:00 AM	Bldg F, utility room	X							Floor + Moisture Barrier

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Guy McGee	10-5-90	5:00	Marilyn Moots	Marilyn Moots	10/8/90	9:25	Janice Pettiman
RELINQUISHED BY: Janice Pettiman	DATE: 10/8/90	TIME: 9:45	RECEIVED BY: Glenn [illegible]	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH

REPORT TO: Marylin Moots

FORM DATED: RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY

PROJECT NO	PROJECT NAME
5-52036-57	52036 Proj Mngt

SAMPLERS (Signature) Laurence Gary McGee

P.O. # 20621

LAB Fiberquant

TURN AROUND TIME RUSH

NO.	DATE	TIME	STATION AND LOCATION	PLM							REMARKS
6-109-1	10-9-90	2:15 PM	Bldg J, Family room near kitchen	X							texture (on pressed wood)
6-1010-1	10-10-90	11:15 AM	Bldg J, main roof skylight	X							Roof felts, min-cl felt, & tar

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Laurence Gary McGee	10-10-90	12:05	Glenn [illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Mort / Janice Petticrew

FORM DATED

RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 5-S20036-51
PROJECT NAME: S20036 Proj Mngmt
SAMPLERS (Signature): Lawrence Guy McGee

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PLM	REMARKS
6 - 1011H-1	10-11-90	9:55	Bldg H, S. porch clg 14' E/W 1' S/N	X	2 coat plaster (white on off-white) + gypsum board
1011H-2	↓	10:10	Bldg H, S. entry/hall clg, 6' N/S, 10' E/W L.F.	X	paster (1 or 2 coats?) + gypsum board
1011H-3		10:20	Bldg H, N. porch clg, 2' W/E 1' S/N	X	textured gypsum board
1011H-4		10:30	Bldg H, N. overhang clg, 12' W/W porch wall, 2' N/N wall	X	2 coat plaster (brown, white lath) + gyp brd
1011H-5		10:45	Bldg H, BR by Kit, 6' N/S, 0' W/E, 5' E	X	thick white plaster over gyp brd
1011H-6		11:05	Bldg H, Roof from east section house 90' W/E 15' S/N	X	Roof, felt layers & tar (3 felt)

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGee	10-11-90	11:55A	Karen E Johnston
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS:

REPORT TO: Marilyn Moots

FORM DATED

RUSH

EXCELTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 550036-57
PROJECT NAME: 50036 MCFCD; H
SAMPLERS (Signature): Lawrence Guy McGill

P.O. #: 20621
LAB: Fiberquant
TURN AROUND TIME: RUSH

NO.	DATE	TIME	STATION AND LOCATION	PLM	REMARKS
36 5-Hbulk	10-15-90	9:20 AM	Bldg H, South wall of NW room	X	mastic used on accoustic wall tile

RUSH

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-15-90	11:05	J. Ann [illegible]
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH

REPORT TO: Marilyn Moots

FORM DATED: RUSH

EXCORTECH
1520 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

CHAIN OF CUSTODY RECORD

PROJECT NO: 50036-51
PROJECT NAME: 50036 MCFED, H
SAMPLERS (Signature): Lawrence Guy McGill Lawrence Guy McGill

P.O. #: 20621
LAB: Fibersquant
TURN AROUND TIME: Rush

NO.	DATE	TIME	STATION AND LOCATION	RUSH							REMARKS
6-4-Hbulk	10-23-90	1:20 P	Bldg H roof, on top of elg, 7' N/S, 40' W/E	X							roofing material debris (granular)
6-5-Hbulk	"	1:25P	Bldg H roof, on top of elg, 4' S/N, 15' E/W	X							roofing debris met'l and felt pieces

L G McGill

RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
Lawrence Guy McGill	10-23-90	2:04	[illegible]				
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:

REMARKS: RUSH - Test #5 only if #4 is negative

REPORT TO: Marilyn Moots

EXCELTECH
1620 West Mineral Drive, Suite A-1
Tempe, AZ 85283
(602) 345-6640
FAX: (602) 345-8149

FORM DATED

RUSH

FIBERQUANT INC.
4624 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB. NO. 90-3002

ANALYSIS OF BULK SAMPLES FOR ASBESTOS USING POLARIZED LIGHT MICROSCOPY (PLM)

Prepared for: Exceltech Corporation
1520 W. Mineral Dr., Ste. A-1
Tempe, AZ 85283

Client Job or Reference: 5-50036-51 AZ Canal
Number of Samples: 3

The submitted samples were analyzed using the EPA Interim Method #600/M4-82-020 (polarized light microscopy with optical dispersion staining).

The percentage of each fiber type present was determined using visual estimation and/or comparison to percentage standards. For samples consisting of more than one apparent type of material or layer, the percentage of each fiber type in each type of material or layer was determined separately; an overall average for the sample of each fiber type is then calculated and reported under the heading "CONCLUSIONS". Some inhomogeneous samples may be only partly composed of asbestos-containing material (ACM) and therefore may be reported as "negative" (<=1%) when averaged. In these cases, a note has been added to indicate the presence of ACM in the sample.

Samples are reported "positive" when they contain >1% asbestos or asbestiform varieties of regulated minerals. The non-fibrous varieties of amphiboles are reported as fiber types in the "FIBER IDENTIFICATION" section of the report, but are not reported as asbestos in the "CONCLUSIONS." This reporting is consistent with current definitions and regulations, but does not imply that non-fibrous amphiboles are not hazardous. Airborne concentrations of non-fibrous amphiboles may be regulated in certain situations.

The reported friability of a sample refers to that friability observed in the condition analyzed (broken, crushed, etc.), and is not to be substituted for an on-site assessment of friability. The reported relative hazard has been based on the percent of asbestos, the type of asbestos, and the sample friability, and is meant as an approximate indication of the care with which the sample should be handled, not as an evaluation of the material in place.

Each attached lab report relates only to the sample tested, and may not, due to the sampling process, be representative of the material sampled. Samples noted in the report to be "small" samples are likely not to be representative of the material sampled.

The reports may not be reproduced except in full and with the approval of Fiberquant, Inc.

Fiberquant, Inc. is fully accredited by the National Voluntary Laboratory Accreditation Program (NVLAP) to perform the analysis of bulk samples for asbestos using polarized light microscopy. Accreditation does not imply endorsement, by the EPA or any other United States governmental agency, of the products or materials tested.

Larry S. Pierce

Date 10-02-90

Larry S. Pierce
Approved Accreditation Signatory

NVLAP

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90-3002

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCEL TECH

LAB NO. 90-10-80 SAMPLE IDENTIFICATION 50036-51

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE ROOFING MATERIAL COLOR WHITE + BLACK

% FIBER 20-30 HOW MANY FIBER TYPES? 3 PAINTED? ☐ YES ☑ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? See back side

FRIABILITY: NON-FRIABLE ☑ TACKY ☐ HARD FRIABLE ☐ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	20-30	2-5	<1		
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	F	E	D		
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☑ NO	☐ YES ☑ NO	☑ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	CELLULOSE	SYNTHETIC	GLASS FIBER		

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. BITUMEN
2. GRAVEL
3.
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☑ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☑ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD)

ANALYST SIGNATURE [signature] DATE 10-2-90

LINDA S. LEWIS

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90-3002

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCEL TECH

LAB NO. 90-10-81 SAMPLE IDENTIFICATION 50036-52

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE ROOFING MATERIAL COLOR SILVER, BLACK, TAN

% FIBER 20-30 HOW MANY FIBER TYPES? 3 PAINTED? ☑ YES ☐ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? See back side

FRIABILITY: NON-FRIABLE ☑ TACKY ☐ HARD FRIABLE ☐ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1		FIBER TYPE 2		FIBER TYPE 3		FIBER TYPE 4		FIBER TYPE 5	
APPROX. AREA PERCENT	2-5		5-10		5-10					
COLOR										
MORPHOLOGY(A,B,C,D,E,F,*)	A		E		D					
TENSILE STRENGTH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH
ISOTROPIC?	☐ YES	☑ NO	☐ YES	☑ NO	☑ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
PLEOCHROIC?	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
REFRACTIVE INDEX	☑ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ MED	☑ LOW ☐ HIGH	☐ NONE ☐ MED.	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH
SIGN OF ELONGATION	☑ +	☐ −	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −
EXTINCTION	☑ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE
DISP. STAIN CHECK	☑ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
IDENTIFICATION	CHRYSOTILE		CELLULOSE		GLASS FIBER					

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. Bitumen
2. Reflective Paint
3.
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☐ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☑ AVERAGE % ASBESTOS AND TYPE 2-5% CHRYSOTILE

RELATIVE HAZARD ☐ NONE ☑ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD)

ANALYST SIGNATURE [signature] DATE 10-2-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6239
ASBESTOS ANALYSIS

JOB # 90-3002

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCELTECH

LAB NO. 90-10-82 SAMPLE IDENTIFICATION 50036-53

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE LINOLEUM / MASTIC COLOR YELLOW-BROWN & GRA

% FIBER 20-30 HOW MANY FIBER TYPES? 2 PAINTED? ☐ YES ☑ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS?

FRIABILITY: NON-FRIABLE ☐ TACKY ☑ HARD FRIABLE ☐ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	10-20	2-5			
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	A	F			
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☑ NO	☐ YES ☑ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☑ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☑ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☑ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☑ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☑ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	CHRYSOTILE	CELLULOSE			

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. POLYMER
2. FILLER
3. TAN ADHESIVE
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☐ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☑ AVERAGE % ASBESTOS AND TYPE 10-20% CHRYSOTILE

RELATIVE HAZARD ☐ NONE ☑ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD) TOP PART OF TILE - BOTTOM PART OF TILE - 20-30% CHRYS.; 5-10% CELL MASTIC - NO OBSERVED FIBERS

ANALYST SIGNATURE [signature] DATE 10-2-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.

4624 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB. NO. 90-3068

ANALYSIS OF BULK SAMPLES FOR ASBESTOS USING POLARIZED LIGHT MICROSCOPY (PLM)

Prepared for: Exceltech Corporation
1520 W. Mineral Dr., Ste. A-1
Tempe, AZ 85283

Client Job or Reference: 5-50036-61 / AZ Canal
Number of Samples: 1

The submitted samples were analyzed using the EPA Interim Method #600/M4-82-020 (polarized light microscopy with optical dispersion staining).

The percentage of each fiber type present was determined using visual estimation and/or comparison to percentage standards. For samples consisting of more than one apparent type of material or layer, the percentage of each fiber type in each type of material or layer was determined separately; an overall average for the sample of each fiber type is then calculated and reported under the heading "CONCLUSIONS". Some inhomogeneous samples may be only partly composed of asbestos-containing material (ACM) and therefore may be reported as "negative" (<=1%) when averaged. In these cases, a note has been added to indicate the presence of ACM in the sample.

Samples are reported "positive" when they contain >1% asbestos or asbestiform varieties of regulated minerals. The non-fibrous varieties of amphiboles are reported as fiber types in the "FIBER IDENTIFICATION" section of the report, but are not reported as asbestos in the "CONCLUSIONS." This reporting is consistent with current definitions and regulations, but does not imply that non-fibrous amphiboles are not hazardous. Airborne concentrations of non-fibrous amphiboles may be regulated in certain situations.

The reported friability of a sample refers to that friability observed in the condition analyzed (broken, crushed, etc.), and is not to be substituted for an on-site assessment of friability. The reported relative hazard has been based on the percent of asbestos, the type of asbestos, and the sample friability, and is meant as an approximate indication of the care with which the sample should be handled, not as an evaluation of the material in place.

Each attached lab report relates only to the sample tested, and may not, due to the sampling process, be representative of the material sampled. Samples noted in the report to be "small" samples are likely not to be representative of the material sampled.

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Fiberquant, Inc. is fully accredited by the National Voluntary Laboratory Accreditation Program (NVLAP) to perform the analysis of bulk samples for asbestos using polarized light microscopy. Accreditation does not imply endorsement, by the EPA or any other United States governmental agency, of the products or materials tested.

Larry S. Pierce Date 10-08-90
Larry S. Pierce
Approved Accreditation Signatory

NVLAP

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90 - 3068

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCEL TECH

LAB NO. 90-10-415 SAMPLE IDENTIFICATION 500 36 - 105 - 1

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE FLOOR FELT / TILE COLOR BEIGE / BLACK

% FIBER 80 - 90 HOW MANY FIBER TYPES? 2 PAINTED? ☐ YES ☑ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? 3

FRIABILITY: NON-FRIABLE ☐ TACKY ☑ HARD FRIABLE ☐ LOW ☑ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1		FIBER TYPE 2		FIBER TYPE 3		FIBER TYPE 4		FIBER TYPE 5	
APPROX. AREA PERCENT	70 - 80		2 - 5							
COLOR										
MORPHOLOGY(A,B,C,D,E,F,*)	F		E							
TENSILE STRENGTH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH
ISOTROPIC?	☐ YES	☑ NO	☐ YES	☑ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
PLEOCHROIC?	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71	☐ ~1.55 ☐ ~1.68	☐ ~1.61 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH
SIGN OF ELONGATION	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −
EXTINCTION	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE
DISP. STAIN CHECK	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
IDENTIFICATION	CELLULOSE		SYNTHETIC							

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. POLYMER
2. ADHESIVE
3.
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☑ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☑ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD) TILE - 20-30% Cell. WOVEN LAYER WITH MASTIC - 30-40% CELL. BLACK FELT - 2-5% SYN. ; 70-80% Cell. (WET SAMPLE)

ANALYST SIGNATURE [signature] DATE 10-8-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.
4624 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
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ASBESTOS ANALYSIS

OCT 18 1990

JOB. NO. 90-3124

ANALYSIS OF BULK SAMPLES FOR ASBESTOS USING POLARIZED LIGHT MICROSCOPY (PLM)

Prepared for: Exceltech Corporation
1520 W. Mineral Dr., Ste. A-1
Tempe, AZ 85283

Client Job or Reference: 5-50036-51 / AZ Canal
Number of Samples: 6

The submitted samples were analyzed using the EPA Interim Method #600/M4-82-020 (polarized light microscopy with optical dispersion staining).

The percentage of each fiber type present was determined using visual estimation and/or comparison to percentage standards. For samples consisting of more than one apparent type of material or layer, the percentage of each fiber type in each type of material or layer was determined separately; an overall average for the sample of each fiber type is then calculated and reported under the heading "CONCLUSIONS". Some inhomogeneous samples may be only partly composed of asbestos-containing material (ACM) and therefore may be reported as "negative" (<=1%) when averaged. In these cases, a note has been added to indicate the presence of ACM in the sample.

Samples are reported "positive" when they contain >1% asbestos or asbestiform varieties of regulated minerals. The non-fibrous varieties of amphiboles are reported as fiber types in the "FIBER IDENTIFICATION" section of the report, but are not reported as asbestos in the "CONCLUSIONS." This reporting is consistent with current definitions and regulations, but does not imply that non-fibrous amphiboles are not hazardous. Airborne concentrations of non-fibrous amphiboles may be regulated in certain situations.

The reported friability of a sample refers to that friability observed in the condition analyzed (broken, crushed, etc.), and is not to be substituted for an on-site assessment of friability. The reported relative hazard has been based on the percent of asbestos, the type of asbestos, and the sample friability, and is meant as an approximate indication of the care with which the sample should be handled, not as an evaluation of the material in place.

Each attached lab report relates only to the sample tested, and may not, due to the sampling process, be representative of the material sampled. Samples noted in the report to be "small" samples are likely not to be representative of the material sampled.

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Larry S. Pierce Date 10-15-90
Larry S. Pierce
Approved Accreditation Signatory

NVLAP

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90-3110

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT Exceltech

LAB NO. 90-10-681 SAMPLE IDENTIFICATION 50036-109-1

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE Wall Texture COLOR White - Yellow - Tan

% FIBER 5-10 HOW MANY FIBER TYPES? 2 PAINTED? ☒ YES ☐ NO

HOMOGENEOUS ☐ YES ☒ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? 2

FRIABILITY: NON-FRIABLE ☐ TACKY ☐ HARD FRIABLE ☐ LOW ☒ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	5-10	1			
COLOR	Tan				
MORPHOLOGY(A,B,C,D,E,F,*)	F	G			
TENSILE STRENGTH	☒ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☒ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☒ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☒ HIGH	☐ NONE ☐ LOW ☒ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☐ + ☐ −	☒ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☐ ∥ ☐ OBL. ☒ WAVY ☐ NONE	☒ ∥ ☒ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☐ YES ☐ NO	☒ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	Cellulose	Tremolite / Actinolite Nonfibrous			

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. White Powder
2. Filler
3. Wood Backing
4. White Paint
5. Yellow Paint

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☒ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE _____

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE _____

RELATIVE HAZARD ☒ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD)

ANALYST SIGNATURE David M. Schaller DATE 10-14-90

ANALYST DAVID M. SCHALLER

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90-3110

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT Exceltech

LAB NO. 90-10-682 SAMPLE IDENTIFICATION 50036-1010-1

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE Roofing Material COLOR Black-White-Tan

% FIBER 30-40 HOW MANY FIBER TYPES? 3 PAINTED? ☐ YES ☒ NO

HOMOGENEOUS ☐ YES ☒ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? 5+

FRIABILITY: NON-FRIABLE ☒ TACKY ☐ HARD FRIABLE ☐ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	5-10	20-30	2-5		
COLOR	Colorless	Tan	White		
MORPHOLOGY(A,B,C,D,E,F,*)	P	F	A		
TENSILE STRENGTH	☒ LOW ☐ HIGH	☒ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☒ YES ☐ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☒ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☒ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☒ HIGH	☐ NONE ☒ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☐ + ☐ −	☐ + ☐ −	☒ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☒ WAVY ☐ NONE	☒ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☐ YES ☐ NO	☐ YES ☐ NO	☒ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	Fibrous Glass	Cellulose	Chrysotile		

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. Bitumen
2. Filler
3. White Gravel
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☐ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☒ AVERAGE % ASBESTOS AND TYPE 2-5 Chrysotile

RELATIVE HAZARD ☐ NONE ☒ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD) See Reverse for layer-by-layer analysis

ANALYST SIGNATURE David M. Schaller DATE 10-24-90

ANALYST DAVID M. SCHALLER

FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB # 90-3124

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCELTECH (PHONE 345-6640)

LAB NO. 90-10-751 SAMPLE IDENTIFICATION 50036-1011H-1

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE CEILING & PLASTER & GYPSUM BOARD COLOR GREEN, WHITE, & BROWN

% FIBER 5-10 HOW MANY FIBER TYPES? 1 PAINTED? ☑ YES ☐ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? 5-6

FRIABILITY: NON-FRIABLE ☐ TACKY ☐ HARD FRIABLE ☑ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	5-10				
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	F				
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☑ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	Cellulose				

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. POWDER/BINDER
2. GLASS FOAM
3. GRANULAR MINERALS
4. PAINT
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☑ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☑ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD)

ANALYST SIGNATURE [signature] DATE 10-11-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB # 90-3124

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCELTECH

LAB NO. 90-10-752 SAMPLE IDENTIFICATION 50036-10114-2

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE CEILING PLASTER + GYPSUM BOARD COLOR GREEN, WHITE, + BROWN

% FIBER 5-10 HOW MANY FIBER TYPES? 2 PAINTED? ☑ YES ☐ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? 5-6

FRIABILITY: NON-FRIABLE ☐ TACKY ☐ HARD FRIABLE ☑ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	5-10	<1			
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	F	D			
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☑ NO	☑ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	Cellulose	Glass Wool			

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. Powder / Binder
2. Glass Foam
3. Granular Minerals
4. Paint
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☑ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☑ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD)

ANALYST SIGNATURE L. S. L. DATE 10-11-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB # 90-3124

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCELTECH

LAB NO. 90-10-753 SAMPLE IDENTIFICATION 50036-1011H-3

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE Drywall COLOR Green, Brown + White

% FIBER 10-20 HOW MANY FIBER TYPES? 2 PAINTED? ☑ YES ☐ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? ~3-4

FRIABILITY: NON-FRIABLE ☐ TACKY ☐ HARD FRIABLE ☑ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	<1	10-20			
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	A	F			
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☑ NO	☐ YES ☑ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☑ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☑ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☑ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☑ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☑ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	Chrysotile	Cellulose			

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. Powder/Binder
2. Paint
3. Mica
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☐ NO ASBESTOS OBSERVED
☑ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE Chrysotile

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☐ NONE ☑ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD) Paint + Texture - 2-5% Chrys; 2-5% Cell.
Fibrous Layer - 90-100% Cell.
Wt. Powder - 2-5% Cell.

ANALYST SIGNATURE [signature] DATE 10-15-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB # 90-3124

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCELTECH

LAB NO. 90-10-754 SAMPLE IDENTIFICATION 50036-1011H-4

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE PLASTER COLOR GREEN, WHITE, BROWN

% FIBER 5-10 HOW MANY FIBER TYPES? 1 PAINTED? ☑ YES ☐ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? ~7

FRIABILITY: NON-FRIABLE ☐ TACKY ☐ HARD FRIABLE ☑ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	5-10				
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	F				
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☑ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	CELLULOSE				

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. POWDER/BINDER
2. GLASS FOAM
3. GRANULAR MINERALS
4. PAINT
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☑ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☑ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD)

ANALYST SIGNATURE [signature] DATE 10-11-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

OCT 18 1990

JOB. NO. 90-3149

ANALYSIS OF BULK SAMPLES FOR ASBESTOS USING POLARIZED LIGHT MICROSCOPY (PLM)

Prepared for: Exceltech Corporation
1520 W. Mineral Dr., Ste. A-1
Tempe, AZ 85283

Client Job or Reference: 5-50036-51 MCFCH;H
Number of Samples: 1

The submitted samples were analyzed using the EPA Interim Method #600/M4-82-020 (polarized light microscopy with optical dispersion staining).

The percentage of each fiber type present was determined using visual estimation and/or comparison to percentage standards. For samples consisting of more than one apparent type of material or layer, the percentage of each fiber type in each type of material or layer was determined separately; an overall average for the sample of each fiber type is then calculated and reported under the heading "CONCLUSIONS". Some inhomogeneous samples may be only partly composed of asbestos-containing material (ACM) and therefore may be reported as "negative" (<=1%) when averaged. In these cases, a note has been added to indicate the presence of ACM in the sample.

Samples are reported "positive" when they contain >1% asbestos or asbestiform varieties of regulated minerals. The non-fibrous varieties of amphiboles are reported as fiber types in the "FIBER IDENTIFICATION" section of the report, but are not reported as asbestos in the "CONCLUSIONS." This reporting is consistent with current definitions and regulations, but does not imply that non-fibrous amphiboles are not hazardous. Airborne concentrations of non-fibrous amphiboles may be regulated in certain situations.

The reported friability of a sample refers to that friability observed in the condition analyzed (broken, crushed, etc.), and is not to be substituted for an on-site assessment of friability. The reported relative hazard has been based on the percent of asbestos, the type of asbestos, and the sample friability, and is meant as an approximate indication of the care with which the sample should be handled, not as an evaluation of the material in place.

Each attached lab report relates only to the sample tested, and may not, due to the sampling process, be representative of the material sampled. Samples noted in the report to be "small" samples are likely not to be representative of the material sampled.

The reports may not be reproduced except in full and with the approval of Fiberquant, Inc.

Fiberquant, Inc. is fully accredited by the National Voluntary Laboratory Accreditation Program (NVLAP) to perform the analysis of bulk samples for asbestos using polarized light microscopy. Accreditation does not imply endorsement, by the EPA or any other United States governmental agency, of the products or materials tested.

Larry S. Pierce Date 10-15-90
Larry S. Pierce
Approved Accreditation Signatory

NVLAP

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90-3149

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT Exceltech

LAB NO. 90-10-891 SAMPLE IDENTIFICATION 50036-5-4 bulk

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE Ceiling Tile Mastic COLOR Brown

% FIBER 2-5 HOW MANY FIBER TYPES? 1 PAINTED? ☐ YES ☒ NO

HOMOGENEOUS ☒ YES ☐ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS?

FRIABILITY: NON-FRIABLE ☐ TACKY ☒ HARD FRIABLE ☐ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	2-5				
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	F				
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☒ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☒ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☐ ‖ ☐ OBL. ☒ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	Cellulose				

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. Brown Adhesive
2.
3.
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☒ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☒ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD)

ANALYST SIGNATURE David M. Schaller DATE 10-15-90

ANALYST DAVID M. SCHALLER

FIBERQUANT INC.
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ASBESTOS ANALYSIS

OCT 18 1990

JOB. NO. 90-3110

ANALYSIS OF BULK SAMPLES FOR ASBESTOS USING POLARIZED LIGHT MICROSCOPY (PLM)

Prepared for: Exceltech Corporation
1520 W. Mineral Dr., Ste. A-1
Tempe, AZ 85283

Client Job or Reference: 5-50036-51 / AZ Canal
Number of Samples: 2

The submitted samples were analyzed using the EPA Interim Method #600/M4-82-020 (polarized light microscopy with optical dispersion staining).

The percentage of each fiber type present was determined using visual estimation and/or comparison to percentage standards. For samples consisting of more than one apparent type of material or layer, the percentage of each fiber type in each type of material or layer was determined separately; an overall average for the sample of each fiber type is then calculated and reported under the heading "CONCLUSIONS". Some inhomogeneous samples may be only partly composed of asbestos-containing material (ACM) and therefore may be reported as "negative" (<=1%) when averaged. In these cases, a note has been added to indicate the presence of ACM in the sample.

Samples are reported "positive" when they contain >1% asbestos or asbestiform varieties of regulated minerals. The non-fibrous varieties of amphiboles are reported as fiber types in the "FIBER IDENTIFICATION" section of the report, but are not reported as asbestos in the "CONCLUSIONS." This reporting is consistent with current definitions and regulations, but does not imply that non-fibrous amphiboles are not hazardous. Airborne concentrations of non-fibrous amphiboles may be regulated in certain situations.

The reported friability of a sample refers to that friability observed in the condition analyzed (broken, crushed, etc.), and is not to be substituted for an on-site assessment of friability. The reported relative hazard has been based on the percent of asbestos, the type of asbestos, and the sample friability, and is meant as an approximate indication of the care with which the sample should be handled, not as an evaluation of the material in place.

Each attached lab report relates only to the sample tested, and may not, due to the sampling process, be representative of the material sampled. Samples noted in the report to be "small" samples are likely not to be representative of the material sampled.

The reports may not be reproduced except in full and with the approval of Fiberquant, Inc.

Fiberquant, Inc. is fully accredited by the National Voluntary Laboratory Accreditation Program (NVLAP) to perform the analysis of bulk samples for asbestos using polarized light microscopy. Accreditation does not imply endorsement, by the EPA or any other United States governmental agency, of the products or materials tested.

Larry S. Pierce Date 10-15-90
Larry S. Pierce
Approved Accreditation Signatory

NVLAP

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90-3124

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCELTECH

LAB NO. 90-10-755 SAMPLE IDENTIFICATION 50036-1011H-5

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE PLASTER OVER GYPSUM COLOR TAN + WHITE

% FIBER 5-10 HOW MANY FIBER TYPES? 1 PAINTED? ☑ YES ☐ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? 5

FRIABILITY: NON-FRIABLE ☐ TACKY ☐ HARD FRIABLE ☑ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1		FIBER TYPE 2		FIBER TYPE 3		FIBER TYPE 4		FIBER TYPE 5	
APPROX. AREA PERCENT	5-10									
COLOR										
MORPHOLOGY(A,B,C,D,E,F,*)	F									
TENSILE STRENGTH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH	☐ LOW	☐ HIGH
ISOTROPIC?	☐ YES	☑ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
PLEOCHROIC?	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
REFRACTIVE INDEX	☐ ~1.55	☐ ~1.61	☐ ~1.55	☐ ~1.61	☐ ~1.55	☐ ~1.61	☐ ~1.55	☐ ~1.61	☐ ~1.55	☐ ~1.61
	☐ ~1.68	☐ ~1.71	☐ ~1.68	☐ ~1.71	☐ ~1.68	☐ ~1.71	☐ ~1.68	☐ ~1.71	☐ ~1.68	☐ ~1.71
BIREFRINGENCE	☐ NONE	☐ LOW	☐ NONE	☐ LOW	☐ NONE	☐ LOW	☐ NONE	☐ LOW	☐ NONE	☐ LOW
	☐ MED	☐ HIGH	☐ MED	☐ HIGH	☐ MED	☐ HIGH	☐ MED	☐ HIGH	☐ MED	☐ HIGH
SIGN OF ELONGATION	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −
EXTINCTION	☐ ‖	☐ OBL.	☐ ‖	☐ OBL.	☐ ‖	☐ OBL.	☐ ‖	☐ OBL.	☐ ‖	☐ OBL.
	☐ WAVY	☐ NONE	☐ WAVY	☐ NONE	☐ WAVY	☐ NONE	☐ WAVY	☐ NONE	☐ WAVY	☐ NONE
DISP. STAIN CHECK	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
IDENTIFICATION	Cellulose									

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. POWDER / BINDER
2. GLASS FOAM
3. PAINT
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☑ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☐ AVERAGE % ASBESTOS AND TYPE

RELATIVE HAZARD ☑ NONE ☐ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD) (NO TEXTURE LAYER OBSERVED)

ANALYST SIGNATURE [signature] DATE 10-15-90

ANALYST LINDA S. LEWIS

FIBERQUANT INC.
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ASBESTOS ANALYSIS

JOB # 90-3124

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT EXCELTECH

LAB NO. 90-10-756 SAMPLE IDENTIFICATION 50036-1011H-6

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE Roofing Material COLOR Silver Gray, + Black

% FIBER 30-40 HOW MANY FIBER TYPES? 4 PAINTED? ☑ YES ☐ NO

HOMOGENEOUS ☐ YES ☑ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? See back side

FRIABILITY: NON-FRIABLE ☑ TACKY ☐ HARD FRIABLE ☑ LOW ☐ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	5-10	20-30	<1	<1	
COLOR					
MORPHOLOGY(A,B,C,D,E,F,*)	A	F	D	E	
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☑ NO	☐ YES ☑ NO	☑ YES ☐ NO	☐ YES ☑ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☑ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☑ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☑ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☑ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☑ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	Chrysotile	Cellulose	GLASS FIBERS	SYNTHETIC	

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. Bitumen
2. Paint
3.
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☐ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☑ AVERAGE % ASBESTOS AND TYPE 5-10% Chrysotile

RELATIVE HAZARD ☐ NONE ☑ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD) See back side for layer analysis.

ANALYST SIGNATURE [signature] DATE 10-15-90

LINDA S. LEWIS

FIBERQUANT INC.
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(602) 276-6139
ASBESTOS ANALYSIS

JOB. NO. 90-3155

ANALYSIS OF BULK SAMPLES FOR ASBESTOS USING POLARIZED LIGHT MICROSCOPY (PLM)

Prepared for: Exceltech Corporation
1520 W. Mineral Dr., Ste. A-1
Tempe, AZ 85283

Client Job or Reference: 5050036-51 ; MCFCD , J/H
Number of Samples: 1

The submitted samples were analyzed using the EPA Interim Method #600/M4-82-020 (polarized light microscopy with optical dispersion staining).

The percentage of each fiber type present was determined using visual estimation and/or comparison to percentage standards. For samples consisting of more than one apparent type of material or layer, the percentage of each fiber type in each type of material or layer was determined separately; an overall average for the sample of each fiber type is then calculated and reported under the heading "CONCLUSIONS". Some inhomogeneous samples may be only partly composed of asbestos-containing material (ACM) and therefore may be reported as "negative" (<=1%) when averaged. In these cases, a note has been added to indicate the presence of ACM in the sample.

Samples are reported "positive" when they contain >1% asbestos or asbestiform varieties of regulated minerals. The non-fibrous varieties of amphiboles are reported as fiber types in the "FIBER IDENTIFICATION" section of the report, but are not reported as asbestos in the "CONCLUSIONS." This reporting is consistent with current definitions and regulations, but does not imply that non-fibrous amphiboles are not hazardous. Airborne concentrations of non-fibrous amphiboles may be regulated in certain situations.

The reported friability of a sample refers to that friability observed in the condition analyzed (broken, crushed, etc.), and is not to be substituted for an on-site assessment of friability. The reported relative hazard has been based on the percent of asbestos, the type of asbestos, and the sample friability, and is meant as an approximate indication of the care with which the sample should be handled, not as an evaluation of the material in place.

Each attached lab report relates only to the sample tested, and may not, due to the sampling process, be representative of the material sampled. Samples noted in the report to be "small" samples are likely not to be representative of the material sampled.

The reports may not be reproduced except in full and with the approval of Fiberquant, Inc.

Fiberquant, Inc. is fully accredited by the National Voluntary Laboratory Accreditation Program (NVLAP) to perform the analysis of bulk samples for asbestos using polarized light microscopy. Accreditation does not imply endorsement, by the EPA or any other United States governmental agency, of the products or materials tested.

Larry S. Pierce

Date 10-16-90

Larry S. Pierce
Approved Accreditation Signatory

NVLAP

FIBERQUANT INC.
4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB # 90-3155

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

CLIENT Exceltech

LAB NO. 90-10-919 SAMPLE IDENTIFICATION 50036-6-H BULK

SAMPLE DESCRIPTION

APPARENT TYPE OF SAMPLE Plaster board COLOR Grey / Tan

% FIBER 30-40 HOW MANY FIBER TYPES? TWO PAINTED? ☐ YES ☒ NO

HOMOGENEOUS ☐ YES ☒ NO IF NO, HOW MANY MATERIAL TYPES OR LAYERS? 3

FRIABILITY: NON-FRIABLE ☐ TACKY ☐ HARD FRIABLE ☐ LOW ☒ MEDIUM ☐ HIGH

FIBER IDENTIFICATION

	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4	FIBER TYPE 5
APPROX. AREA PERCENT	30-40	2-5			
COLOR	white	white			
MORPHOLOGY(A,B,C,D,E,F,*)	F	A			
TENSILE STRENGTH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH	☐ LOW ☐ HIGH
ISOTROPIC?	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☒ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☒ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71	☐ ~1.55 ☐ ~1.61 ☐ ~1.68 ☐ ~1.71
BIREFRINGENCE	☐ NONE ☒ LOW ☐ MED ☐ HIGH	☐ NONE ☒ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☒ + ☐ −	☒ + ☐ −	☐ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☒ ∥ ☐ OBL. ☒ WAVY ☐ NONE	☒ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE	☐ ∥ ☐ OBL. ☐ WAVY ☐ NONE
DISP. STAIN CHECK	☒ YES ☐ NO	☒ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
IDENTIFICATION	cellulose	Chrysotile			

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. clastic white powder
2.
3.
4.
5.

*MORPHOLOGY:
A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE { ☐ NO ASBESTOS OBSERVED
☐ LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE

POSITIVE ☒ AVERAGE % ASBESTOS AND TYPE 2-5% Chrysotile

RELATIVE HAZARD ☐ NONE ☒ LOW ☐ MEDIUM ☐ HIGH

NOTES: (SEE COVER SHEET FOR METHOD) 2-5% chrysotile in plaster layers, 100% cellulose in middle felt layer

ANALYST SIGNATURE Victor Golubic DATE 10-16-90

ANALYST Victor Golubic

FIBERQUANT INC.

4824 - B SOUTH 35th ST • PHOENIX, ARIZONA • 85040
(602) 276-6139
ASBESTOS ANALYSIS

JOB. NO. 90-3235

ANALYSIS OF BULK SAMPLES FOR ASBESTOS USING POLARIZED LIGHT MICROSCOPY (PLM)

Prepared for: Exceltech Corporation
1520 W. Mineral Dr., Ste. A-1
Tempe, AZ 85283

Client Job or Reference: 5-50036-51 ; MCFCD, H
Number of Samples: 2

Method and Definitions

The submitted samples were analyzed using the EPA Interim Method 0600/M4-82-020 (polarized light microscopy with optical dispersion staining). The method defines an asbestos-containing material as one that contains greater than 1% asbestos by weight. Asbestos is defined as the fibrous forms of serpentine and certain amphiboles. Fibrous amphiboles are those whose mean aspect ratios (length over width) are approximately >10; non-fibrous amphiboles are those whose mean aspect ratios are approximately <6. That non-fibrous amphiboles are not reported as asbestos is consistant with mineralogical definitions, but does not imply than non-fibrous amphiboles are not hazardous. Airborne concentrations of them may be regulated by OSHA under certain circumstances.

Percentage Reporting

The percentage of each fiber type present was determined using volume percents estimated from stereoscopic examination, projected area percents from mounted slide examination and percents from comparison to weight percent standards. Such estimations are suitable for most samples, but do have large error ranges. Therefore, it is our recommendation that critical samples which fall in the two "borderline" categories be quantified by other means, such as gravimetry. For floor tiles, PLM has been shown to consistently underestimate chrysotile percentages. Therefore, tile percentages are reported as x to 30%+, where x is the least percent that could be present. For samples consisting of more than one apparent type of material or layer, the percentage of each fiber type in each type of material or layer is determined and reported separately; an overall average for the sample of each fiber type is then calculated and reported under the heading "CONCLUSIONS". Some inhomogeneous samples may be only partly composed of asbestos-containing material (ACM) and therefore may be reported as "negative" (<=1%) when averaged.

The reported friability of a sample refers to that friability observed in the condition analyzed (broken, crushed, etc.), and is not to be substituted for an on-site assessment of friability.

Accreditation

Fiberquant, Inc. is fully accredited by the National Voluntary Laboratory Accreditation Program (NVLAP) to perform the analysis of bulk samples for asbestos using polarized light microscopy. Accreditation does not imply endorsement, by the EPA or any other United States governmental agency, of the products or materials tested. Each attached lab report relates only to the sample tested, and may not, due to the sampling process, be representative of the material sampled. Samples noted in the report to be "small" samples are likely not to be representative of the material sampled. The reports may not be reproduced except in full and with the approval of Fiberquant, Inc.

Larry S. Pierce
Approved Accreditation Signatory

Date 10-23-90

FIBERQUANT INC.
4824-B South 35th St.
Phoenix, Arizona 85040
(602) 276-6139 • Fax 276-4558
ASBESTOS ANALYSIS

JOB NO. 90-3235
LAB NO. 90-10-1340

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

INDIVIDUAL SAMPLE REPORT (SEE COVER LETTER FOR METHOD)

SAMPLE DESCRIPTION

CLIENT SAMPLE IDENTIFICATION: 50036-4-HBULK
APPARENT TYPE OF SAMPLE: Roofing Debris
FIBROUS TEXTURE? ☒ YES ☐ NO
HOMOGENEOUS? ☒ YES ☐ NO
PAINTED? ☐ YES ☒ NO
% FIBER OVERALL: 2-5

LAYER DESCRIPTIONS / AREA % OF EACH FIBER IN EACH LAYER

VOLUME % OF EACH LAYER IN SAMPLE %	LAYER TYPE	COLOR	FRIABILITY (1-5)[1]	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4
100	Debris	Black	1	2-5	<1		
OVERALL AREA % OF EACH FIBER TYPE IN SAMPLE				2-5	<1		

FIBER IDENTIFICATION

COLOR	TAN		WHITE					
MORPHOLOGY (A - G[2])	F		D					
ISOTROPIC?	☐ YES	☒ NO	☒ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
PLEOCHROIC?	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
REFRACTIVE INDEX	☒ 1.55 ☐ 1.68 ‖ ___	☐ 1.61 ☐ 1.71 ⊥ ___	☒ 1.55 ☐ 1.68 ‖ ___	☐ 1.61 ☐ 1.71 ⊥ ___	☐ 1.55 ☐ 1.68 ‖ ___	☐ 1.61 ☐ 1.71 ⊥ ___	☐ 1.55 ☐ 1.68 ‖ ___	☐ 1.61 ☐ 1.71 ⊥ ___
BIREFRINGENCE	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH	☐ NONE ☐ MED	☐ LOW ☐ HIGH
SIGN OF ELONGATION	☒ +	☐ −	☐ +	☐ −	☐ +	☐ −	☐ +	☐ −
EXTINCTION	☐ ‖ ☒ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE	☐ ‖ ☐ WAVY	☐ OBL. ☐ NONE
DISPERSION STAIN CHECK	☒ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO	☐ YES	☐ NO
FIBER TYPE IDENTIFICATION	Cellulose		Fibrous Glass					

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:

1. Bitumen
2. Mineral Grains
3.
4.
5.

ADDITIONAL PROCEDURES PERFORMED: ☒ SOLVENT DISSOLUTION ☐ ASHING ☐ ACID ☐ XRD ☐ SEM ☐ TEM ☒ PCM ☐ HOMOGENIZATION ☐ 2ND OPINION

ABBREVIATIONS:

[1]FRIABILITY
- NON-FRIABLE: 1. TACKY, 2. HARD
- FRIABLE: 3. LOW, 4. MED., 5. HIGH

[2]MORPHOLOGY:

A = CURVED, WHITE BUNDLES OR FIBERS
B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
C = STRAIGHT, BLUE BUNDLES OR FIBERS
D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
E = LARGE DIAMETER, CONSTANT DIAMETER
F = RIBBON-LIKE
G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE
☒ NO ASBESTOS OBSERVED
☐ BORDERLINE: LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE ___

POSITIVE
☐ BORDERLINE: GREATER THAN 1%, UP TO 2% ASBESTOS, TYPE ___
☐ % ASBESTOS AND TYPE ___

NOTES:

ANALYST SIGNATURE: Victor Golubic
DATE: 10-23-90
ANALYST: VICTOR G. GOLUBIC

FIBERQUANT INC.
4824-B South 35th St.
Phoenix, Arizona 85040
(602) 276-6139 • Fax 276-4558
ASBESTOS ANALYSIS

JOB NO. 90-3235
LAB NO. 90-10-1341

BULK ASBESTOS DETERMINATION BY POLARIZED LIGHT MICROSCOPY (PLM)

INDIVIDUAL SAMPLE REPORT (SEE COVER LETTER FOR METHOD)

SAMPLE DESCRIPTION

CLIENT SAMPLE IDENTIFICATION: 50036-S-HBULK
APPARENT TYPE OF SAMPLE: ROOFING Debris — FIBROUS TEXTURE? ☒ YES ☐ NO
HOMOGENEOUS? ☐ YES ☒ NO — PAINTED? ☐ YES ☒ NO — % FIBER OVERALL: 30-40

LAYER DESCRIPTIONS / AREA % OF EACH FIBER IN EACH LAYER

VOLUME % OF EACH LAYER IN SAMPLE: %	LAYER TYPE	COLOR	FRIABILITY (1-5)[1]	FIBER TYPE 1	FIBER TYPE 2	FIBER TYPE 3	FIBER TYPE 4
60	BITUMEN CHUNK	BLACK	1	5-10	5-10		
20	BROWN FLAKES	BROWN	2		90-100		
20	Tan Insulation	Tan	3		10-20	70-80	
OVERALL AREA % OF EACH FIBER TYPE IN SAMPLE				2-5	10-20	10-20	

FIBER IDENTIFICATION

COLOR	white	BROWN	Tan	
MORPHOLOGY (A - G[2])	A	F	D	
ISOTROPIC?	☐ YES ☒ NO	☐ YES ☒ NO	☒ YES ☐ NO	☐ YES ☐ NO
PLEOCHROIC?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
REFRACTIVE INDEX	☒ 1.55 ☐ 1.61 ☐ 1.68 ☐ 1.71 ‖ ___ ⊥ ___	☒ 1.55 ☐ 1.61 ☐ 1.68 ☐ 1.71 ‖ ___ ⊥ ___	☒ 1.55 ☐ 1.61 ☐ 1.68 ☐ 1.71 ‖ ___ ⊥ ___	☐ 1.55 ☐ 1.61 ☐ 1.68 ☐ 1.71 ‖ ___ ⊥ ___
BIREFRINGENCE	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH	☐ NONE ☐ LOW ☐ MED ☐ HIGH
SIGN OF ELONGATION	☒ + ☐ −	☒ + ☐ −	☐ + ☐ −	☐ + ☐ −
EXTINCTION	☒ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☒ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE	☐ ‖ ☐ OBL. ☐ WAVY ☐ NONE
DISPERSION STAIN CHECK	☒ YES ☐ NO	☒ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
FIBER TYPE IDENTIFICATION	Chrysotile	Cellulose	FIBROUS GLASS	

NON-FIBROUS COMPONENTS IN ORDER OF DECREASING ABUNDANCE:
1. Bitumen Binder
2. Mineral Grains
3.
4.
5.

ADDITIONAL PROCEDURES PERFORMED: ☐ SOLVENT DISSOLUTION ☐ ASHING ☐ ACID ☐ XRD ☐ SEM ☐ TEM ☐ PCM ☐ HOMOGENIZATION ☐ 2ND OPINION

ABBREVIATIONS:

[1]FRIABILITY
- NON-FRIABLE: 1. TACKY, 2. HARD
- FRIABLE: 3. LOW, 4. MED., 5. HIGH

[2]MORPHOLOGY:
- A = CURVED, WHITE BUNDLES OR FIBERS
- B = STRAIGHT, NEAR-WHITE BUNDLES OR FIBERS
- C = STRAIGHT, BLUE BUNDLES OR FIBERS
- D = BRITTLE, SINGLE FIBERS, VARYING DIAMETERS
- E = LARGE DIAMETER, CONSTANT DIAMETER
- F = RIBBON-LIKE
- G = LATH-LIKE OR SHARDS

CONCLUSIONS

NEGATIVE
☐ NO ASBESTOS OBSERVED
☐ BORDERLINE: LESS THAN OR EQUAL TO 1% ASBESTOS, TYPE ___

POSITIVE
☐ BORDERLINE: GREATER THAN 1%, UP TO 2% ASBESTOS, TYPE ___
☒ % ASBESTOS AND TYPE 2-5 Chrysotile

NOTES:

ANALYST SIGNATURE: [signature] DATE: 10-23-90

ANALYST: VICTOR G. GOLUBIC

APPENDIX D

EPA NOTIFICATION DOCUMENT

ASBESTOS DEMOLITION/RENOVATION NOTIFICATION

MAIL TO
ASBESTOS NOTIFICATION
EPA/NESHAPS Region IX
215 Fremont Street A-3-3
San Francisco, CA 94105

DATE: 10/11/90

PROJECT JOB # 918
(Please see reverse side)

Name of Local Agency ALSO Notified: ADEQ & Maricopa County Air Pollution Control Dist.

Please check one:

_____ Renovation

_____ Demolition requiring 10 day notice

_____ Demolition requiring 20 day notice

XX Revision of Original (Form on reverse side)

EPA USE ONLY

DateRec_____

Pstmrk_____

School_____

Del/ND_____

ADQTE?_____

Code#:_____

Doc#:_____

INSTRUCTIONS ON REVERSE SIDE--PLEASE READ BEFORE USING THIS FORM

1. OPERATOR:_____
(Contractor)
ADDRESS_____
CITY_____ STATE_____
ZIP_____ PHONE( )_____

2. OWNER_____
ADDRESS_____
CITY_____ STATE_____
ZIP_____ PHONE( )_____

3. FACILITY NAME_____
STREET ADDRESS_____
CITY_____ STATE_____
COUNTY_____ ZIP_____

4. FACILITY DESCRIPTION_____
_____
AGE_____ SIZE_____
PRIOR USE_____

5. Project Start Date:___/___/___ Completion Date:___/___/___

6. Estimate of Friable Asbestos: ON PIPE:_____Linear Feet
SURFACE OF OTHER COMPONENTS:_____Square Feet
Nature of Materials:_____

7. DESCRIBE METHODS OF REMOVAL:_____

8. PROCEDURES USED TO COMPLY WITH 40 CFR 61.147 & 152:_____

9. NAME & LOCATION OF DISPOSAL SITE:_____

ANY FURTHER PERTINENT INFO CAN BE INCLUDED BY ATTACHING ADDITIONAL SHEETS
QUESTIONS??? FOR FURTHER INFORMATION CALL (415) 974-0133--8am/4pm M-F

INSTRUCTIONS FOR USE OF ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

RENOVATION: means altering in any way one or more facility components. NOTICE MUST BE POSTMARKED AS EARLY AS POSSIBLE BEFORE PROJECT

DEMOLITION: means the wrecking or taking out of load-supporting structural members of a facility together with any related handling operations
10 Day notice for MORE than 160 sq.ft.or 260 linear ft. asbestos
20 Day notice for LESS than 160 sq.ft.or 260 linear ft. asbestos, includes facilities which contain no asbestos.

FACILITY: means any institutional, commercial or industrial structure, installation, or building. Renovations on single family residences and apartment buildings with 4 units or fewer are exempt from notification to EPA.

PROJECT JOB #: Your OWN IN-HOUSE I.D. for a specific jobsite. Optional, but expedites communication concerning notifications.

LOCAL AGENCY: Most areas in Region 9 have local NESHAP delegated agencies. In these areas notice must be provided to both EPA and the local agency.

1. OPERATOR/CONTRACTOR: Full information concerning person doing the work.
2. PROPERTY OWNER: Complete in full.
3. FACILITY NAME: Must have complete address OR directions to the jobsite.
4. FACILITY DESCRIPTION: Current use of building. Project location in the facility. Other descriptive information as necessary.
5. START AND COMPLETION DATE: Provide month, day and year. Must be revised if dates change. (see revision form below)
6. Estimate of amount to be removed (must be in square or linear feet). Revisions (see form below) must be made for additional amounts uncovered.
7. Examples of methods: glovebag, scrape, remove in sections, etc.
8. Examples: Adequate wetting prior to and during work, double bag, etc. DRY REMOVAL MUST RECEIVE PRIOR WRITTEN APPROVAL FROM EPA OR THE LOCAL DELEGATED AGENCY

IF MORE SPACE IS NEEDED THAN PROVIDED, ADDITIONAL SHEETS SHOULD BE ATTACHED
TO REVISE A NOTIFICATION ALREADY ON FILE WITH EPA, USE FORM PROVIDED BELOW
****

PROJECT NAME Flood Control of Maricopa County PROJECT JOB # 918
ORIGINAL NOTIFICATION DATE 9/10/90 Revision Notice #1 2 3 4 5
please circle

This is to advise that the above referenced notification presently on file has been revised. Please note the revised portion listed.
One House added to Original Contract

PROJECT ( )
CANCELLATION_____

CHANGES FOR THIS REVISION:

1. NEW Location_____
2. NEW Scope of Work 3001 E. San Miguel Ave. (Structure E)
3. ADDITIONAL Quantity of Asbestos 1,100 Sq. Ft.rolled roofing & 1,100 Sq. Ft. Floor Sheet Goods
4. NEW Start Date_____
5. NEW Completion Date_____
6. NEW Disposal Site_____

Mailed 9/10/90

ASBESTOS DEMOLITION/RENOVATION NOTIFICATION

MAIL TO
ASBESTOS NOTIFICATION
EPA/NESHAPS Region IX
215 Fremont Street A-3-3
San Francisco, CA 94105

DATE: September 10, 1990

PROJECT JOB # 918
(Please see reverse side)

Name of Local Agency ALSO Notified: ADEQ & Maricpa County Air Pollution Control Dist.

Please check one:

_____ Renovation

xxx Demolition requiring 10 day notice

_____ Demolition requiring 20 day notice

_____ Revision of Original (Form on reverse side)

EPA USE ONLY

DateRec_____

Pstmrk_____

School_____

Del/ND_____

ADQTE?_____

Code#:_____

Doc#:_____

INSTRUCTIONS ON REVERSE SIDE--PLEASE READ BEFORE USING THIS FORM

1. OPERATOR: Asbestos Services Network dba/ ASNET (Contractor)
ADDRESS 10409 N. 21st. Ave. #5
CITY Phoenix STATE Az.
ZIP 85021 PHONE (602) 861-3184

2. OWNER Flood Control Dist. of Maricopa County
ADDRESS 3335 W. Durango St.
CITY Phoenix STATE Az.
ZIP 85009 PHONE (602) 262-1501

3. FACILITY NAME Forms Attached
STREET ADDRESS
CITY STATE
COUNTY ZIP

4. FACILITY DESCRIPTION One Church
Ten (10) Private Residences
SEE ATTACHED SHEETS
AGE SIZE
PRIOR USE Same

5. Project Start Date: 9 / 20 / 90 Completion Date: 11 / 4 / 90

6. Estimate of Friable Asbestos: ON PIPE: 50 Friable Linear Feet
SURFACE OF OTHER COMPONENTS: 4793 Friable Square Feet 15684 Sq. Ft. Non-Friable
Vars. Floor tile - Mastic-vinyl floormat-texwall mat-popcorn ceiling-vent tape-roofing mat-
Nature of Materials: Drywall tape-roof shingles-plaster wall mat-wall board-foam roof mat.

7. DESCRIBE METHODS OF REMOVAL: Roofs - Keeping material wet and removal with complete suites & resperators, everything else under full containment.

8. PROCEDURES USED TO COMPLY WITH 40 CFR 61.147 & 152:
ing air at all times, double bag with six mil labled bags

9. NAME & LOCATION OF DISPOSAL SITE: Butterfield Station Landfill 41050 S. 99th Ave. Mobile, Az.

ANY FURTHER PERTINENT INFO CAN BE INCLUDED BY ATTACHING ADDITIONAL SHEETS
QUESTIONS??? FOR FURTHER INFORMATION CALL (415) 974-0133--8am/4pm M-F

ASNET
Asbestos Services Network
Hazardous Waste • Asbestos

AGE AND SIZE OF PRIVATE RESIDENSES

1.	7303 N. 14th St. - House	Size 800 Sq. Ft. Age: 32
2.	1407 E. State Ave. - House	Size: 904 Sq. Ft. Age: 40
3.	1407 E. State Ave. - Duplex	Size: 1490 Sq. Ft. Age: 28
4.	1417 E. State Ave. - House	Size: 1101 Sq. Ft. Age: 51
5.	3021 E. San Miguel - House	Size: 4209 Sq. Ft. Age: 48
6.	3197 E. San Miguel - House	Size: 2306 Sq. Ft. Age: 41
7.	3411 E. Stanford Dr. _ House	Size: 1936 Sq. Ft. Age: 21
8.	5418 N. Calle-La-Paz - House	Size: 3450 Sq. Ft. Age: 15
9.	5419 N. Calle-La-Paz - House	Size: 3078 Sq. Ft. Age: 19
10.	2643 E. Siesta Ln. - Church	Size: 4852 Sq. Ft. Age: 15

10409 N. 21st. Avenue • Suite 5 • Phoenix, Arizona • 85021 • (602) 861-3184

MARICOPA COUNT[illegible] 1407 East State Avenue

SAMPLE NO.	RESULT	PERCENTAGE ASBESTOS	MATERIAL TYPE	SAMPLE LOCATION	FRIABILITY	TOTAL AREA
RES-1	Yes	20% Chrysotile	9x9 black floor tile	West bedroom under carpet	Nonfriable	219 sq. ft.*
RES-1	Yes	20% Chrysotile	Black mastic	West bedroom under carpet	Nonfriable	219 sq. ft.
RES-2	Yes	20% Chrysotile	Vinyl floor material	Livingroom under carpet	Nonfriable	216 sq. ft.
RES-3	Yes	20% Chrysotile	9x9 white floor tile	East bedroom under carpet	Nonfriable	211 sq. ft.
RES-3	Yes	10% Chrysotile	Black mastic	East bedroom under carpet	Nonfriable	211 sq. ft.
RES-4	No	NA	Textured wall material	Livingroom wall	NA	NA
RES-5	Yes	30% Chrysotile	White vinyl floor material	Entryway floor	Nonfriable	73 sq. ft.
RES-6	No	NA	Spray on "popcorn" ceiling	Livingroom ceiling	NA	NA
RES-7	No	NA	Vinyl flooring	Kitchen floor	NA	NA
RES-8	Yes	80% Chrysotile	Vent tape	On furnace vent	Friable	50 ln. ft.*
RES-9	No	NA	Roof materials, 5 layers	House roof	NA	NA
RES-10	No	NA	Roof material	Carport roof	NA	NA
DUP1-1	Yes	10% Chrysotile	Spray on "popcorn" ceiling	Livingroom ceiling	Friable	780 sq. ft.
DUP1-2	No	NA	White floor tile	Kitchen floor	NA	NA
DUP1-2	Yes	10% Chrysotile	Black mastic	Kitchen floor under white tile	Nonfriable	150 sq. ft.
DUP1-3	Yes	5% Chrysotile	12x12 green floor tile	Under livingroom carpet	Nonfriable	240 sq. ft.
DUP1-3	Yes	10% Chrysotile	Black mastic	Under livingroom carpet	Nonfriable	240 sq. ft.
DUP1-4	Yes	5% Chrysotile	White floor tile	West bedroom under carpet	Nonfriable	120 sq. ft.
DUP1-4	Yes	20% Chrysotile	Black mastic	West bedroom under carpet	Nonfriable	120 sq. ft.
DUP1-5	Yes	5% Chrysotile	12x12 green floor tile	Hallway under carpet	Nonfriable	25 sq. ft.
DUP1-5	Yes	10% Chrysotile	Black mastic	Hallway under carpet	Nonfriable	25 sq. ft.
DUP1-6	Yes	10% Chrysotile	White floor tile	Bathroom floor	Nonfriable	60 sq. ft.
DUP1-6	Yes	10% Chrysotile	Black mastic	Bathroom floor	Nonfriable	60 sq. ft.
DUP1-7	Yes	10% Chrysotile	Green floor tile	East bedroom under carpet	Nonfriable	150 sq. ft.
DUP1-7	Yes	10% Chrysotile	Black mastic	East bedroom under carpet	Nonfriable	150 sq. ft.
DUP2-1	Yes	5% Chrysotile	12x12 white floor tile	East bedroom under carpet	Nonfriable	150 sq. ft.
DUP2-1	Yes	5% Chrysotile	Tan/brown mastic	East bedroom under carpet	Nonfriable	150 sq. ft.
DUP2-2	Yes	10% Chrysotile	9x9 white floor tile	Livingroom under carpet	Nonfriable	385 sq. ft.
DUP2-2	Yes	25% Chrysotile	Black mastic	Livingroom under carpet	Nonfriable	385 sq. ft.
DUP2-3	Yes	30% Chrysotile	Tan vinyl floor material	Bathroom floor	Nonfriable	60 sq. ft.
DUP2-4	Yes	30% Chrysotile	Tan vinyl floor material	Kitchen floor	Nonfriable	150 sq. ft.
DUP2-5	Yes	10% Chrysotile	Spray on "popcorn" ceiling	Livingroom ceiling	Friable	780 sq. ft.
DUP2-6	No	NA	Roof material	Roof on both duplexes	NA	NA
				Total square feet of ACM in all buildings		3,769 sq. ft.
				Total linear feet of ACM in all buildings		50 ln. ft.

House

100
110
250 LF wall

N.E.

N.W

30x25x9

100, 150=300LF

ca duplex (2)

S.W.

* sq. ft. = square feet; ln. ft. = linear feet

RES = Single family residence; DUP1 = Duplex No. 1; DUP2 = Duplex No. 2

STRUCTURE B - 1407 EAST STATE AVENUE

STRUCTURE C - 1407 EAST STATE AVENUE

~~STRUCTURE F - 3021 EAST SAN MIGUEL AVENUE~~

Tile & mastic - 2400 SF
Sheet - 300
Popcorn - 1600

Flooded House

SAMPLE NO.	RESULT	PERCENTAGE ASBESTOS	MATERIAL TYPE	SAMPLE LOCATION	FRIABILITY	TOTAL AREA
50018-1-1	A Yes	*Tile=10% Mastic=10%	12x12 brown floor tile	Bedroom #1 near doorway	Nonfriable	150 sq. ft.**
50018-1-1	A Yes	*Tile=5% Mastic=0%	Brown tile beneath 12x12	Bedroom #1; beneath 12x12 tile	Nonfriable	150 " "
50018-1-2	A Yes	*Tile=20% Mastic=5%	9x9 brown floor tile	Livingroom near bedroom #1 door	Nonfriable	376 sq. ft.
50018-1-3	A Yes	*Tile=5% Mastic=0%	12x12 white floor tile	Kitchen near southwest corner	Nonfriable	144 sq. ft.
50018-1-3	A Yes	*Tile=3% Mastic=15%	Brown tile beneath 12x12	Kitchen beneath 12x12 white tile	Nonfriable	144 " "
50018-1-4	A No					
50018-1-5	A No					
50018-1-6	A No					
50018-1-7	A Yes	5% Chrysotile	Sprayed on "popcorn" ceiling	Livingroom near center of room	Nonfriable	176 sq. ft.
50018-1-8	A No					
50018-1-9	A No					
50018-2-1	D No					
50018-2-2	D No					
50018-2-3	D No					
50018-2-4	D Yes	15% Chrysotile	Asphalt roof shingle	Southwest corner of house	Friable	789 sq. ft.
50018-3-1	K Yes	*Linoleum=20% Mastic=0%	Linoleum with brick design	Upstairs bathroom in doorway	Nonfriable	77 sq. ft.
50018-3-2	K Yes	*Tile=5% Mastic=10%	12x12 white floor tile & mastic	Kitchen doorway	Nonfriable	300 sq. ft.
50018-3-3	K Yes	3% Chrysotile	Smooth textured wallboard	Kitchen-east wall of heater closet	Nonfriable	1,128 sq. ft.

* All identified ACM not specified is chrysotile asbestos.

**sq. ft. = square feet

150
250
410 L Fwall

House
Rockwool

STRUCTURE A - 7303 NORTH 14TH STREET

STRUCTURE D - 1417 EAST STATE AVENUE

STRUCTURE K - 5418 NORTH CALLE LA PAZ

SAMPLE NO.	RESULT	PERCENTAGE ASBESTOS	MATERIAL TYPE	SAMPLE LOCATION	FRIABILITY	TOTAL AREA
1-51-1 H	YES	Tile = 10% Chrysotile	9x9 pink vinyl floor tile	Northwest corner bathroom;	Nonfriable	70 sq. ft.
		Mastic = 5% Chrysotile	with brick design and	center edge of tile at the door.		
			mastic.			
1-51-2 H	YES	5% Chrysotile	Gray, trowelled on plaster	Northwest corner bedroom; wall	Nonfriable	2,223 sq. ft.
			wall material, smooth	on east side near bathroom door.		
			texture.			
1-51-3 H	NO		Ceiling insulation material	Northeast corner bathroom;		
				ceiling above the doorway.		
1-51-4 H	NO		Smooth textured ceiling	Southwest corner bedroom;		
			plaster board.	center of the ceiling in the room.		
1-51-5 H	YES	3% Chrysotile	Lavender, rough textured	Livingroom; south wall near the	Nonfriable	Included in
			plaster wall material.	doorway.		Sample No. 2
1-51-6 H	YES	60% Chrysotile	Asphalt shingle type of	North side of the building from	Friable	2,300 sq. ft.
			roof material.	the center edge of the roof.		
1-51-7 H	NO		Heater vent tape around	Southwest corner bedroom; vent		
			the grate openings.	grate in the east wall.		

STRUCTURE H - 3197 EAST SAN MIGUEL AVENUE

SAMPLE NO.	RESULT	PERCENTAGE ASBESTOS	MATERIAL TYPE	SAMPLE LOCATION	FRIABILITY	TOTAL AREA
50004-1 J	NO		Textured wallboard	Guest house bathroom wall		
50004-2 J	YES	2% Chrysotile	Textured ceiling board	Guest house bathroom ceiling	Nonfriable	256 sq. ft.
50004-3 J	NO		Smooth textured wallboard	Hallway west of kitchen in house		
50004-4 J	YES	3% Chrysotile	Rough textured wallboard	Family room south wall	Nonfriable	24 sq. ft.
50004-5 J	NO		Textured ceiling board	Bathroom in middle of house		
50004-6 J	NO		Textured wallboard	Wall of northeast corner bedroom		
50004-7 J	YES	5% Chrysotile	Built up roof material	North side of guest house	Nonfriable	256 sq. ft.
50004-8 J	YES J	5% Chrysotile	Foam roof material	West side edge of house	Nonfriable	1,936 sq. ft.
50004-9 L	YES	5% Chrysotile	AC/Htr. unit seam compound	West end roof AC/Htr. unit	Nonfriable	64 lin. ft.
50004-10 L	NO L		Foam roof material	West side of carport, roof edge		
50004-11 L	YES	5% Chrysotile	Textured ceiling board	West center side under carport	Nonfriable	750 sq. ft.
50004-12 L	NO		Rough textured wallboard	Walk-in closet off master suite	Nonfriable	3,097 sq. ft.
50004-13 L	YES	5% Chrysotile	Rough textured ceiling board	Kitchen ceiling above sink		
50004-14 F	YES 0 F	20% Chrysotile X	Orange brick designed linoleum	Utility room floor	Nonfriable	200 sq. ft.
50004-15 F	NO F		"Orange peel" textured wall	South wall, west side kitchen		
50004-16 F	NO F		Rough textured wallboard	Southwest bedroom on north wall		
50004-17 F	NO F		Foam roof material	North side of carport on edge		

3021 Miguel

Roll-mineral 1/8" thick over ~~Asphalt shingle~~ plywood

STRUCTURE F - 3021 EAST SAN MIGUEL AVENUE 200 SQ FT

(STRUCTURE J - 3411 EAST STANFORD DRIVE)

STRUCTURE L - 5419 NORTH CALLE LA PAZ

SAMPLE NO.	RESULT	PERCENTAGE ASBESTOS	MATERIAL TYPE	SAMPLE LOCATION	FRIABILITY	TOTAL AREA
50029-1	Yes	5-10% chrysotile	Popcorn ceiling	SE corner of auditorium	Friable	144 sq. ft.*
50029-2	Yes	Tile=<1% chrysotile	12x12 floor tile and mastic	SE corner of auditorium	Nonfriable	144 sq. ft.
		Mastic=5-10% chrysotile				
50029-3	No		Carpet mastic	SE side of auditorium		
50029-4	No		Drywall tape	SE side of main room		
50029-5	No		Drywall texture insulation	SE side of main room		
50029-6	No		Mastic found under blue carpet	SE side of main room		
50029-7	No		Textured drywall, blue paint	Auditorium	Nonfriable	250 sq. ft.**
50029-8	No		Roof material		↓	↓
50029-9	Yes	10-20% chrysotile	Roof grout, vents, AC, etc.			
*sq. ft. = square feet						
** Note: There are approximately 8 protrusions on the roof plus all of the seams.						

Church

STRUCTURE "M"

2643 EAST SIESTA LANE

[redacted]

ASNET

Asbestos Services Network
Hazardous Waste • Asbestos

September 18,1990

Fire Department Station #29
8444 N. Tatum
Paradise Valley, AZ 85253

ATTN: Fire Chief

Dear Sir,

This letter is to notify you that we will begin Asbestos Abatement work at the following locations;

3411 E. Stanford Dr.
5418 N. Calle-La-Paz
5419 N. Calle-La-Paz

The work will start on September 20,1990 and be completed by November 4,1990.

Being this is Asbestos Abatement work, which is under full containment to authorized personal only. Only under life threatening situations or a fire will anyone be allowed to enter the containment area that is not authorized.

I have enclosed a list of emergency numbers for your reference, in case an emergency arises when we are not on the project site.

If you have any questions concerning this job please call me at my office #861-3184.

Thank You,

Edward P. Barron

Edward P. Barron
Director of Operations

EPB/jls

Enclosed:

10409 N. 21st. Avenue • Suite 5 • Phoenix, Arizona • 85021 • (602) 861-3184

ASNET
Asbestos Services Network
Hazardous Waste • Asbestos

September 18,1990

Paradise Valley Police Dept.
6401 E. Lincoln Dr.
Paradise Valley, AZ 85253

ATTN: Chief of Police

Dear Sir,

This letter is to notify you that we will begin Asbestos Abatement work at the following locations;

3411 E. Stanford Dr.
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10409 N. 21st. Avenue • Suite 5 • Phoenix, Arizona • 85021 • (602) 861-3184

STATE COMPENSATION FUND POLICY NUMBER 205568-9

ASNET
ASBESTOS SERVICES NETWORK

EMERGENCY NUMBERS

JOB NAME Flood Control District

SUPERVISOR Dave Rogers

NEAREST TELEPHONE: _____

NAME	ADDRESS	NUMBER
POLICE Paradise Valley Police Dept.	6401 E. Lincoln Dr. Paradise Valley, Az. 85253	948-7418 Or 911
FIRE Station #29	8444 N. Tatum Paradise Valley, Az. 85253	948-9646
AMBULANCE		911
HOSPITAL Humana	1947 E. Thomas Rd. Phoenix, Arizona	241-7676 Emergency
Contractor: G & M Services	5240 S. 43rd. Ave. Phoenix, Arizona 85041	237-2999
OWNER/ Flood Control Laurence Spanulescu	3335 W. Durango Phoenix, Arizona 85009	Wk. - 345-6640 Hm. - 242-4790
CONSULTANT/ EXCELTECH Janice Petticrew	1520 W. Mineral Rd. Tempe, Arizona 85283	Wk. - 345-6640 Beeper - 420-8072
Guy McGill	" " "	Beeper 238-5352
ASNET/ OFFICE	10409 N. 21st. Ave. #5 Phoenix, Arizona 85021	861-3184
Edward Barron	Beeper Mobil	227-6891 1-602-397-6013
Jim Walden	Beeper	227-4163
John Ginn	Beeper	227-4164

ASNET
Asbestos Services Network
Hazardous Waste • Asbestos

September 18,1990

Police North Resourse Center
302 E. Union Hills
Phoenix, AZ 85024

ATTN: Chief of Police

Dear Sir,

This letter is to notify you that we will begin Asbestos Abatement work at the following locations;

7303 N. 14th Street; 1407 E. State Ave.(House); 1407 E. State Ave (Duplex); 1417 E. State Ave.; 3021 E. San Miguel; 3197 E. San Miguel; 2643 E. Siesta Ln.(Church)

The work will start on September 20,1990 and be completed by November 4,1990.

Being this is Asbestos Abatement work, which is under full containment to authorized personal only. Only under life threatening situations or a fire will anyone be allowed to enter the containment area that is not authorized.

I have enclosed a list of emergency numbers for your reference, in case an emergency arises when we are not on the project site.

If you have any questions concerning this job please call me at my office #861-3184.

Thank You,

Edward P. Barron

Edward P. Barron
Director of Operations

EPB/jls

Enclosed:

10409 N. 21st. Avenue • Suite 5 • Phoenix, Arizona • 85021 • (602) 861-3184

ASNET
Asbestos Services Network
Hazardous Waste • Asbestos

September 18,1990

Division of Fire Prevention
620 W. Washington Rm. #167
Phoenix, AZ 85003

ATTN: Fire Chief

Dear Sir,

This letter is to notify you that we will begin Asbestos Abatement work at the following locations;

7303 N. 14th Street; 1407 E. State Ave.(House); 1407 E. State Ave (Duplex); 1417 E. State Ave.; 3021 E. San Miguel; 3197 E. San Miguel; 2643 E. Siesta Ln.(Church)

The work will start on September 20,1990 and be completed by November 4,1990.

Being this is Asbestos Abatement work, which is under full containment to authorized personal only. Only under life threatening situations or a fire will anyone be allowed to enter the containment area that is not authorized.

I have enclosed a list of emergency numbers for your reference, in case an emergency arises when we are not on the project site.

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Thank You,

Edward P. Barron

Edward P. Barron
Director of Operations

EPB/jls

Enclosed:

10409 N. 21st. Avenue • Suite 5 • Phoenix, Arizona • 85021 • (602) 861-3184

STATE COMPENSATION FUND POLICY NUMBER 205568-9

ASNET
ASBESTOS SERVICES NETWORK

EMERGENCY NUMBERS

JOB NAME Flood Control District

SUPERVISOR Dave Rogers

NEAREST TELEPHONE: _____

NAME	ADDRESS	NUMBER
POLICE North Resourse Center	302 E. Union Hills Phoenix, Arizona	495-5001 Or 911
FIRE Division Of Fire Prevention	620 W. Washington Rm. 167 Phoenix, Arizona 85003 - Georgia	262-6771 Or 911
AMBULANCE		911
HOSPITAL Humana	1947 E. Thomas Rd. Phoenix, Arizona	241-7676 - Emergency
CONTRACTOR: G & M Services	5240 S. 43rd. Ave. Phoenix, Arizona 85041	237-2999
OWNER/ Flood Control Laurence Spanulescu	3335 W. Durango Phoenix, Arizona 85009	Wk. - 345-6640 Hm. - 242-4790
CONSULTANT/ EXCELTECH Janice Petticrew	1520 W. Mineral Rd. Tempe, Arizona 85283	Wk. - 345-6640 Beeper - 420-8072
Guy McGill	" " "	Beeper 238-5352
ASNET/ OFFICE	10409 N. 21st. Ave. #5 Phoenix, Arizona 85021	861-3184
Edward Barron	Beeper Mobil	227-6891 1-602-397-6013
Jim Walden	Beeper	227-4163
John Ginn	Beeper	227-4164

APPENDIX E

ASBESTOS WASTE MANIFESTS

BUTTERFIELD STATION LANDFILL FACILITY № 01037

LOAD TICKET

Customer # Time 9:29 Date 10-08-90

Customer Name Gd m Sux #04

Load Description	Load Quantity	Rate	Amount
Dobredos	30C.4		
WMA# 195893			

X Gilbert Garza
Customer Signature

THIS MEMORANDUM

is an acknowledgment that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

Shipper's No.

Carrier's No.

Date

CARRIER: G & H Services, Inc SCAC

TO: Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM: Shipper /GENERATOR: Flood Cont. Of Maricopa
Street 3335 W. Durham St
Origin Phx, AZ 85019 Zip

CONTRACTOR: Bowxx G & H Services, 5240 S. 43 Ave. Phoenix, AZ 85041

Vehicle Number Attn: Guy Racette

No. Shipping Units	HM	Kind of Packages, Description of Articles (IF HAZARDOUS MATERIALS - PROPER SHIPPING NAME)	HAZARD CLASS	I.D. Number	WEIGHT (subject to correction)	RATE	LABELS REQUIRED (or exemption)
c.y.		Hazardous Substance Solid N.O.S.	ORM - E	NA9188			9188
		(Asbestos) RQ 1lb./.454 kg.					
		Rec'd at Butterfield Station Facility:					
		Date: 10-08-90					
		Time: 9:29 By: Carrie C. Cossey					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE: Prepaid ☐ Collect ☐ $

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES: ☐ PREPAID ☐ COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER

DRIVER SIGNATURE

SHIPPER: /Generator:
PER:
DATE:

CARRIER: G & H Services, Inc.
PER:
DATE:

EMERGENCY RESPONSE TELEPHONE NUMBER: (602)

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Profile # 195893

9-BLS-A4
(Rev. 5/90)

BUTTERFIELD STATION LANDFILL FACILITY № 01051

LOAD TICKET

Customer # Time 8:14 Date 10-10-90

Customer Name Gd m Suc #04

Load Description	Load Quantity	Rate	Amount
Asbestos	30C.4		
WMAF 195893			

X Gilbert Garza
Customer Signature

THIS MEMORANDUM

is an acknowledgment that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

Shipper's No.

CARRIER: G & H Services, Inc

SCAC

Carrier's No.

Date

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM:
Shipper/GENERATOR: Flood Control District
Street 3335 W Durango St.
Origin Phoenix Az Zip 85041

CONTRACTOR:
G & H Services, 5240 S. 43 Ave. Phoenix, AZ 85041

Number Attn: Guy Racette

No. Shipping Units	HM	Kind of Packages, Description of Articles (IF HAZARDOUS MATERIALS - PROPER SHIPPING NAME)	HAZARD CLASS	I.D. Number	WEIGHT (subject to correction)	RATE	LABELS REQUIRED (or exemption)
c.y.		Hazardous Substance Solid N.O.S.	ORM - E	NA9188			9188
		(Asbestos) RQ 1lb./.454 kg.					
		Rec'd at Butterfield Station Facility:					
		Date: 10-10 10					
		Time: 1614					
		By:					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE:
Prepaid ☐
Collect ☐ $

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES
☐ PREPAID ☐ COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order; except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
and hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.
Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER
DRIVER SIGNATURE:

SHIPPER: /Generator:
PER:
DATE:

CARRIER: G & H Services, Inc.
PER:
DATE:

EMERGENCY RESPONSE TELEPHONE NUMBER: 602 ( )

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Profile #195893

9-BLS-A4
(Rev. 5/90)

BUTTERFIELD STATION LANDFILL FACILITY № 01093

LOAD TICKET

Customer # GM Soc Time 1:47 Date 10-18-90

Customer Name GM Soc

Load Description	Load Quantity	Rate	Amount
Asbestos	30 C.Y.		
WMA #195893			

X Gilbert Saze
Customer Signature

THIS MEMORANDUM

is an acknowledgment that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

Shipper's No. _____

Carrier's No. _____

Date _____

CARRIER: G & H Services, Inc SCAC

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM:
Shipper/GENERATOR: Flood Control District
Street 3335 W Durango St.
Origin Phoenix Az Zip 85041

CONTRACTOR:
G & M Services, 5240 S. 43 Ave. Phoenix, AZ 85041

Attn: Guy Racette

No. Shipping Units	HM	Kind of Packages, Description of Articles (IF HAZARDOUS MATERIALS - PROPER SHIPPING NAME)	HAZARD CLASS	I.D. Number	WEIGHT (subject to correction)	RATE	LABELS REQUIRED (or exemption)
c.y.	30	Hazardous Substance Solid N.O.S.	ORM - E	NA9188			9188
		(Asbestos) RQ 1lb./.454 kg.					
		Rec'd at Butterfield Station Facility:					
		Date: 10-18-90		3004			
		Time: 1:44					
		By: [illegible]					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE:
Prepaid ☐
Collect ☐ $

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES
☐ PREPAID ☐ COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.
Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER
DRIVER SIGNATURE:

SHIPPER: /Generator:
PER: [signature]
DATE: 10/18/90

CARRIER: G & H Services, Inc.
PER: [signature]
DATE: 10/18/90

EMERGENCY RESPONSE TELEPHONE NUMBER: 602 ( )

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

9-BLS-A4
(Rev. 5/90)

BUTTERFIELD STATION LANDFILL FACILITY № 01037

LOAD TICKET

Customer # Time 9:29 Date 10-08-90

Customer Name Gd m Sux #04

Load Description	Load Quantity	Rate	Amount
Asbestos	30C.4		
WMA# 195893			

x Gilbert Garza
Customer Signature

BUTTERFIELD STATION LANDFILL FACILITY № 01051

LOAD TICKET

Customer # Time 8:14 Date 10-10-90

Customer Name Gd m Sux #04

Load Description	Load Quantity	Rate	Amount
Asbestos	30C.4		
WMA# 195893			

x Gilbert Garza
Customer Signature

THIS SHIPPING ORDER must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

Shipper's No.

Carrier's No.

CARRIER: G & M Services, Inc SCAC Date

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM:
Shipper/GENERATOR: Flood Control District
Street 3335 W Durango St.
Origin Phoenix Az Zip 85041

CONTRACTOR:
G & M Services, 5240 S. 43 Ave. Phoenix, AZ 85041

Vehicle Number Attn: Guy Racette

No. Shipping Units	HM	Kind of Package, Description of Articles (If Hazardous Materials - Proper Shipping Name)	Hazard Class	I.D. Number	Weight (Subject to Correction)	Rate	Labels Required (If exempt)
c.y. 30		Hazardous Substance Solid N.O.S. (Asbestos) RQ 1lb./.454 kg.	ORM - E	NA9188			9188
		Rec'd at Butterfield Station Facility:					
		Date: 10-10-90					
		Time: 8:14					
		By: Carrie C. Cossey					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE: Prepaid ☐ Collect ☐ $

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

FREIGHT CHARGES ☐ PREPAID ☐ COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER

DRIVER SIGNATURE:

SHIPPER/Generator:
PER: G. Racette
DATE: 10-10-90
EMERGENCY RESPONSE TELEPHONE NUMBER: (602)

CARRIER: G & M Services, Inc.
PER: M. Douglas
DATE: 10/10/90

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.
9-BLS-A4
(Rev. 5/90)

Shipper's No.

Carrier's No.

CARRIER: G & M Services, Inc SCAC Date

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM:
Shipper/GENERATOR: FLOOD CONT. OF MARICOPA
Street 3335 W. DURANGO ST
Origin PHX, AZ 85009 Zip

CONTRACTOR:
G & M Services, 5240 S. 43 Ave. Phoenix, AZ 85041

Vehicle Number Attn: Guy Racette

No. Shipping Units	HM	Kind of Package, Description of Articles (If Hazardous Materials - Proper Shipping Name)	Hazard Class	I.D. Number	Weight (Subject to Correction)	Rate	Labels Required (If exempt)
c.y. 30		Hazardous Substance Solid N.O.S. (Asbestos) RQ 1lb./.454 kg.	ORM - E	NA9188			9188
		Rec'd at Butterfield Station Facility:					
		Date: 10-08-90					
		Time: 9:29					
		By: Carrie C. Cossey					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE: Prepaid ☐ Collect ☐ $

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

FREIGHT CHARGES ☐ PREPAID ☐ COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER

DRIVER SIGNATURE: Gilbert

SHIPPER/Generator: ~~Flood~~ Asst
PER: G. Racette
DATE: 10/8/90
EMERGENCY RESPONSE TELEPHONE NUMBER: (602)

CARRIER: G & M Services, Inc.
PER: M. Douglas
DATE: 10/8/90

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.
9-BLS-A4
(Rev. 5/90)

Shipper's No. _____

Carrier's No. _____

Date _____

CARRIER: G & M Services, Inc SCAC

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85238

FROM:
Shipper /GENERATOR: Flood Cont. of Maricopa
Street 3335 W. Durango St
Origin Phx, AZ 85009 Zip

CONTRACTOR:
Factory G & M Services, 5240 S. 43 Ave, Phoenix, AZ 85041

Vehicle Number: Attn: Guy Pacette

No. Packages	HM	Kind of Packages, Description of Articles (If Hazardous Materials - Proper Shipping Name)	Hazard Class	ID Number	Weight (Subject to Correction)	Rate	Labels Required (If exemption)
c.y.	30	Hazardous Substance Solid N.O.S. (Asbestos) RQ 1lb./.454 kg.	ORM - E	NA9188			9188
		Rec'd at Butterfield Station Facility:					
		Date: 10-08-90					
		Time: 9:29 By: Carrie C. Cossa					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE:
Prepaid ☐
Collect ☐ $

NOTE -- Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

FREIGHT CHARGES
☐ PREPAID ☐ COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO -- FURNISHED BY CARRIER DRIVER SIGNATURE Gilbert

SHIPPER: /Generator: ~~Flood~~ Assoc
PER: A.T. Pacette
DATE: 10/8/90

CARRIER: G & M Services, Inc.
PER: M. Quigley
DATE: 10/8/90

EMERGENCY RESPONSE TELEPHONE NUMBER: (602)

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

9-BLS A2
(Rev. 5/90)

THIS SHIPPING ORDER must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

Shipper's No. _____

Carrier's No. _____

CARRIER: G & M Services, Inc SCAC Date

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM:
Shipper/GENERATOR: Flood Control District
Street 3335 W Durango St.
Origin Phoenix Az Zip 85041

CONTRACTOR:
G & M Services, 5240 S. 43 Ave. Phoenix, AZ 85041

Attn: Guy Racette

No. Packages	HM	Kind of Packaging, Description of Articles (HM HAZARDOUS MATERIALS PROPER SHIPPING NAME)	HAZARD CLASS	I.D. Number	WEIGHT (Subject to Correction)	RATE	LABELS REQUIRED (for HM only)
c.y.	30	Hazardous Substance Solid N.O.S. (Asbestos) 110/.454 kg.	ORM - E	NA9188			9188
		Rec'd At Butterfield Station Facility:					
		Date: 10-10-90					
		Time: 8:14 By: Carol C. Cossey					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE:
Prepaid ☐
Collect ☐ $

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Signature of Consignor

FREIGHT CHARGES
☐ PREPAID ☐ COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER

Driver's SIGNATURE:

SHIPPER/Generator:
PER: [signature]
DATE: 10-10-90

CARRIER: G & M Services, Inc.
PER: [signature]
DATE: 10/10/90

EMERGENCY RESPONSE TELEPHONE NUMBER: 602 ( )

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

9-BLS-A1
(Rev. 5/90)

BUTTERFIELD STATION LANDFILL FACILITY № 01037

LOAD TICKET

Customer # Time 9:29 Date 10-08-90

Customer Name G & M Sux #04

Load Description	Load Quantity	Rate	Amount
Asbestos	30C.4		
WMA# 195893			

x Gilbert Garza
Customer Signature

BUTTERFIELD STATION LANDFILL FACILITY № 01051

LOAD TICKET

Customer # Time 8:14 Date 10-10-90

Customer Name G & M Sux #04

Load Description	Load Quantity	Rate	Amount
Asbestos	30C.4		
WMA# 195893			

x Gilbert Garza
Customer Signature

BUTTERFIELD STATION LANDFILL FACILITY № 01037

LOAD TICKET

Customer # Time 9:29 Date 10-08-90

Customer Name Cd m Sux #04

Load Description	Load Quantity	Rate	Amount
Asbestos	30C.4		
WMA# 195893			

x Gilbert Garza
Customer Signature

BUTTERFIELD STATION LANDFILL FACILITY № 01051

LOAD TICKET

Customer # Time 8:14 Date 10-10-90

Customer Name Cd m Sux #04

Load Description	Load Quantity	Rate	Amount
Asbestos	30C.4		
WMA# 195893			

x Gilbert Garza
Customer Signature

Shipper's No. _____

CARRIER: G & M Services, Inc SCAC Carrier's No. _____ Date _____

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM:
Shipper /GENERATOR: Flood Cont. Of Maricopa
Street 3335 W. Durango St
Origin Phx, AZ 85009 Zip

CONTRACTOR:
Factory G & M Services 5240 S. 43 Ave. Phoenix AZ 85041

Vehicle Number Attn: Guy Pacetta

No. Packages	HM	Kind of Packages, Description of Articles (If HAZARDOUS MATERIALS - PROPER SHIPPING NAME)	HAZARD CLASS	ID Number	WEIGHT (Subject to correction)	RATE	LABELS REQUIRED (for exemptions)
c.y.	30	Hazardous Substance Solid N.O.S.	ORM - E	NA9188			9188
		(Asbestos) RQ 1lb./.454 kg.					
		Rec'd at Butterfield Station Facility:					
		Date: 10-08-90					
		Time: 9:29 By: Carrie C. Cossey					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Aml: $ n/a

C.O.D. FEE: Prepaid ☐ Collect ☐ $

FREIGHT CHARGES ☐ PREPAID ☐ COLLECT

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Signature of Consignor

RECEIVED, subject to the classifications and lawful rates tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER DRIVER SIGNATURE Gilbert

SHIPPER: /Generator: ~~Flood~~ Asst
PER: G. Kepster
DATE: 10/8/90

CARRIER: G & M Services, Inc.
PER: M. Quigley
DATE: 10/8/90

EMERGENCY RESPONSE TELEPHONE NUMBER: (602)

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

9-BLS A2
(Rev. 5/90)

THIS SHIPPING ORDER must be legibly filled in, in ink, in indelible Pencil, or in Carbon, and retained by the Agent.

Shipper's No. _____

Carrier's No. _____
Date

CARRIER: G & M Services, Inc SCAC

TO:
Consignee BUTTERFIELD STATION REGIONAL LANDFILL
Street 40404 S. 99th Avenue
Destination Mobile, AZ Zip 85239

FROM:
Shipper/GENERATOR: Flood Control District
Street 3335 W Durango St.
Origin Phoenix Az Zip 85041

Attn: Guy Bacatis

CONTRACTOR:
G & M Services, 5240 S. 43 Ave, Phoenix, AZ 85043

No. Packages	HM	Kind of Package, Description of Articles (If Hazardous Mark Class) PROPER SHIPPING NAME	Hazard Class	I.D. Number	Weight (Subject to Correction)	Rate	Labels Required (If Hazardous)
c.y. 30		Hazardous Substance Solid N.O.S. (Asbestos) NA 1ib//.454 kg.	ORM - E	NA9188			9188
		Rec'd at Butterfield Station Facility:					
		Date: 10-10-90					
		Time: 8:14					
		By: Carrie C. Cossey					

Remit C.O.D. to:
Address:
City: State: Zip:

COD Amt: $ n/a

C.O.D. FEE:
Prepaid ☐
Collect ☐ $

FREIGHT CHARGES
☐ PREPAID ☐ COLLECT

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ Per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.
Per CONTRACTOR (above)

PLACARDS REQUIRED Yes

PLACARDS SUPPLIED ☒ YES ☐ NO — FURNISHED BY CARRIER
DRIVER SIGNATURE:

SHIPPER/Generator:
PER:
DATE:
EMERGENCY RESPONSE TELEPHONE NUMBER: 602

CARRIER: G & M Services, Inc.
PER:
DATE: 10/10/90

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

9-BLS-A1
(Rev. 5/90)

APPENDIX F

ASBESTOS ABATEMENT CONTRACTOR'S DOCUMENTATION

STATE OF ARIZONA

LICENSE No. 082842

Office of the Registrar of Contractors

STATE OF ARIZONA
OFFICE OF THE REGISTRAR } ss.

To All Whom It May Concern:

This is to Certify That

ASBESTOS SERVICE NETWORK INC DBA
ASNET (CORP.)

having been shown to possess all the necessary qualifications, and having complied with all the requirements of the law, is by order of the Registrar of Contractors on the 3RD day of MAY in the year of our Lord One Thousand Nine Hundred and 89, duly licensed and admitted to engage in and pursue the business of

BE-
ASBESTOS & HAZARDOUS ABATEMENT & CONTAINMENT

Contractor in the State of Arizona. Given under my hand and the seal of the Registrar of Contractors in my office, City of Phoenix, this 3RD day of MAY, 19 89.

Registrar of Contractors 1951

REGISTRAR OF CONTRACTORS

STATE OF ARIZONA

LICENSE No. 082843

Office of the Registrar of Contractors

STATE OF ARIZONA
OFFICE OF THE REGISTRAR } ss.

To All Whom It May Concern:

This is to Certify That

ASBESTOS SERVICE NETWORK INC DBA
ASNET (CORP.)

having been shown to possess all the necessary qualifications, and having complied with all the requirements of the law, is by order of the Registrar of Contractors on the 3RD day of MAY in the year of our Lord One Thousand Nine Hundred and 89, duly licensed and admitted to engage in and pursue the business of

AE-
ASBESTOS & HAZARDOUS ABATEMENT & CONTAINMENT

Contractor in the State of Arizona. Given under my hand and the seal of the Registrar of Contractors in my office, City of Phoenix, this 3RD day of MAY, 19 89.

REGISTRAR OF CONTRACTORS

Given to Excaltech 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/6/90 SUPERVISOR: EDWARD P BARRON

JOB NAME: FLOOD CONTROL JOB#: 918
LOCATION: 5418 W CALLE-LA-PAZ PARADISE VALLEY
NUMBER OF WORKERS: 4

1. Description of work done: PREP ONLY INSIDE HOUSE

2. Equipment Employed: TAPE KNIFES & POLY & SPRAY GLUE

3. Sub-Contractors/Visitors on Job: NONE

4. Test and / or Inspection Made: NONE

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: KITCHEN & BATHROOMS READY FOR REMOVAL ON MONDAY

SEE REVERSE SIDE

Sent to Excaltah 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 9/18/90 SUPERVISOR: Edward P Barron

JOB NAME: Maricopa County Flood Control JOB#: 918
LOCATION:
NUMBER OF WORKERS: 1

1. Description of work done: Set up for job round up mat. & equipment for job sites

2. Equipment Employed: Truck & trailer

3. Sub-Contractors/Visitors on Job: None

4. Test and / or Inspection Made: None

5. Unusual Conditions or Problems: None

6. Status at Quiting: Mat & equipment ready for the start of job

SEE REVERSE SIDE

Given to Excelsior 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/23/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: Flood CONTROL JOB#: 918
LOCATION: 3021 S. SAN MIGUEL
NUMBER OF WORKERS: 8

1. Description of work done: ROOF DETAIL & PREP DONE ON CONTAINMENT.

2. Equipment Employed: TAPE, SHOVELS, SPRAY GLUE, bAG'S

3. Sub-Contractors/Visitors on Job: Guy McGill

4. Test and / or Inspection Made: INSPECTION MADE ON ROOF, will ENCAPSULATE TOMMOROW

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: PREP DONE INSPECTION PASSED START REMOVAL ON CONTAINMENT.

SEE REVERSE SIDE

Given to Excltech 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/24/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: FLOOD CONTROL JOB#: 418
LOCATION: 3021 S. SAN MIGUEL
NUMBER OF WORKERS: 8

1. Description of work done: REMOVAL IN CONTAINMENT BAGOUT, AND DETAIL.

2. Equipment Employed:

3. Sub-Contractors/Visitors on Job: GUY MCGILL

4. Test and / or Inspection Made: ROOF PASSED ENCAPSULATE

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: DETAILING CONTAINMENT ALL BAGS OUT

SEE REVERSE SIDE

Given to Excaltech 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/25/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: Flood JOB#: 918
LOCATION: 3021 E. SAN MIGUEL
NUMBER OF WORKERS: 8

1. Description of work done: DETAICING CONTAINMENT(F) STARTING PREP ON OTHER HOUSE & ROOF REMOVAL & BATHROOM BEING DONE

2. Equipment Employed: 1 1 11

3. Sub-Contractors/Visitors on Job: Guy McGill
ding (F) PASSED FINAL VISUAL, FINAL'S BEING RUN

4. Test and / or Inspection Made: ON CONTAINMENT BUIL-

5. Unusual Conditions or Problems:

6. Status at Quiting: ENCAPSULATED building (F) FINALS RAN.

SEE REVERSE SIDE

Given to Exceltech 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/26/90 SUPERVISOR: EDWARD PARRAR

JOB NAME: FLOOD CONTROL JOB#: 918
LOCATION: 3021 E SAN MIGUEL
NUMBER OF WORKERS: 2

1. Description of work done: TAKE DOWN ~~PO~~ LAST CONTAINMENT THAT HAD PASSED CLEARANCE + CLEAN UP JOB SITE AND TURN OVER TO DEMO

2. Equipment Employed: TRUCK + TRAILER

3. Sub-Contractors/Visitors on Job: NONE

4. Test and / or Inspection Made: NONE

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: JOB COMPLETE

SEE REVERSE SIDE

Given to Exceltech 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: Perry G.

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
10/1/90	Lawrence Guy McGill	Lawrence Guy McGill	Exceltech	7:45	10:00	Proj. mngmt	½ face (A, B & D Site)
"	"	"	"	8:00	8:25	Final Clearance	" (cont. A)
"	"	"	"	9:35	9:45	"	" (cont. A)
"	"	"	"	10:20	11:00	proj-mngmt.	" (Site L)

SUPERVISOR'S SIGNATURE: [signature]
(Must be signed)

Faxed to Excellich 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: flood control JOB #: 718 SUPERVISOR: PERRY GIRARDI

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
10/2/90	Lawrence Guy McGill	Lawrence Guy McGill	Excelteh	7:00	11:25	Proj-mangmt.	1/2 face (site L)
"	"	"	"	12:20	3:15	"	" "

SUPERVISOR'S SIGNATURE: Perry Girardi
(Must be signed)

Given to Exceltech 10-31-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: FLOOD CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
10-3-90	Lawrence Guy McGill	Lawrence Guy McGill	Exceltech	7:00	11:15	Proj. Mangmt	1/2 face (Site L)
"	"	"	"	11:55	3:15	"	" "

SUPERVISOR'S SIGNATURE: Perry Girardin
(Must be signed)

Lawn to Exceltech 10-31-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 CONSULTANT FIRM: EXCELTECH

AREA: (F) DATE: 10/24/90 DAY: WED

NAME (PRINT)	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	7:30	11:20	12:05	1:30	→		1/2 Face (Sites H & E) ~~H Contam~~
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible] (MUST BE SIGNED)

Given to Excultech 10-31-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 CONSULTANT FIRM: EXCELTECH

AREA: (F) DATE: 10/25/90 DAY: THURS

NAME (PRINT)	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	7:15	4:00					1/2 face Sites H/E
2) "	"	"	11:00	11:45	1:00	1:35	3:05	3:20	"H" Containment 1/2 face
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible] (MUST BE SIGNED)

Given to Exceltech 10-31-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: Flood Control JOB#: 918 CONSULTANT FIRM: Exceltech

AREA: 3197 and 3001 E. San Miguel Sites H and E DATE: 10-26-90 DAY: Fri

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	521-88-8177	8:00	11:20	—				1/2 face sites H & E
2).									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excultech 10-30-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood Control JOB#: 918 SUPERVISOR: Perry Graham

AREA: Bldg L. Roof DATE: Oct 2-90 DAY: Tue

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) DAVID Rogers	David Rogers	526-79-[illegible]	12:00	1:00					1/2 Face
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: _____
(MUST BE SIGNED)

Given to Equitech 10-31-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood Control JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (F) DATE: 10/17/90 DAY: WED

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PETE WORKS	RL Works	461-33-5620	1200	1225					1/2 FACE
2) Dandwaddle	Dandwaddle	387-78-8677	1200	1225					1/2 Face
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

ROOF
Given to Equitech 10-31-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood Control JOB#: 918 SUPERVISOR: Perry Gilardini

AREA: (F) DATE: 10/24/90 DAY: Wed

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) David Chase	David Chase	585766129	7:10	10:55	11:20	3:40			1/2 mask
2) Dan Dwyddle	Dan Dwyddle	387-78-8827	7:10	10:59	11:40	3:40			1/2 mask
3) Thom J. Greer	Thom Greer	566-49-0824	7:10	10:53	11:40	3:40			1/2 mask
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Gilardini
(MUST BE SIGNED)

CONTAINMENT
Given to Shallick 10-31-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (F) DATE: 10/24/90 DAY: WED

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PETE WORKS	P L Works	461-33-5620	7:40	1100	1200	3:47	—		1/2 FACE
2) John McKissick	John McKissick	527 754 920	7:40	11:00	1200	3:46	—		1/2 FACE
3) PERRY GIRARDIN	Perry Girardin	006-68-0582	800	[illegible]	1200	3:49	—		1/2 FACE
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-31-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 SUPERVISOR: Perry Sherman

AREA: G DATE: 10/25/90 DAY: THURS

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PETE WORKS	P L Works	461-33-5620	1120	3:40 ~~1:00~~					½ FACE
2) John McKissick	John McKissick	527-35-9920	11:20	3:40					½ FACE
3) JEFF LESTER	Jeff W Lester	587-73-9302	11:20	3:45					
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: _____
(MUST BE SIGNED)

Given to Excaltech 10-31-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (f) DATE: 10/25/90 DAY: THURS

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) ~~PERRY GIRAR~~									\
2) DAVID WEDDLE		387-78-8677	7:10 AM						½ FACE
3) THOM GREER	Thom Greer	566-47-8824	7:10 AM	10:00 AM					½ FACE
4) JOHN McKISSICK	John McKissick	527-75-4420	7:10 AM	1100 AM					½ FACE
5) DAVID CHASE		585-76-6129	7:10 AM						½ FACE
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [signature] (MUST BE SIG

ASNET

DAILY "SIGN IN" AND "OUT" LOG

~~Given to Excaltech 10-31-90~~ Given to Excaltech 10-31-90

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: Structure G DATE: 10/9/90 DAY: TUESDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PETE NORRIS	461-33-5620	700	[illegible]	1100	1200	400	[illegible]	
S Repp	527 913594	700	[illegible]	1100	1200	400	[illegible]	
PERRY GIRARDIN	000-668-0362	700	[illegible]	1130	1200	400	[illegible]	
JERRY LESTER	527-73-9303	7:00	[illegible]	1100	1200	330	[illegible]	
Thom J. GREEN	576-77-5824	7:00	[illegible]	11:00	12:00	4:00	[illegible]	
Dan Lovedale	387-78-8677	7:00	[illegible]	1110	1200	4:00	[illegible]	
DAVID CHASE	585 766 129	800	[illegible]	11:00	1200	330	[illegible]	
JOHN GINN	527-50-9316	8:30	[illegible]	1100	1200	430	[illegible]	
DAVE ROGERS	526 29 8401	9:30	[illegible]	1100	12:00	3:30	[illegible]	

SUPERVISOR'S SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excltech 10-31-90 ASNET

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

JOB NAME: FLOOD CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (4) DATE: 10/24/90 DAY: WED

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
Perry Girardin	006-68-0361	700	Perry Girardin	11:00	1130	400	Perry Girardin	
David Chase	585766129	7:00	David Chase	11:00	1200	400	David Chase	
David Ruddle	387-78-8677	700	David Ruddle	11:00	1200	340	David Ruddle	
Thom J. Green	566-19-8821	7:00	Thom J. Green	11:00	11:30	3:40	Thom J. Green	
Pete Works	466-38-8620	7:30	Pete Works	11:00	1200	400	Pete Works	
John McKissick	527754920	7:30	John McKissick	11:00	1200	400	John McKissick	
Jerry Lester	527-73-80	7:30	Jerry Lester	11:00	1200	400	Jerry Lester	
Dave Rogers	526-78-8[illegible]	7:30	Dave Rogers	11:00	1200	400	Dave Rogers	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-31-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: flood CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (F) DATE: 10/25/90 DAY: THUR'S

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
John McKissick	527 75 4920	7:00	John McKissick	No Lunch-		4:00	John McKissick	
Thom J. GREER	586-44-5824	7:00	Thom J. Greer	12:00			Thom J. Greer	
PERRY GIRARDIN	006-68-0362	700	Perry Girardin			430	Perry Girardin	
DAVID CHASE	585 76 6129	7:00	D. Chase	12:00			D. Chase	
PETE WOERS	461-53-5210	700	P. Woers	930	1100	400	P. Woers	7½
JERRY LESTER	521-73-9302	700	Jerry Lester	930	1100	4:00	Jerry Lester	
DAVE ROGERS	520-27-5821	700	[illegible]	930	1100			
DAVE WEDDLE	397-78-8677	700	Dave Weddle	12:00				

SUPERVISOR'S SIGNATURE: Perry Girardin (MUST B

Given to Excellab 10-31-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: flood control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (f) DATE: 10/26/90 DAY: Fri

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	006-68-0362	1100	Perry Girardin	330			Perry Girardin	
Scott Addison	601-20-5283	1100	Scott Addison	330			Scott Addison	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Analytical Labs

TRAINING CENTER

218 Market Street

Baird, Texas 79504

915-854-1264.

Approved Under Section 206 of TSCA

This Certifies That

John McKissick

has successfully completed the

Asbestos Abatement Training Program

Asbestos Abatement WORKER Course

24 Hour

This the 24th day of June 1990

After Passing a Examination with a score

of 70% or Better

Director

Bob Dye

Coordinator

Leroy F. Skaggs

Certificate No.	Date Examination Passed	Expiration Date
527-75-4920	06-24-1990	06-24-1991

EXAMINATION

Beard Present Yes ____ No ✓ Contact Lens ____ Yes ✓ No; Eyeglasses ____ Yes ✓ No

Age	Height	Weight	Pulse	BP, Systolic	BP Diastolic
19	66 (stocking feet)	121	64	120	80

	FVC	FEV-1	FEV-1 / FVC%
Predicted	4.41	3.79	85.9
Measured	4.54	3.30	72.8
% of Predicted	102.9	87.2	84.7

1. VOLUME (FVC) FORCED VITAL CAPACITY

☑ NORMAL (⩾ 80%) ☐ MILDLY REDUCED (65% - 79%)

☐ MODERATELY REDUCED (50% - 64%) ☐ SEVERELY REDUCED (⩽ 49%)

2. FLOW (FEV. OBS. / OBS. FVC.) FORCED EXPIRATORY VOLUME, 1 SEC. / FORCED VITAL CAPACITY

☐ NORMAL (⩾ 76%) ☑ MILDLY OBSTRUCTED (65% -75%)

☐ MODERATELY OBSTRUCTED (55% - 64%) ☐ SEVERELY OBSTRUCTED (⩽ 54%)

☐ BASED UPON ABOVE TEST RESULTS, FURTHER PULMONARY EVALUATION MAY BE INDICATED.

VALIDATION CRITERIA: Technician certifies that pulmonary function test equipment, procedures, and personnel meet criteria set by OSHA 1910.134, 1910.1043, 1910.1001 and accepted medical practice.

Spirometer: multispirio SA/100

Technician Signature: Linda Ellis Date 6/21/90

Physician Signature: [signature] Date 6/21/90

PHYSICIAN EVALUATION FOR RESPIRATOR USE CLEARANCE, IF REQUIRED

Tympanic Membranes ✓ Intact; Perforated on ____ right, ____ left, ____ not visualized

☐ Deferred. Additional examinations and results needed for final determination. List below:

Procedures	Date Completed	Results

☑ Cleared for respirator use.

☐ Restricted from respirator use because of ____

☐ Contact Lens ☐ Eyeglasses

Restriction is: ☐ Permanent ☐ Temporary. Review date: ____

Date: 6-21-90 Physician's Signature [signature] M.D.

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, John McKissick HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

9/6/90
DATE

John McKissick
SIGNATURE OF EMPLOYEE

527-75-4920
SOCIAL SECURITY NUMBER

Gay Lodgan
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, John McKissick ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 9/6/90

SIGNATURE OF EMPLOYEE

527-75-4920
SOCIAL SECURITY NUMBER

WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: John McKissick S.S.# 527-75-4920
(PRINT)

RESPIRATOR MANUFACTURER: Raycal

1/2 MASK --- Model: North Size: M

FULL FACE -- Model: Raycal PAPR Size: M

Testing Conductor: James A Walder Date of Test: 9/10/80

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: _____

Test Conductor's Initial: J.A.W. _____

Employee's Initial: JMc

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 10-22-90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: MARICOPA Flood Control Dist.

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

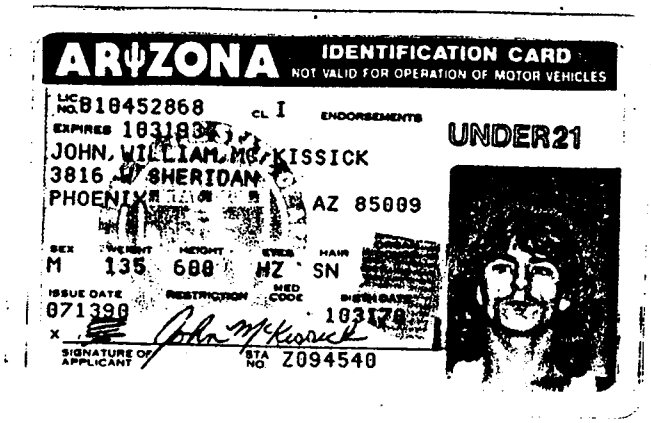
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

John W. McRissick
(PRINT) NAME OF WORKER

John McKissick
SIGNATURE OF WORKER

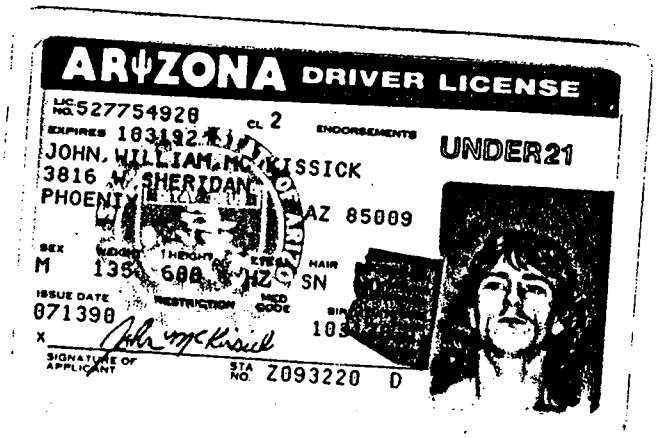
527-75-4920
SOCIAL SECURITY NUMBER

Gay Lodgman
WITNESS



ARIZONA IDENTIFICATION CARD
NOT VALID FOR OPERATION OF MOTOR VEHICLES

LIC NO. B10452868 CL I ENDORSEMENTS UNDER21
EXPIRES 103183
JOHN, WILLIAM, MC KISSICK
3816 W SHERIDAN
PHOENIX AZ 85009
SEX M WEIGHT 135 HEIGHT 600 EYES HZ HAIR SN
ISSUE DATE 071390 RESTRICTION MED CODE BIRTH DATE 103170
X John McKissick
SIGNATURE OF APPLICANT STA NO. Z094540



ARIZONA DRIVER LICENSE

LIC NO. 527754920 CL 2 ENDORSEMENTS UNDER21
EXPIRES 103192
JOHN, WILLIAM, MC KISSICK
3816 W SHERIDAN
PHOENIX AZ 85009
SEX M WEIGHT 135 HEIGHT 600 EYES HZ HAIR SN
ISSUE DATE 071390 RESTRICTION MED CODE BIRTH DATE 103
X John McKissick
SIGNATURE OF APPLICANT STA NO. Z093220 D

United States Department of Commerce
National Institute of Standards and Technology

NVLAP

Certificate of Accreditation

T.J. WHITE'S ENVIRONMENTAL MANAGEMENT CONSULTANTS
SCOTTSDALE, AZ

is recognized under the National Voluntary Laboratory Accreditation Program for satisfactory compliance with criteria established in Title 15, Part 7 Code of Federal Regulations. Accreditation is awarded for specific services, listed on the Scope of Accreditation, for:

ASBESTOS FIBER ANALYSIS

July 1, 1991
Effective until

DEPARTMENT OF COMMERCE * UNITED STATES OF AMERICA *

Nancy M. Dahey
For the National Institute of Standards and Technology

CERTIFICATE OF Award

May it be known by all who read this that a Certificate of Award has been presented to

CARL H. SANDERS

for Outstanding Achievement & Accomplishment in

MICROSCOPICAL IDENTIFICATION OF ASBESTOS FOR NIOSH 582 EQUIVALENCY PHASE CONTRAST MICROSCOPY

Signed: Tijuana E. White

T.J. WHITE'S ENVIRONMENTAL MANAGEMENT CONSULTANTS
ORGANIZATION

PRESENTED THIS 29th DAY OF December, 19 89

THE DEEP SOUTH CENTER FOR OCCUPATIONAL HEALTH AND SAFETY

CERTIFIES THAT

Carl Sanders

Has Attended and Satisfactorily Passed
An Examination For

SAMPLING AND EVALUATING AIRBORNE
ASBESTOS DUST - NIOSH 582

Birmingham, Alabama
November 8 - 11, 1988

PROGRAM DIRECTOR

COURSE INSTRUCTOR

A NIOSH-Supported Educational Resource Center
University of Alabama at Birmingham
and Auburn University

Award Certificate

This is to Certify that

Kurt Kettler

Has Been Awarded this Certificate for

Successful Completion of Southwest Environmental Management's

NIOSH 582 Equivalency Course

Given at SEM Corporate Office, This 15th Day of August, 1989

Teresa Burrows

Teresa K. Burrows,
Vice President of Quality Assurance

David L. Stiera Ph.D,
President

Certificate

May it be known

BY ALL

WHO READ THIS THAT
THIS CERTIFICATE HAS BEEN PRESENTED TO

TJUANA E. WHITE

FOR

NIOSH 582 EQUIVALENCY FIELD OPERATIONS

T. L. WHITE'S ENVIRONMENTAL MANAGEMENT CONSULTANTS
ORGANIZATION

Tjuana E. White
SIGNED

PRESENTED THIS 29th DAY OF December, 19 89

STANDARD TESTING

AND ENGINEERING COMPANY
CERTIFIES THAT

TJUANA E. WHITE

HAS SUCCESSFULLY COMPLETED THE REQUIRED TRAINING FOR MICROSCOPICAL IDENTIFICATION OF ASBESTOS

FOR

NIOSH 582 EQUIVALENCY PHASE CONTRAST MICROSCOPY

date

president

laboratory director

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
National Institute for
Occupational Safety & Health
Robert A. Taft Laboratories
4676 Columbia Parkway
Cincinnati OH 45226-1998

May 30, 1990

To: PAT Participants

Enclosed are your results from the Proficiency Analytical Testing (PAT) program for Round 101. The following table shows the Relative Standard Deviations for reference laboratories:

Round 101 Relative Standard Deviations

Contaminant	Number of Ref. Labs	Sample 1	Sample 2	Sample 3	Sample 4
Lead	72	4.9%	4.0%	3.9%	3.9%
Cadmium	72	3.4%	3.5%	3.7%	4.1%
Zinc	72	3.7%	3.7%	4.1%	5.6%
Silica	70	24.4%	21.0%	23.1%	32.0%
Asbestos	73	37.9%	41.8%	38.0%	25.4%
1,1,1-Trichloroethane (MCM)	72	5.2%	4.2%	5.2%	4.5%
Tetrachloroethylene (PCE)	72	5.2%	5.2%	5.4%	6.0%
Trichloroethylene (TCE)	72	6.3%	4.6%	5.6%	5.5%

The Relative Standard Deviations are calculated from non-transformed Winsorized reference laboratory data. See the PAT Statistical Protocol for more details.

The inclusion of tetrachloroethylene (PCE) into the PAT organic solvent analysis part of the program was a success. From the table above, you will note that the relative standard deviations were between 5% and 6%. Also, the reported desorption efficiency values for tetrachloroethylene were a mean of 99% and a semi-quartile range of between 97% and 100%. Thus, tetrachloroethylene will become a regular member of the list of PAT organic solvents.

PAT Round 102 is scheduled for shipment on July 2, 1990, and the organic solvents this round will be benzene (BNZ), o-xylene (OXY), and toluene (TOL). Also, silica will have a talc background and asbestos will be amosite this time.

Sincerely yours,

Jensen H. Groff

Jensen H. Groff
Chemist (Group Leader)
Quality Assurance Section
Monitoring and Control Research Branch
Division of Physical Sciences and
Engineering

Enclosure

PROGRAM ID: PAT-420
ROUND NO: 101

DATE: 05/23/90
PAGE: 1

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH
PROFICIENCY ANALYTICAL TESTING PROGRAM
P A T
LAB 85254-001
ROUND 101
DATA TABLE

LAB DATA	CONTAMINANT	SAMPLE	REF.* VALUE	PERFORMANCE LIMITS	LABORATORY PERFORMANCE	NO. LABS	OUTLIERS HI	LO	TOT
------	LEAD	1	0.0241	0.0206-0.0276	NOT RATED	0384	0016	0015	0031
------	(MG)	2	0.0419	0.0370-0.0469	NOT RATED	0384	0015	0020	0035
------		3	0.0575	0.0508-0.0642	NOT RATED	0384	0016	0019	0035
------		4	0.0361	0.0319-0.0403	NOT RATED	0384	0015	0022	0037
** OVERALL						1408			0068
------	CADMIUM	1	0.0150	0.0135-0.0165	NOT RATED	0381	0008	0025	0033
------	(MG)	2	0.0080	0.0073-0.0089	NOT RATED	0381	0015	0029	0044
------		3	0.0119	0.0107-0.0133	NOT RATED	0381	0018	0026	0044
------		4	0.0100	0.0089-0.0113	NOT RATED	0381	0014	0023	0037
** OVERALL						1408			0074
------	ZINC	1	0.2153	0.1917-0.2390	NOT RATED	0377	0015	0024	0039
------	(MG)	2	0.1842	0.1637-0.2049	NOT RATED	0377	0015	0024	0039
------		3	0.1275	0.1119-0.1432	NOT RATED	0377	0016	0017	0033
------		4	0.1009	0.0840-0.1179	NOT RATED	0377	0018	0010	0028
** OVERALL						1408			0069
------	SILICA	1	0.0910	0.0416-0.1993	NOT RATED	0108	0001	0003	0004
------	(MG)	2	0.0735	0.0385-0.1405	NOT RATED	0108	0001	0005	0006
------		3	0.0707	0.0348-0.1443	NOT RATED	0108	0002	0007	0009
------		4	0.0391	0.0147-0.1045	NOT RATED	0108	0003	0005	0008
** OVERALL						1408			0017
0150.3	ASBESTOS	1	0217.8	0037.1-0548.9	ACCEPTABLE	1273	0009	0014	0023
0153.4	(F/MM2)	2	0147.1	0015.6-0412.9	ACCEPTABLE	1273	0014	0002	0016
0317.6		3	0246.8	0042.3-0621.0	ACCEPTABLE	1273	0029	0007	0036
0411.9		4	0459.6	0169.3-0892.2	ACCEPTABLE	1273	0028	0054	0082
** OVERALL						1408			0121
------	SOL 1 MCM	1	0.7153	0.6037-0.8270	NOT RATED	0371	0019	0012	0031
------	(MG)	2	0.8474	0.7412-0.9537	NOT RATED	0371	0026	0011	0037
------		3	0.4361	0.3684-0.5039	NOT RATED	0371	0020	0011	0031
------		4	1.0451	0.9039-1.1864	NOT RATED	0371	0022	0010	0032
** OVERALL						1408			0061
------	SOL 2 PCE	1	0.4979	0.4209-0.5750	NOT RATED	0371	0018	0010	0028
------	(MG)	2	0.7694	0.6495-0.8894	NOT RATED	0371	0015	0020	0035
------		3	1.0992	0.9228-1.2757	NOT RATED	0371	0010	0023	0033
------		4	0.3605	0.2962-0.4249	NOT RATED	0371	0016	0011	0027
** OVERALL						1408			0055
------	SOL 3 TCE	1	0.8619	0.6996-1.0244	NOT RATED	0371	0011	0017	0028
------	(MG)	2	0.4305	0.3706-0.4904	NOT RATED	0371	0023	0017	0040
------		3	0.6061	0.5040-0.7083	NOT RATED	0371	0014	0013	0027
------		4	0.6869	0.5736-0.8004	NOT RATED	0371	0011	0015	0026
** OVERALL						1408			0052

* REFERENCE VALUE IS CALCULATED FROM TRANSFORMED VARIABLES. SEE NIOSH PAT PROTOCOL FOR DETAILS
** OVERALL TOTAL OUTLIERS EQUALS THE NUMBER OF PARTICIPATING LABS WITH AT LEAST 1 OUT OF 4 FILTERS RATED AS OUTLIERS.

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH
PROFICIENCY ANALYTICAL TESTING PROGRAM
P A T
LAB 85254-001
ROUNDS 098 TO 101
OUTLIER TABLE

ROUND	098	099	100	101	LAB RATING	NO. OF LABS RATED	NO. OF LABS RATED NP
LEAD	××××	××××	××××	××××	×	0394	0036
CADMIUM	××××	××××	××××	××××	×	0391	0035
ZINC	××××	××××	××××	××××	×	0388	0043
SILICA	××××	××××	××××	××××	×	0116	0005
ASBESTOS	××××	××××			P	1315	0049
SOLVENT 1	××××	××××	××××	××××	×	0380	0033
SOLVENT 2	××××	××××	××××	××××		0380	0033
SOLVENT 3	××××	××××	××××	××××		0380	0033
OVERALL					P	1451	0096

LEGEND

--- ROUND DOES NOT HAVE A CONTAMINANT

BLANK ANALYSIS ACCEPTABLE

1 OUTLIER ANALYSIS ON FILTER 1

2 OUTLIER ANALYSIS ON FILTER 2

3 OUTLIER ANALYSIS ON FILTER 3

4 OUTLIER ANALYSIS ON FILTER 4

× ANALYSIS NOT PERFORMED OR NOT RATED

P ANALYSIS PROFICIENT

NP X ANALYSIS RATED NON-PROFICIENT
X CONSECUTIVE TIMES

PROGRAM ID: PAT-420
ROUND NO: 101

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH
PROFICIENCY ANALYTICAL TESTING PROGRAM
P A T
LAB 85254-001
ROUNDS 098 TO 101
PLOTS

DATE: 05/23/90

LEAD

	098	099	100	101
* +5SD				
* +4SD				
* +3SD				
+2SD				
+1SD				
0SD				
-1SD				
-2SD				
* -3SD				
* -4SD				
* -5SD				

CADMIUM

	098	099	100	101
* +5SD				
* +4SD				
* +3SD				
+2SD				
+1SD				
0SD				
-1SD				
-2SD				
* -3SD				
* -4SD				
* -5SD				

ZINC

	098	099	100	101
* +5SD				
* +4SD				
* +3SD				
+2SD				
+1SD				
0SD				
-1SD				
-2SD				
* -3SD				
* -4SD				
* -5SD				

SILICA

	098	099	100	101
* +5SD				
* +4SD				
* +3SD				
+2SD				
+1SD				
0SD				
-1SD				
-2SD				
* -3SD				
* -4SD				
* -5SD				

ASBESTOS

	098	099	100	101
* +5SD				
* +4SD				
* +3SD				
+2SD				
+1SD				
0SD			1.2.3.4	1.2.3.4
-1SD				
-2SD				
* -3SD				
* -4SD				
* -5SD				

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH
PROFICIENCY ANALYTICAL TESTING PROGRAM
P A T
ROUNDS 098 TO 101
PLOTS
LAB 85254-001

SOLVENT 1

```
          098       099       100       101
* +5SD ..........................................
* +4SD ..........................................
* +3SD ..........................................
  +2SD ..........................................
  +1SD ..........................................
   0SD ..........................................
  -1SD ..........................................
  -2SD ..........................................
* -3SD ..........................................
* -4SD ..........................................
* -5SD ..........................................
```

SOLVENT 1	098 BNZ	099 CTC	100 CFM	101 MCM

SOLVENT 2

```
          098       099       100       101
* +5SD ..........................................
* +4SD ..........................................
* +3SD ..........................................
  +2SD ..........................................
  +1SD ..........................................
   0SD ..........................................
  -1SD ..........................................
  -2SD ..........................................
* -3SD ..........................................
* -4SD ..........................................
* -5SD ..........................................
```

SOLVENT 2	098 OXY	099 DCE	100 CTC	101 PCE

SOLVENT 3

```
          098       099       100       101
* +5SD ..........................................
* +4SD ..........................................
* +3SD ..........................................
  +2SD ..........................................
  +1SD ..........................................
   0SD ..........................................
  -1SD ..........................................
  -2SD ..........................................
* -3SD ..........................................
* -4SD ..........................................
* -5SD ..........................................
```

SOLVENT 3	098 TOL	099 TCE	100 DCE	101 TCE

Given to Excellent 10-31-90

ENVIRONMENTAL MANAGEMENT CONSULTANTS

REPORT ASBESTOS ANALYSIS PERSONAL NIOSH ANALYTICAL METHOD #7400

PROJECT Flood Control Purchase Order # _____

Reported to Asnet Sampled by Client

Laboratory Number 1574 Received 10/9/90 Reported 10/9/90

Microscope Field Area .00785 mm2 Type of filter 37mm _____ Other 25mm

MCE X Other _____

SAMPLE NUMBER	IDENTIFICATION	DATE	TIME ON	TIME OFF	TIME TOTAL (min)	FLOW RATE (l pm)	TOTAL VOL (l)	AVG. FIBER COUNT	AVG. BLANK FIBER COUNT	RECOMM. DETECT. LIMIT	AIRBORNE FIBER CONC. (f/cc)
1.	1 David Chase 585-76-6129	10/18 9/18	0930	1000	30	2.0	60	4.66	n/a	.0817	3.8091

THIS REPORT APPLIES TO THE STANDARDS OR PROCEDURES IDENTIFIED AND TO THE SAMPLE(S) TESTED. THE TEST RESULTS ARE NOT NECESSARILY INDICATIVE OR REPRESENTATIVE OF THE QUALITIES OF THE LOT FROM WHICH THE SAMPLE WAS TAKEN OR OF APPARENTLY IDENTICAL OR SIMILAR PRODUCTS. NOR DO THEY REPRESENT AN ON GOING QUALITY ASSURANCE PROGRAM UNLESS SO NOTED. THESE REPORTS ARE FOR THE EXCLUSIVE USE OF THE ADDRESSED CLIENT AND ARE RENDERED UPON THE CONDITION THAT THEY WILL NOT BE REPRODUCED WHOLLY OR IN PART FOR ADVERTISING OR OTHER PURPOSES OVER OUR SIGNATURE OR IN CONNECTION WITH OUR NAME WITHOUT SPECIAL WRITTEN PERMISSION. SAMPLES NOT DESTROYED IN TESTING ARE RETAINED A MAXIMUM OF THIRTY DAYS.

Charge: Asnet

Orig. & CC To Client

Kurt Kettler

Kurt Kettler
Analyst

Environmental Management Consultants

Tjuana E. White

By Tjuana E. White

10805 North 71st Way, Suite D • Scottsdale, Arizona 85254
(602) 443-8306 • FAX: (602) 443-8364

ENVIRONMENTAL MANAGEMENT CONSULTANTS

Excellent 11-2-90

REPORT ASBESTOS ANALYSIS PERSONAL NIOSH ANALYTICAL METHOD #7400

PROJECT Flood Control Purchase Order #

Reported to Asnet Sampled by Client

Laboratory Number 1626 Received 11-1-90 Reported 11-1-90

Microscope Field Area .00785 mm2 Type of filter 37mm Other 25mm

MCE x Other

SAMPLE NUMBER	IDENTIFICATION	DATE	TIME ON	TIME OFF	TOTAL (min)	FLOW RATE (l pm)	TOTAL VOL (l)	AVG. FIBER COUNT	AVG. BLANK FIBER COUNT	RECOMM. DETECT. LIMIT	AIRBORNE FIBER CONC. (f/cc)
1.	12 Pete Works 461-33-5620	10/18	0730	1030	180	2.0	360	.10	n/a	.0136	.0136
2.	13 David Weddee 387-78-8675	10/19	1000	1100	60	2.0	120	.06	n/a	.0409	<.0409
3.	14 Perry Girardio 006-68-0362	10/24	0800	1200	240	2.0	480	1.0	n/a	.0102	.1022

THIS REPORT APPLIES TO THE STANDARDS OR PROCEDURES IDENTIFIED AND TO THE SAMPLE(S) TESTED. THE TEST RESULTS ARE NOT NECESSARILY INDICATIVE OR REPRESENTATIVE OF THE QUALITIES OF THE LOT FROM WHICH THE SAMPLE WAS TAKEN OR OF APPARENTLY IDENTICAL OR SIMILAR PRODUCTS, NOR DO THEY REPRESENT AN ON GOING QUALITY ASSURANCE PROGRAM UNLESS SO NOTED. THESE REPORTS ARE FOR THE EXCLUSIVE USE OF THE ADDRESSED CLIENT AND ARE RENDERED UPON THE CONDITION THAT THEY WILL NOT BE REPRODUCED WHOLLY OR IN PART FOR ADVERTISING OR OTHER PURPOSES OVER OUR SIGNATURE OR IN CONNECTION WITH OUR NAME WITHOUT SPECIAL WRITTEN PERMISSION. SAMPLES NOT DESTROYED IN TESTING ARE RETAINED A MAXIMUM OF THIRTY DAYS.

Charge: Asnet

Orig. & CC To Client

Al Glyda

Analyst

Environmental Management Consultants

By Tijuana White

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Given to Excltech 10-2-90

ENVIRONMENTAL MANAGEMENT CONSULTANTS

REPORT ASBESTOS ANALYSIS PERSONAL NIOSH ANALYTICAL METHOD #7400

PROJECT Maricopa County Flood Control Duplex Purchase Order # :

Reported to Asnet Sampled by Client

Laboratory Number 1548 Received 9/28/90 Reported 10/2/90

Microscope Field Area .00785 mm2 Type of filter 37mm Other 25mm

MCE X Other

SAMPLE NUMBER	IDENTIFICATION	DATE	TIME ON OFF	TIME TOTAL (min)	FLOW RATE (l pm)	TOTAL VOL (l)	AVG. FIBER COUNT	AVG. BLANK FIBER COUNT	RECOMM. DETECT. LIMIT	AIRBORNE FIBER CONC. (f/cc)
1.	1 Tom Greer 566-47-8824	9/24	1410 1600	110	2.0	220	.085	n/a	.0223	<.0023
2.	2 Dave Rodsers 526-29-8401	9/20	2000 2300	180	2.0	360	.10	n/a	.0136	.0136
3.	3 Perry Giardin 006-68-0362	9/20	1200 1500	180	2.0	360	.04	n/a	.0136	<.0136
4.	4 Dave Rodsers 526-29-8401	9/20	1500 1730	150	2.0	300	.165	n/a	.0163	.0270
5	5 Perry Girardin 006-68-0362	9/25	1900 2200	240	2.0	480	.13	n/a	.0102	.0133
6.	6 Perry Girardin 006-65-0362	9/25	1230	210	2.0	420	VOID SAMPLE — NO FILTER			

THIS REPORT APPLIES TO THE STANDARDS OR PROCEDURES IDENTIFIED AND TO THE SAMPLE(S) TESTED. THE TEST RESULTS ARE NOT NECESSARILY INDICATIVE OR REPRESENTATIVE OF THE QUALITIES OF THE LOT FROM WHICH THE SAMPLE WAS TAKEN OR OF APPARENTLY IDENTICAL OR SIMILAR PRODUCTS, NOR DO THEY REPRESENT AN ON GOING QUALITY ASSURANCE PROGRAM UNLESS SO NOTED. THESE REPORTS ARE FOR THE EXCLUSIVE USE OF THE ADDRESSED CLIENT AND ARE RENDERED UPON THE CONDITION THAT THEY WILL NOT BE REPRODUCED WHOLLY OR IN PART FOR ADVERTISING OR OTHER PURPOSES OVER OUR SIGNATURE OR IN CONNECTION WITH OUR NAME WITHOUT SPECIAL WRITTEN PERMISSION. SAMPLES NOT DESTROYED IN TESTING ARE RETAINED A MAXIMUM OF THIRTY DAYS.

Charge: Asnet

Orig. & CC To Client

Kurt Kettler

Kurt Kettler
Analyst

Environmental Management Consultants

Tijuana E. White

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ENVIRONMENTAL MANAGEMENT CONSULTANTS

Sent to Envitech 10-9-90

REPORT ASBESTOS ANALYSIS PERSONAL NIOSH ANALYTICAL METHOD #7400

PROJECT Maricopa County Flood Control Purchase Order # _____

Reported to Asnet Sampled by Client

Laboratory Number 1561 Received 10-03-90 Reported 10-04-90

Microscope Field Area .00785 mm2 Type of filter 37mm _____ Other 25mm

MCE x Other _____

SAMPLE NUMBER	IDENTIFICATION	DATE	TIME ON OFF	TIME TOTAL (min)	FLOW RATE (l pm)	TOTAL VOL (l)	AVG. FIBER COUNT	AVG. BLANK FIBER COUNT	RECOMM. DETECT. LIMIT	AIRBORNE FIBER CONC. (f/cc)
1.	7 Perry Girardin 006-68-0363	9/27	0800 1100	180	2.0	360	.80	n/a	.0136	.1090
2.	8 David Weddle 387-78-8677	9/28	1200 1500	180	2.0	360	.11	n/a	.0136	.0149

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Charge: Asnet

Orig. & CC To Client

Al Glyda

Analyst

Environmental Management Consultants

Tjuana E. White

By Tjuana White

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Answer to Excaltech 10-24-90

ENVIRONMENTAL MANAGEMENT CONSULTANTS

REPORT ASBESTOS ANALYSIS PERSONAL NIOSH ANALYTICAL METHOD #7400

PROJECT Flood Control Purchase Order #

Reported to Asnet Sampled by Client

Laboratory Number 1601 Received 10/22/90 Reported 10/22/90

Microscope Field Area .00785 mm2 Type of filter 37mm . Other 25mm

MCE X Other

SAMPLE NUMBER	IDENTIFICATION	DATE	TIME ON OFF	TIME TOTAL (min)	FLOW RATE (l pm)	TOTAL VOL (l)	AVG. FIBER COUNT	AVG. BLANK FIBER COUNT	RECOMM. DETECT. LIMIT	AIRBORNE FIBER CONC. (f/cc)
1.	10 Pete Works 461-33-5620	10/9	0800 1100	180	2.0	360	1.818	n/a	.0136	.2477
2.	11 Perry Girardin 006-68-0362	10/15	0730 1100	210	2.0	420	.08	.08	.0117	<.0117
12.	10/16 Perry Girardin 006-68-0362	10/16	0730 1030	180	2.0	360	.40	n/a	.0136	.0545

THIS REPORT APPLIES TO THE STANDARDS OR PROCEDURES IDENTIFIED AND TO THE SAMPLE(S) TESTED. THE TEST RESULTS ARE NOT NECESSARILY INDICATIVE OR REPRESENTATIVE OF THE QUALITIES OF THE LOT FROM WHICH THE SAMPLE WAS TAKEN OR OF APPARENTLY IDENTICAL OR SIMILAR PRODUCTS, NOR DO THEY REPRESENT AN ON GOING QUALITY ASSURANCE PROGRAM UNLESS SO NOTED. THESE REPORTS ARE FOR THE EXCLUSIVE USE OF THE ADDRESSED CLIENT AND ARE RENDERED UPON THE CONDITION THAT THEY WILL NOT BE REPRODUCED WHOLLY OR IN PART FOR ADVERTISING OR OTHER PURPOSES OVER OUR SIGNATURE OR IN CONNECTION WITH OUR NAME WITHOUT SPECIAL WRITTEN PERMISSION. SAMPLES NOT DESTROYED IN TESTING ARE RETAINED A MAXIMUM OF THIRTY DAYS.

Charge: Asnet

Orig. & CC To Client

Al Glyda

Analyst

Environmental Management Consultants

By Tjuana E. White

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(602) 443-8306 • FAX: (602) 443-8364

Given to Excelteck 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

SAFETY MEETING REPORT

SAFETY MEETING ON:

1. EMERGENCY PROCEDURES PROGRAM
2. HAZARD COMMUNICATION (CONCERNING MSDS)
3. JOB RELATED DIFFICULTIES

DATE: 9/27/90

INSTRUCTOR: Perry Dwinski

LIST OF PERSONS ATTENDING:

Perry Dwinski
[illegible]
Thomas S. Green
Daniel Chase
[illegible]

Given to Excelltech 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

SAFETY MEETING REPORT

SAFETY MEETING ON:

1. EMERGENCY PROCEDURES PROGRAM
2. HAZARD COMMUNICATION (CONCERNING MSDS)
3. JOB RELATED DIFFICULTIES

DATE: 10/5/90

INSTRUCTOR: PERRY GIRARDIN

LIST OF PERSONS ATTENDING:

Perry Girardin
Dan Lordello
Thom Geier

Given to Excelteck 10-17-90

ASNET
ASBESTOS SERVICES NETWORK

SAFETY MEETING REPORT

SAFETY MEETING ON:

1. EMERGENCY PROCEDURES PROGRAM
2. HAZARD COMMUNICATION (CONCERNING MSDS)
3. JOB RELATED DIFFICULTIES

DATE: 10-9-90

INSTRUCTOR: PERRY GIRARDIN

LIST OF PERSONS ATTENDING:

JERRY WHESTER / Jerry Whester	[illegible]
PERRY GIRARDIN	
DAVID CHASE	
Thom J. GREER	
[illegible]	
David Weddle	

Turn in
Executive
10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA COUNTY flood CONTROL

AREA: DUPIXE 1407 E. STATE AVE

DATE: 9/24/90

SUPERVISOR: PERRY GIRARDIN

DAY: Monday

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-68-0362	1:45	3:50					PAPR
2) Thom J. Greer	Thom J. Greer	566-47-8824	1:45	3:50					PAPR
3) Dandurddle	Dandurddle	387-28-8677	1:45	3:50					PAPR
4) DAVID CHASE	David Chase	585-76-6129	1:45	3:50					PAPR
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Minute
Executed
10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA COUNTY FLOOD CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: ROOF 1401 E. STATE AVE DATE: 9/25/90 DAY: TUESDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-44-0342	745	1100					PPA 1/2 MASK
2) David Criddle	David Criddle	382-78-8677	745	1100	12:00	3:30			1/2 MASK
3) Thom J. GREER	Thom J. Greer	566-47-8824	7:45	1100	12:00	3:30	4:10		1/2 MASK
4) DAVID CHASE	D. C. Chase	585-26-6129	7:45	1100	1220	330			1/2 MASK
5) DAVE RODGERS	[illegible]	526798469	815	1100	1220	330			1/2 MASK
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Turn to Excel Tech 10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA COUNTY flood CONTROL JOB#: 916 SUPERVISOR: PERRY GIRARDIN

AREA: duPLEX DATE: 9/25/90 DAY: WEDS

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-68-0462	1230	400					1/2 MASK
2) DAVE WEDDLE	Dave Weddle	[illegible]	1230	400					" "
3) THOM J. GREER	Thom J. Greer	562-79-6827	1230	400					" "
4)									
5)									
6)									
7)									
8)									
9)									
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13)									
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SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excellent 10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA COUNTY flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: DOPLEX 1407 E. STATE AVE DATE: 9/26/90 DAY: WED

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-68-0312	8:45	9:31					
2) DAVE WADDLE	387-78-8677 →	387-78-8677	7:00	11:00	12:00	3:40			1/2
3) THOM GREER	566-47-8824 →	566-47-8824	8:00	11:00	12:00	3:40			1/2
4) Lawrence Guy McGill	527-88-8177	Lawrence Guy McGill	8:45	9:25	3				1/2
5) Gene Rogers	~~[illegible]~~ Gene Rogers	526-79-8419	9:30	11:00	12:00	3:40			1/2 face
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Turn to Excelsior 10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA FLOOD JOB#: 914 SUPERVISOR: PERRY GIRARDIN

AREA: 3TRO C DATE: 9279 DAY: 9/2/90 THRO SEPDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) [illegible]	[illegible]	527913594	730	1100	1200	~~200~~			1/2 MASK
2) PERRY GIRARDIN	Perry Girardin	006-68-0362	800	1100	1200	245			1/2 MASK
3) DAVID CHASE	David Chase	585-76-6141	730	1100	1200	400			1/2 MASK
4) THOM GREER	Thom Greer	546-47-8827	~~1000~~	1100	1200	400			1/2 MASK
5) DAVID WEDDEL	David Weddel	387-78-8677	1000	1100	1200	~~400~~			1/2 MASK
6) DAVE ROGERS	David Rogers	585-79-8404	1200	1400					1/2 MASK
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Sent to Excellent 10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA FLOOD JOB#: 916 SUPERVISOR: PERRY GIRARDIN

AREA: Decpex DATE: 9/27/90 DAY: THURSDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) THOM GREER	Thom S Greer	566-42-8044	710	915					1/2 MASK
2) DAVID WEDDLE	David Weddle	387-28-8677	710	915					1/2 MASK
3)									
4)									
5)									
6)									
7)									
8)									
9)									
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11)									
12)									
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14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excel list 10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA COUNTY FLOOD CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: STRUCTURE (C) DATE: 9/28 DAY: FRIDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) SCOTT RERP	[illegible]	627-91-3544	700	950	—	—	—	—	1/2 MASK
2) DAVID WEADDLE	David Weaddle	347-78-6677	700	950	—	—	—	—	1/2 MASK
3) DAVID CHASE	David Chase	585-76-6139	700	950	—	—	—	—	1/2 MASK
4)									
5)									
)									
7)									
8)									
9)									
10)									
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12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excaltech 10-1-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: MARICOPA COUNTY Flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: 1417 E. STATE ACE DATE: 9/28/90 DAY: FRIDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	001-48-0762	1000	1100	1200	350			PAPR/½
2) DAVID WEDDLE	David Weddle	387-78-8677	1000	1100	1200	330			½ MASK
3) THOM GREER	Thom S Greer	566-47-8824	10:00	1100	1200	330			½ MASK
4) S REPP	S Repp	527-91-3594	10:00	1100	1200	330			½ MASK
5) DAVID CHASE	David Chase	585-26-4179	10:00	1100	1100	330			½ MASK
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
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SUPERVISOR SIGNATURE: [signature] [signature]
(MUST BE SIGNED)

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Excltech
10-9-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: STRUCTURE (R) DATE: 10/3/90 DAY: WEDNESDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) DAVE ROGERS	Dave Rogers	526 79 8901	12:10	3:30					1/2 face
2) DAVE CHASE	Dave Chase	585 76 6129	12:15	3:30					1/2 face
3) Scott Rapp	Scott Rapp	527 91 3594	12:15	3 30					1/2 face
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Turn to Excaltech 10-9-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: Flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: STRUCTURE (K) DATE: 10/4/90 DAY: THURSDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-68-0362	7:45	1100	1200	400	—	—	1/2 MASK
2) S REPP	S Repp	527913594	7:40	1000	1200	400	—	—	1/2 MASK
3) DAVID CHASE	D J Chase	585-76-6129	7:55	100	1200	400	—	—	1/2 MASK
4) ~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	1100	1200	400	—	—	1/2 MASK
5) Thomas Green	[illegible]	[illegible]	7:00	400	—				1/2 MASK
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excelteck 10-9-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: STRUCTURE (R) DATE: 10/5/90 DAY: FRIDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-68-0362	715	1100	1200	300	—	—	1/2
2) Chon T. Gyman	[illegible]	566-47-8824	715	11:00	12:00	2:30	—	—	1/2
3) Pandweddle	Pandweddle	387-28-8677	715	1100	1200	3:30	—	—	1/2
4) SCOTT REPP			~~715~~	~~1100~~	~~1200~~	~~300~~	—	—	1/2
5) PETE WORKS	P. Works	461-33-5620	1:30	2:00	—	—	—	—	1/2
6)									
7)									
8)									
9)									
10)									
11)									
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14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excel tech 10-9-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: Flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: 548 Calle La PAZ DATE: 10/8/90 DAY: MONDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PETE WORKS	[illegible]	444-33-5620	11:30			330	—	—	1/2 MASK
2) DAVID CHASE	David Chase	585766129	11:30			330	—	—	1/2 MASK
3) Thom J. GREER	Thom J. Greer	521-41-8824	11:30			530	—	—	1/2 MASK
4) Sleppy	S Lepy	527913594	11 30			530			1/2 MASK
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-15-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (JJ) DATE: 10/18/90 DAY: ~~WED~~ Tue

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PETE WORKS	[illegible]	401-33-9420	12:50	3:35	—				1/2 MASK
2) DAVID CHASE	585 76 4129 [illegible]		12:50	3:30					1/2 MASK
3) DAVID ROGERS	[illegible]	526 29841	12:50	3:30					1/2 MASK
4) JERRY LESTER	527 53 9302 [illegible]		12:50	3:30					1/2 MASK
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible] (MUST BE SIGNED)

Given to Excaltech 10-15-90

ASNET

"EMPLOYEE ONLY" CONTAINMENT "SIGN IN" AND "OUT" SHEET

JOB NAME: Flood Control JOB#: 918 SUPERVISOR: PERRY GERARDIN

AREA: 5419 NW CALLE-LA-PAZ DATE: 10/9/90 DAY: TUESDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Thom J. Garcia	[illegible]	561-47-8824	7:30	1100	~~1200~~	330	—	—	1/2 MASK
2) David Weddle	David Weddle	387-78-8627	7:30	1100	~~1200~~	330	—	—	1/2 MASK
3) S Rays	[illegible]	527913594	730	1100	—				1/2 MASK
4) DAVID CHASE	David Chase	585-76-6129	800	1100	—				1/2 MASK
5) PETE WORKS	R L Works	461-33-[illegible]	800	1100	—				1/2 MASK
6) JERRY LESTER		527-73-9302	800	1100	—				
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Gerardin
(MUST BE SIGNED)

Given to Excaltech 10-15-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: FLOOD CONTROL JOB#: 9K8 SUPERVISOR: PERRY GIRARDIN

AREA: J DATE: 10/10/90 DAY: WED

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) DAVID CHASE	David Chase	585-76-6120	8:30	10:30					1/2 MASK
2) DAVID WEDDLE	David Weddle	387-28-8677	8:30	10:30					1/2
3) THOM GREEK	Thom Greek	[illegible]	830	1030					1/2
4) PERRY GIRARDIN	Perry Girardin	006-68-0362	110 AM						
5) PETE WORKS	R Works	461-33-7210	112	300					
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-15-90.

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: F DATE: 10/12/90 DAY: FRIDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-16-5036	900						1/2 MASK
2) DAVID CHASE	David J Chase	585-76-129	900	11:00	12:00	3:30			1/2 MASK
3) [illegible]	[illegible]	627-91-3[illegible]	900	1100	1200	330			1/2 MASK
4) PETE WORKS	[illegible]	461-33-4620	900	1100	1200	3:30			1/2 MASK
5) THOM GREEK			900	1100	1200	330			1/2 MASK
6) DAVID WEDDLE			900	1100	1200	330			1/2 MASK
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excaltech 10-17-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood CONTROL JOB#: 918 SUPERVISOR: PERRY GIKARDIN

AREA: (F) DATE: 10/15/90 DAY: MON

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIKARDIN	[illegible]	004-68-0367	730	1000	1135	330			1/2 MASK
2) PETE WORKS	[illegible]	401-73-8720	7:30	1000	1135	330			1/2 MASK
3) Scott Rapp	[illegible]	527-91-9594	730	1000	1135	330			1/2 MASK
4) DAVID CHASE	[illegible]	585-76-6129	7:30	10:25	11:25	330			1/2 MASK
5) DAVID WEDDCE	[illegible]	387-78-8722	1130	330	11:30	2:30			1/2 MASK
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excaltech 10-17-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood control JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (F) DATE: 10/16/90 DAY: ~~WED~~ TUE

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006-68-0312	700	930	—	—	—	—	1/2 MASK
2) PETE WORKE	Pete Worke	461-35-5600	7:20	1100	1200	130	—	—	1/2 MASK
3) DAVID CHASE	David Chase	585766129	7:25	1100	1200	100	—	—	1/2 MASK
4) DAVE ROGER'S			900	1100	—	—	—	—	1/2 MASK
5) S REPP	S Repp	527913594	900	1100	—	—	—	—	1/2 mask
6)									
7)									
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11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Equitech 10-24-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood Control JOB#: 918 SUPERVISOR: PERRY G. NARDI

AREA: (4) DATE: 10/18/90 DAY: THURS

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PETE WORKS	PE Works	461-37-8620	7:00	1100	1200	3:30			1/2 MASK
2) DAVE ROGERS	Dave Rogers	526-72-8401	7:00	1100	1200	3:30			1/2 MASK
3) DAVID CHANE	D. Chane	585-76-1121	7:00	1100	1200	3:30			1/2 MASK
4) David Weddle	David Weddle	387-78-8670	700	1100	1200	3:30			1/2 MAS
5) THOM GREER	Thom Greer	526-49-6127	700	1100	1200	3:30			1/2 MASK
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Nardi
(MUST BE SIGNED)

Given to Excellent 10-24-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 SUPERVISOR: PERRY GARDIN

AREA: CF DATE: 10/19/90 DAY: FRI

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Pete Works	[illegible]	441-33-5620	7:20						1/2 MASK
2) Thom J. Green	[illegible]	566-42-5024	7:25						1/2 MASK
3) DAVE WEDDLE			725						1/2 MASK
4) DAVE CHASE	[illegible]	555-26-6128	725	11:15	12:15	4:30			1/2 MASK
5) DAVE ROGERS	[illegible]		7:25	11:15	12:15	4:30			1/2 MASK
6) ~~DAN GRIN~~									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excaltech 10-24-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: Flood Control JOB#: 918 SUPERVISOR:

AREA: (F) DATE: 10/20/90 DAY: MON

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Pete Works	[illegible]	461-33-56[illegible]							
2) Thom J. Allen	[illegible]	566-97-8824							
3) Davis Chase	[illegible]	585-66-129							
4) [illegible]	Jerry Whester	527-73-95[illegible]	7:30	12:30					
5) [illegible]	[illegible]								
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: _____
(MUST BE SIGNED)

Given to Excaltech 10-24-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 SUPERVISOR: Perry Girardin

AREA: F DATE: 10/23/90 DAY: TUE

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Pete Works	R L Works	461-33-5620	7:20	9:30	—	—			½ FACE
2) David Chase	D Chase	585-76-6129	7:20	1100	1200	345			½ MASK
3) John McKissick	John McKissick	527-75-4920	7:00	9:30	~~12:00~~	1:00			
4) Dan Lardell	Dan Lardell	387-28-8622	7:00	1100	1200	345			½ Face
5) PERRY GIRARDIN	Perry Girardin	006-68-0362	710	1100	~~12~~	—			
6) DAVE ROGERS	[illegible]	526-[illegible]	710	9:30	1200	3:45			½ Face
7) JERRY LESTER	Jerry W Lester	527-23-4202	7:00	11:00					
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-24-90

[CONTAINMENT] "EMPLOYEES ONLY" SHEETS ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (F) DATE: 10/23/90 DAY: TUESDAY

(PRINT) EMPLOYEE NAME	EMPLOYEE SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) PERRY GIRARDIN	Perry Girardin	006680362	200	345					1/2
2) John McKissick	John McKissick	527-75-9920	200	345					
3) PETE WORKS	Pete Works	461-23-5620	200	345					1/2 FACE
4) Jerry Lester	Jerry Lester	527-73-9302	~~200~~ 12:00	~~345~~ 4:00					
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Guente
Excelsior
10-8-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Maricopa County Flood JOB #: 914 SUPERVISOR: Perry Girard

AREA: BCDEF DATE: 9/24/90 DAY: Monday

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
S Rapp	527 913594	600	S Rapp	1130	1230	400	S Rapp	
PERRY GIRARDIN	506-68-0762	600	Perry Girardin	1130	1230	400	Perry Girardin	
Thom T. Greer	506-78-1121	8:30	Thom T. Greer	1130	1230	4:00	Thom T. Greer	
DAVID CHASE	585-76-6129	8:30	David Chase	1130	1230	4:00	David Chase	
David Weddle	381-78-8677	8:30	David Weddle	1130	1230	4:00	David Weddle	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

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ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Maricopa County Flood Control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: 1407 E. STATE AVE DATE: 9/25/90 DAY: TUESDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	006-68-0362	6:30	Perry Girardin	11:15	12:11	500pm	Perry Girardin	
Thom J. GREER	526-47-5524	6:45	Thomas Greer	11:15	12:11	4:30	Thomas Greer	
Dan Lurcddle	387-78-8677	6:45	Dan Lurcddle	11:15	12:11	4:30	Dan Lurcddle	
DAVID CHASE	585-76-6129	7:00	David Chase	11:15	12:11	4:00		
S. REPP	527913594	6:30	S. Repp	11:15	12:30	500pm	S. Repp	
Dave Rogers	526 75 5401	8:00	Dave Rogers	11:15	12:15	4:30	Dave Rogers	
DAN GINN	527-50-9316	9:00	Dan Ginn	11:15	11:45	4:30	Dan Ginn	

SUPERVISOR'S SIGNATURE: _____

(MUST BE SIGNED)

Given to Eriotech 10-1-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: MARICOPA COUNTY Flood control JOB #: 9156 SUPERVISOR: PERRY GIRARDIN

AREA: ~~[illegible]~~ 1401 E. STATE AVE DATE: 9/29/90 DAY: WEDNESDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
Stacy	527913544	700	[illegible]	1100	1200	1030	[illegible]	
Perry Girard	006-68-0362	700	Perry Girard	1100	1200	[illegible]	Perry Girard	
Thom J. Greer	566-41-8821	7:00	Thom J. Greer	11:00	12:00	4:00	Thom J. Greer	
David Weddle	382-78-8677	7:00	David Weddle	11:00	12:00	4:00	David Weddle	
DAN GINN	527-50-9316	8:15	Dan Ginn	1100	11:30	3:45	Dan Ginn	
DAVE RODGERS	526-79-8891	930	[illegible]	1100	1200	[illegible]	[illegible]	

SUPERVISOR'S SIGNATURE: _____

(MUST BE SIGNED)

Turn In
Excel Tech
10-9-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: MARICOPA COUNTY Flood CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARD

AREA: 1407 E. STATE ALE DATE: 9/27/90 DAY: THURSDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARD	006-68-0362	700	Perry Girard	1100	1200	400	Perry Girard	
Thom J. GREER	526-47-8824	7:00	Thom J. Greer	1100	1200	400	Thom J. Greer	
S Repp	527913594	700	S Repp	1100	1200	300	S Repp	
DAVID CHASE	585 766129	7:00	David Chase	1100	1200	3:45		
David Weddle	387 78 8677	700	David Weddle	1100	1200	400		
DAN GINN	527-50-9316	8:00	Dan Ginn	1100	11:30	4:00	Dan Ginn	
DAVE ROGERS	526 29 8401	9:30	Dave Rogers	11:00	1200	400		
DAVID CHASE	585766129	7:00	David Chase	11:30	12:00	4:00		

SUPERVISOR'S SIGNATURE: _____

(MUST BE SIGNED)

Given to Excaltech 10-1-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: MEPICOPA Co. Flood Control JOB #: 918 SUPERVISOR:

AREA: 1407 E STATE AVE DATE: 9-28-90 DAY: Fri.

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
DAN GIVN	527-50-9316	7:45	[illegible]	12:00	12:30	4:00	[illegible]	
Scott Repp	527913594	700	[illegible]	1100	1200	400	[illegible]	
PERRY GIRARDIN	006-68-0362	700	[illegible]	1100	1200	400	[illegible]	
Thom J GREEN	526-71-[illegible]	7:00	[illegible]	11:00	12:00	4:00	[illegible]	
DAVID CHASE	585766129	7:00	[illegible]	11:00	12:00	4:00	[illegible]	

SUPERVISOR'S SIGNATURE: _____

(MUST BE SIGNED)

Daily to Excel tech 10-3-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY G.

AREA: 5416. NO. CALLE-LA-PAZ (K) DATE: 10/1/90 DAY: MON.

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
Thom J. GREER	526-47-8824	7:00	Thom Greer	11:00	12:05	4:00		
Dan Weddle	387-78-8677	7:00	Dan Weddle	11:00	12:05	4:00		
DAVID CHASE	585-76-6129	7:00	David Chase	11:00	12:30	4:00	David Chase	
DAVE ROGERS	526-75-8401	7:00	Dave Rogers	11:00	12:00	4:00	Dave Rogers	
PERRY GIRARDIN	006-68-0362	8:00	Perry Girardin	11:00	12:00	4:30	Perry Girardin	
DAN GINN	527-50-9316	7:45	Dale Ginn	11:45	12:15	4:15	Dale Ginn	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Sent to Excelsior 10-3-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: Perry G.

AREA: 5418.D, CALLE-LA-PAZ (K) DATE: 10-2-90 DAY: Tue

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
[illegible]	527913591	700	[illegible]	1010	1210	400	[illegible]	
DAVID CHASE	585766129	7:00	D Chase	10:15	12:15	4:00	D Chase	
DAN GINN	527-52-9316	8:30	Dan Ginn	12:00	12:30	4:10	Dan Ginn	
PERRY GIRARDIN	006-68-0362	730	Perry Girardin	1125	1225	400	Perry Girardin	
DAVE ROGERS	526 79 8401	700	Dave Rogers	11:25	12:25	4:00	[illegible]	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to
Excaltech
10-9-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY RICHARDS

AREA: 5418, NICALLE-LA-PAZ DATE: 10/3/90 DAY: Wed

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
SR	527913524	730	[illegible]	1100	1200	400	[illegible]	
DAVID CHASE	585766129	730	David Chase	1100	1200	400	David Chase	
DAVE ROGERS	526 78 8401	7:30	Dave Rogers	1100	1200	400	Dave Rogers	

SUPERVISOR'S SIGNATURE: [illegible]

Sent to Excellech 10-9-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: 5415 W. CALLE-LA-PAZ Building (K) DATE: 10/9/90 DAY: THURSDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	006-68-3622	730	Perry Girardin	1105	1200	2100	Perry Girardin	
S Rapp	579 13594	730	S Rapp	1005	1200	400	S Rapp	
Thom J. Gleber	521-42-7844	7:00	Thom J. Gleber	11:05	1200	4:00	Thom J. Gleber	
Dan Dwedddle	387-78-8677	7.00	Dan Dwedddle	11:05	12:05	4:00	Dan Dwedddle	
DAVID CHASE	585-76-6129	7:00	David Chase	11:05	12:05	4:00	David Chase	
DAN GINN	527-50-9316	8:00	Dan Ginn	12:00	12:30	4:00	Dan Ginn	
PETE WORKS	461-33-5620	12:00	P L Works	500	—		P L Works	
DAVE ROGERS	526-78-8461	12:30	Dave Rogers	5:00	—		Dave Rogers	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excel Tech 10-9-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: Perry Giordano

AREA: 6415 Ne Cullen LA-PAZ DATE: 10/5/90 DAY: friday

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
S Rupp	527913594	700	S Rupp	1110	1200	400	S Rupp	
PERRY GIORDANO	006-68-0362	700	Perry Giordano	1110	1200	400	Perry Giordano	
DAVE ROGERS	526 79-8901	7:00	Dave Rogers	[illegible]	1200	300	Dave Rogers	
Pete Works	461-73-5870	7:00	Pete Works	No Lunch		300	Pete Works	
Thom J. GREER	526-41-5824	6:30	Thom Greer	1110	12:30	2:30	Thom Greer	
Dan Weddle	387-70-8677	6:30	Dan Weddle	1110	12:30	2:30	Dan Weddle	
DAN GINN	527-50-9516	8:30	Dan Ginn	11:30	12:00			

SUPERVISOR'S SIGNATURE: Perry Giordano

Given to Excaltech 10-9-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: STRUCTURE (6) DATE: 10/6/90 DAY: SATURDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
David Weddle	587-28-8677	10.00	David Weddle			12.00	David Weddle	2 hr
Thom J. Greer	566-47-8824	10:00	Thom Greer			12:00	Thom Greer	
David Chase	585-76-6129	10:00	David Chase			12:00	David Chase	
Mike Vandelip	068-56-7934	10:00	Mike Vandelip			12:00	Mike Vandelip	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Turn to Excelitech 10-9-90

ASNET

DAILY "SIGN IN" AND "OUT" LOG

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: 9415 W Calle-LA-pkz DATE: 10-18-90 DAY: MONDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	006-080362	7:00	Perry Girardin	—	—	10:30	Perry Girardin	
PETE WORKS	441-33-5620	700	Pete Works	10:30	11:30	4:00	Pete Works	
DAVID CHASE	585-76-6129	7:00	David Chase	10:30	11:30	4:00	David Chase	
David Weddle	387-78-8677	700	David Weddle	—	—	10:30	David Weddle	
S Rey	527-91-3594	6:30	S Rey	10:30	11:30	4:00	S Rey	
Thom J. Green	566-41-8811	7:00	Thom J. Green	10:30	11:30	4:00	Thom J. Green	

SUPERVISOR'S SIGNATURE: _____

(MUST BE SIGNED)

Given to Excelsior 10-15-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: FLood CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: STRUCTURE DATE: 10/10/90 DAY: WED

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
Perry GIRARDIN	006-68-0367	800	Perry Girardin	11:30 AM	100 PM	300	Perry Girardin	
PETE WORKS	441-33-5620	700	Pete Works	1130	100	300	Pete Works	
David weddle	382-78-8677	7.00	David weddle	11:25	1.00	330	David weddle	
Thom T. GROSS	566-41-8821	7:00	Thom T. Gross	11:25	1:00	330	Thom T. Gross	
JERRY LESTER	527-73-9300	7:00	Jerry Lester	11:30	100	300	Jerry Lester	
DAVID CHASE	585766179	7:00	David Chase	1130	100	300	David Chase	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-15-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: FLOOD CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: STRUCTURE (H) DATE: 10/11/90 DAY: THURSDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	006-68-0362	700	Perry Girardin	1100	1200	330	Perry Girardin	
DAVE ROGERS	526 79 8401	7:00	Dave Rogers	1100	1200	12:45	Dave Rogers	8:30
JERRY HESTER	527-73-9882	7:00	Jerry Hester	1100	1200	1245		
Thom J. Greene	526-49-5424	7:00	Thom J. Greene	1100	1200	1215	Thom J. Greene	8:30
S. Kaiser	527 91 3594	700	S. Kaiser	1100	1200	330		
PETE WORKS	466-33-8620	700	P. Works	1100	1200	1030	P. Works	12:30
David Waddle	387-78-8677	7:00	David Waddle	1100	1200	12:45	David Waddle	12:30

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excellitch 10-15-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: Perry Girardin

AREA: Structure (F) DATE: 10/12/90 DAY: Friday

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
Perry Girardin	006-64-0360	700	Perry Girardin	1100	1200	330	Perry Girardin	
S Rapp	527913594	700	[illegible]	1100	1200	330	[illegible]	
P Works	461-37-5020	700	P Works	1100	12:00	3:30	R F Works	
Jerry Lester	527-73-9302	7:00	[illegible]	1100	12:00	3:30	[illegible]	
David Chase	585766129	7:00	David Chase	1100	12:00	3:30	David Chase	
Dan Ginn	527509316	9:00	Dan Ginn	—		3:30	Dan Ginn	
David Weddle	387-78-8677	7:00	David Weddle	11:00	12:00	3:30	David Weddle	
Thom J. Gregoire	526-73-4021	7:00	[illegible]	11:00	12:00	3:00	[illegible]	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-16-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: flood control JOB #: 418 SUPERVISOR: PERRY GIRARD

AREA: STRUCTURE (F) DATE: 10/15/90 DAY: MONDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	006-64-0362	700	Perry Girardin	1000	1130	400	Perry Girardin	
DAVE ROGERS	526 25 8441	7:00	[illegible]	10:00	1130	400	[illegible]	
PETE WORKS	461-33-5620	7:30	P. Works	1000	1130	400	P. Works	
S Rapp	527-71-3844	700	S Rapp	1000	1130	400	S Rapp	
J. Lester	527-73-4702	730	[illegible]	1000	1130	400	[illegible]	
DAVID CHASE	585 76 6129	7:00	David Chase	1000	1130	400	D Chase	
David Weddle	387-78-8677	11:30	David Weddle	1600	11:30	400	David Weddle	
DAN GINN	527-50-9316	10:00		—		1:45	Dan Ginn	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Equitech 10-17-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: Flood Control JOB #: 95.8 SUPERVISOR: PERRY GIRARDIN

AREA: (F) DATE: 10/16/90 DAY: TUESDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	004-690362	700	Perry Girardin	1100	1200	530	Perry Girardin	
S Rapp	527-91-3544	700	S Rapp	1100	—		S Rapp	
P Works	461-33-8620	700	P Works	[illegible]	1200	2:45	P Works	
Tom J. Green	[illegible]	7:00	T J Green 11.45	[illegible]	11:55	1:30	[illegible]	
Dandurdelle	587-78-8677	700	Dandurdelle 11.45	[illegible]	1155	1:30	Dandurdelle	
DAVID CHASE	585-76-6129	7:00	David Chase	1100	12:00	1:30	David Chase	
PAUL BOGER	516-29-8440	[illegible] 900	Paul Boger	1100	12:0	2:30	Paul Boger	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Exceltech 10-24-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG ASNET

5 1/4

JOB NAME: Flood control JOB #: 9146 SUPERVISOR: PERRY GIKARDIN

AREA: (E) DATE: 10/17/90 DAY: WED

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIKARDIN	004-68-0362	700	Perry Gikardin	1100	1145	300	Perry Gikardin	
PETE WORKS	441-35-5620	700	Pete Works	1100	1130	1030	Pete Works	5 6
Scott Rapp	527-91-3594	700	S Rapp	1100	1145	1230	S Rapp	
David Lardaddle	387-28-8777	700	D Lardaddle	1100	11:45	1230	D Lardaddle	
Dave Rogers	326-79-8481	700	[illegible]	1100	11:45	12:30	Dave Rogers	

SUPERVISOR'S SIGNATURE: Perry Gikardin
(MUST BE SIGNED)

Given to Excaltech 10-24-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: flood control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: (F) DATE: 10/18/90 DAY: THURSDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARDIN	006-68-0362	700	Perry Girardin	1100	—		Perry Girardin	
DAVID CHASE	585-76-6125	7:00	David Chase	1100	1200	330	David Chase	
PETE WORLS	461-37-5220	700	Pete Worls	1100	1200	330	Pete Worls	8½
DAVE ROGERS	526-78-8861	7:00	Dave Rogers	1100	1200	330	Dave Rogers	
DAVE D WEDDLE	387-78-8677	700	Dave Weddle	1100	1200	330	Dave Weddle	
THOMAS GREER	586-49-8821	700	Thomas Greer	1100	1200	330	Thomas Greer	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-24-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY GIRARD

AREA: (F) DATE: 10/19/90 DAY: FRIDAY

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
PERRY GIRARD IN	006-68-1362	700	Perry Girard	430	—		Perry Girard	
DAVID CHASE	585766129	700	David Chase	11:25	12:35	4:45	David Chase	
David Waddle	387-78-8677	700	David Waddle			430	David Waddle	
PETE WORKS	441-33-2600	700	Pete Works	1130	1230	5:45	Pete Works	9
Thom J. Green	566-47-8824	7:00	Thom Green			430	Thom Green	
DAVE ROGERS	526798001	7:30	Dave Rogers	9:15		430	[illegible]	
DAN GWIN	527-50-9316	9:45	Dan Gwin	—		4:30	Dan Gwin	

SUPERVISOR'S SIGNATURE: Perry Girard
(MUST BE SIGNED)

Given to Exceltech 10-24-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: Flood Control

JOB #: 98

SUPERVISOR: PERRY C'LLAGHAN

AREA: (F)

DATE: 10/22/90

DAY: Mon

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
Pete Works	561-33-5020	9:00		12:30	1:30	3:30		7½
Thom J. Greer	586-47-6824	9:00		12:30	1:30	—		
J. Lester	527-73-9302	9:00		12:30	1:30	3:30		
Dale Rogers	526-79-8401	11:00		12:30	1:30	3:30		
David Chase	585-76-6129	9:30		12:30	—			

SUPERVISOR'S SIGNATURE: Perry Lynch (MUST BE SIGNED)

Given to Excaltech 10-24-90

EMPLOYEE ONLY----DAILY SIGN IN / OUT LOG

ASNET

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

AREA: F DATE: 10/23/90 DAY: TUE

(PRINT) EMPLOYEE NAME	S.S.#	TIME IN	(VERIFY TIME IN) EMPLOYEE SIGNATURE	TIME OUT	TIME IN	TIME OUT	(VERIFY TIME OUT) EMPLOYEE SIGNATURE	TOTAL HOURS
Pete Works	661-37-5620	700	PZWorks	1100	1200	400	PZWorks	8 37/4
David Chase	585-66-1121	7:00	D Chase	1100	1200	400	David Chase	
John McKissick	527-78-8920	7:00	John McKissick	11:00	12:00	4:00	John McKissick	
Dan Lurddle	527-78-8671	7:00	Dan Lurddle	11:00	12:00	4:00	Dan Lurddle	
Dave Robers	527-79-8001	7:00	[illegible]	1100	1200	400	[illegible]	
Jerry Lester	527-[illegible]	7:00	Jerry Lester	1100	1200	400	Jerry Lester	
PERRY GIRARDIN	006-68-0362	7:00	Perry Girardin	1100	1200	400	Perry Girardin	

SUPERVISOR'S SIGNATURE: Perry Girardin
(MUST BE SIGNED)

Given to Excaltech 10-1-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 9/24/90 SUPERVISOR: Perry Brown

JOB NAME: MARICOPA COUNTY flood CONTROL JOB#: 918
LOCATION: 1407 E. STATE AVE
NUMBER OF WORKERS: #5

1. Description of work done: PREP WORK COMPLETE SHOWER, 2 NES AIR (2 1000) IN PLACE GUY MCGILL IN DUPLEX AREA
Prep OK – [illegible]

2. Equipment Employed: 2 NES AIR'S, 1 SHOWER 6 FT LADDER, SCAFFOLDING

3. Sub-Contractors/Visitors on Job: JANICE, GUY MCGILL

4. Test and / or Inspection Made: OF PREP WORK DONE IN DUPLEX AREA – OK [illegible]

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: CEILING IN DUPLEX SCRAPED and BAGED, also TAPED, SEALED ENTRANCE TO DUPLEX CONTAINMENT, BOTH HOG'S RUNNING FINE.

SEE REVERSE SIDE

Given to Excltech 10-1-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 9/25/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: MARICOPA COUNTY flood CONTROL JOB#: 918
LOCATION: 1407 E. STATE AVE Phx.
NUMBER OF WORKERS: #5

1. Description of work done: ROOF REMOVAL

2. Equipment Employed: 4 Roofing shovels

3. Sub-Contractors/Visitors on Job: Guy McGill, JANICE EXCETEL

4. Test and / or Inspection Made: ROOF AFTER REMOVAL PASSED, READY FOR ENCAPSULATION (9/26/90) TOMMORROW

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: ROOF AREA ON GROUND STACKED UP AND TOTALLY CLEANED, ALL BAG'S DOUBLED AND PUT IN PROPER DISPOSAL TRAILER.

SEE REVERSE SIDE

Given to Excltech 10-1-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 9/26/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: MARICOPA COUNTY Flood CONTROL JOB#: 918
LOCATION: 1401 E. STATE AVE Phx
NUMBER OF WORKERS: 6

1. Description of work done: ENCAPSOLATION DONE ON ROOF And SUROUNDING ARE, DETAIL and REST of TILE In DUPLEX AREA.

2. Equipment Employed: grinder, 4 floor SCRAPERS BAG of RAGS, 2 hand SCRAPERS HORSE TROUGH SHOWER, 2 HEPA FILTRATION FOR WATER. 5 GALLON BUCKET MASTIC REMOVER

3. Sub-Contractors/Visitors on Job: Guy McGill

4. Test and / or Inspection Made: did VISUAL INSPECTION on ROOF AFTER ENCAPSOLATED. WENT In DUPLEX And did PRE-VISUAL on CEILING And FLOOR, Said Looking GREAT. NEEDS LITTLE MORE DETAIL.

5. Unusual Conditions or Problems: PERRY STEPPED ON NAIL. going To GET TECHNA SHOT

6. Status at Quiting: SOME MASTIC LEFT In DUPLEX, will BE TOTALLY FINISHED 9/27/90.

SEE REVERSE SIDE

Given to Excultech 10-11-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 9/27/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: MARICOPA COUNTY Flood CONTROL JOB#: 918
LOCATION: 1407 E. STACE AVE Phx
NUMBER OF WORKERS: 6

1. Description of work done: REMOVED TILE AND MASTIC In building (C), ~~[illegible] INSPECTED~~ didnt finish edges. ALSO finished MASTIC in building (B) SUY mc Sill Inspected And or SANICE PASSED! ENCAPSULATED.

2. Equipment Employed: MASTIC REMOVER, SCRAPPERS SHOVELS BAGS, hogs (2)

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: Building (B) PASSED And finaced, PCM SAMPLES MADE.

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: building (B) PASSED, ENCAPSULATED FINAL SAMPLES TAKEN. Building (C) TILE REMOVED and minimal MASTIC on edges LEFT.

SEE REVERSE SIDE

Given to Excltech 10-1-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 9/28/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: MARICOPA COUNTY FLOOD CONTROL JOB#: 918
LOCATION: 1417 E. STATE AVE PHX
NUMBER OF WORKERS: 5

1. Description of work done: FINISHED PREP IN BUILDING, REMOVED MASTIC AND TILE GOT INSPECTION, PASSED ENCAPSULATED, REMOVED PLASTIC FROM BUILDING (B) WITH (2) HOS-PASSED INSPECTION ON BUILDING (C) ENCAPSULATED PCM SAMPLES RUN.

2. Equipment Employed: 1 1 1 1 1 1 1 1 1 1 1 1

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: INSPECTION MADE ON BUILDING (C) PASSED ENCAPSULATED, 1417 E. STATE AVE PASSED INSPECTION (FINAL) ENCAPSULATED, TEST WILL BE RUN MONDAY

5. Unusual Conditions or Problems:

6. Status at Quiting: ENCAPSULATED 1417 E. STATE AVE, LAST HOUSE, TEST WILL BE RUN MONDAY PCM SAMPLES.

SEE REVERSE SIDE

Given to Executive 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/1/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: MARICOPA COUNTY Flood CONTROL JOB#: 918
LOCATION: 5418 N. CALLE-LA-PAZ PARADISE VALLEY
NUMBER OF WORKERS: 3

1. Description of work done: PREPing K building

2. Equipment Employed: TAPE, POLY RAZOR'S

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: NONE

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: PREPED ABOUT 1/2 OF building

SEE REVERSE SIDE

Given to Excultech 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/2/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: MARICOPA COUNTY FLOOD CONTROL JOB#: 918
LOCATION: 5418 N. CALLE-LA-PAZ PARADISE VALLEY
NUMBER OF WORKERS: 4

1. Description of work done: PREPING BUILDING (R) WORK GOING FINE. GOT CHANGE ORDER IN FRONT ENTRANCE OF BUILDING (R) CEILING

2. Equipment Employed: HAMMER, STAPLE GUN, TAPE, SPRAY GLUE,

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: NONE

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: STILL PREPING BUILDING (R) will BE READY FOR REMOVAL TOMORROW.

SEE REVERSE SIDE

Faxed to Excelsior 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/3/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: MARICOPA COUNTY Flood CONTROL JOB#: 918
LOCATION: 5418 N. CALLA-LA-PAZ PARADISE VALLEY
NUMBER OF WORKERS: 3

1. Description of work done: PASSED INSPECTION TO START REMOVAL In Building (K).

2. Equipment Employed: SHOWER, hAMMERS (2), 2 neg ARSi (1000)

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: PASSED Inspection TO START REMOVAL In Building (K)

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: REMOVAL 1/2 WAY FINISHED In Building (K)

SEE REVERSE SIDE

Faxed to Excellsch 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/9/90 SUPERVISOR: PERRY GIORDINO

JOB NAME: MARICOPA COUNTY flood CONTROL JOB#: 918
LOCATION: 5415 W. CALLE-LA-PAZ PARADISE VALLEY
NUMBER OF WORKERS: 5

1. Description of work done: ABATEMENT STILL in PROGRESS In Building (K) STARTED GARAGE AREA And did PART OF THE BAG OUT TO BE DONE.

2. Equipment Employed: SHOVELS, hammers, bag's, WATER FILTRATION, SHOWER, SCRAPPERS RAZOR'S

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: JOY CAME In CONTAINMENT And SHOWED US EXACTLY WHAT HE WANTED

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: AREA CLEAN In CONTAINMENT Will START LAST PART OF REMOVAL TOMMOROW In BACK AREA of Building (K)

SEE REVERSE SIDE

Given to Excelsior 10-9-96

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/5/98 SUPERVISOR: PERRY GIARDIN

JOB NAME: Flood CONTROL JOB#: 918
LOCATION: 5418. W. CALLE-LA-PAZ PARADISE VALLEY
NUMBER OF WORKERS: 6

1. Description of work done: DETAILED STRUCTURE (K) BAGED-OUT. And ALL EQUIPMENT CLEANED AND SENT OUT. TRAILER WITH BAGS REMOVED STILL WAITING FOR ANOTHER TRAILER

2. Equipment Employed: LADDER'S 2, HAMMER'S 2, SREWDRIVER SCRAPPER'S

3. Sub-Contractors/Visitors on Job: GUY McGILL

4. Test and / or Inspection Made: INSPECTION made on STRUCTURE (K) for FINAL VISUAL PASSED and ENCAPSULATED. TEST will be RUN ON 10/9/98

5. Unusual Conditions or Problems:

6. Status at Quiting: Building (K) ENCAPSULATED

SEE REVERSE SIDE

Given to Excaltech 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/8/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: Flood Control JOB#: 918
LOCATION: 5418 W. SALLE-LA-RAZ
NUMBER OF WORKERS: 4

1. Description of work done: Prepping Building (L) STARTED REMOVAL ON BATHOUSE AND TWO CLOSETS BOTH CLOSETS DONE AND ENCAPSULATED, BATHOUSE NEEDS DETAIL

2. Equipment Employed: TAPE, SCRAPPERS FOR FLOOR, MASTIC REMOVER,

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: ON CONTAINMENTS for STRUCTURE (L)

5. Unusual Conditions or Problems:

6. Status at Quiting: BATHOUSE REMOVED AND BAGED-OUT 2 CLOSETS FINISHED AND ENCAPSULATED. TEST will BE RUN TOMORROW.

SEE REVERSE SIDE

Given to Excaltech 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/9/90 SUPERVISOR: PERRY GINNARDIN

JOB NAME: Flood CONTROL JOB#: 918
LOCATION: 5419 W. CALLE-LA-PAZ
NUMBER OF WORKERS: 7

1. Description of work done: DETAIL ON BATHROOM AND REMOVAL STARTED IN KITCHEN AREA ON STRUCTURE(K)

2. Equipment Employed: HAMMER'S, 2 SCRAPPERS HORSE(2) 1 broom SPACCON BUCKET MASTIC REMOVER

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: TWO PCM SAMPLES ARE BEING RUN IN BOTH CLOSETS.

5. Unusual Conditions or Problems:

6. Status at Quiting:

SEE REVERSE SIDE

Given to Excltech 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/10/90 SUPERVISOR: PERRY GINARDINI

JOB NAME: FLOOD CONTROL JOB#: 918
LOCATION: 34 11 E. STANFORD DR. PARADISE VALLEY
NUMBER OF WORKERS: 7

1. Description of work done: REMOVED BOTH ROOF AREAS ON STRUCTURE (J) AND ENCAPSULATED

2. Equipment Employed:

3. Sub-Contractors/Visitors on Job:

4. Test and / or Inspection Made: ON BOTH ROOFS PASSED AND ENCAPSULATED

5. Unusual Conditions or Problems:

6. Status at Quiting: BOTH ROOFS ENCAPSULATED STRUCTURE (J) DONE

SEE REVERSE SIDE

Given to Excaltech 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/11/90 SUPERVISOR: PERRY CLEKARDIW

JOB NAME: Flood COWTROL JOB#: 918
LOCATION: 3197 E. SAN MIGUEL
NUMBER OF WORKERS: 6

1. Description of work done: PREPING Building F PREPED OUT. START REMOVAL TOMORROW 10/12/90

2. Equipment Employed:

3. Sub-Contractors/Visitors on Job: FLOOD CONTROL GUY RESET

4. Test and / or Inspection Made: ~~NONE~~ (F) ON PREP PASSED OF Building START REMOVAL Inside TOMORROW

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: PREPED OUT Building F PASSED Inspection.

SEE REVERSE SIDE

Given to Excelltech 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/12/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: FLOOD CONTROL JOB#: 918
LOCATION: 3197 E. SAN MIGUEL
NUMBER OF WORKERS:

1. Description of work done: CONTAINMENT PREP DONE READY, HOOKED UP NEG AIR (1000) FINISHED DECON STARTED REMOVAL IN STRUCTURE (F)

2. Equipment Employed: ROOF SHOVELS (4) 3-4 HAMMERS 2 SCOOP SHOVELS ABOUT 5 SCRAPPERS 2 ROLLS BAGS

3. Sub-Contractors/Visitors on Job: GUY RESET

4. Test and / or Inspection Made: GUY MCGILL did INSPECTION ON (F) PASSED. (START REMOVAL)

5. Unusual Conditions or Problems:

6. Status at Quiting: STILL REMOVING ASBESTOS ALOT OF BAGS IN FIRST ROOM. CLEANED UP CONTAINMENT. FOUND HOT TAPE ON DUCTS BEHIND WALL. TALK TO IH. MONDAY

SEE REVERSE SIDE

Given to Excellent 10-17-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/15/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: FLOOD CONTROL JOB#: 918
LOCATION: 3021 E. SAN MIGUEL PARADISE VALLEY
NUMBER OF WORKERS: 8

1. Description of work done: REMOVAL OF BUILDING (F) FINISHED BACK BEDROOM, BATHROOM, HALLWAY, PATIO ENCLOSED, BEDROOM, FINISHING UP ON LIVING/ROOM TOMMOROW, ALSO did BAGOUT.

2. Equipment Employed: SHOVELS (2) HAMERS (5) MASTIC REMOVER, TAPE, BAGS, RAZOR SCRAPPER'S (2)

3. Sub-Contractors/Visitors on Job: FLOOD CONTROL, GUY MCGILL

4. Test and / or Inspection Made: NONE

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: did BAGOUT WILL COMPLETE DETAIL TOMOROW.

SEE REVERSE SIDE

Faxed to Excaltech 10-18-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/16/90 SUPERVISOR: PERRY GINARSIN

JOB NAME: Flood CONTROL JOB#: 918
LOCATION: 3021 E. SAN Miguel PARADISE VALLEY
NUMBER OF WORKERS: 7

1. Description of work done: FINISHED REMOVAL IN CONTAINMENT ON (F) DOING DETAIL WORK FOR INSPECTION

2. Equipment Employed: SHOVELS (3) SCREWDRIVER (1) TAPE (3) WIRE BRUSES (3)

3. Sub-Contractors/Visitors on Job: Guy McGill

4. Test and / or Inspection Made: ON (F) PASSED FINAL INSPECTION, ENCAPSULATED, RAN PCM TEST

5. Unusual Conditions or Problems: NON

6. Status at Quiting: ENCAPSULATED (F) ROWNING PCM SAMPLES.

SEE REVERSE SIDE

Given to Exultech 10-24-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/17/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: FLOOD CONTROL JOB#: 918
LOCATION: 3021 E. SAN MIGUEL
NUMBER OF WORKERS:

1. Description of work done: STARTING ROOF- ~~REMOVAL~~ PEEPING EDGES AROUND ROOF. CLEANED AREA (F) AGAIN RE-EXCUPED.

2. Equipment Employed: " " " " " "

3. Sub-Contractors/Visitors on Job: GUY MCGILL

4. Test and / or Inspection Made: TEST SAMPLE ON (F) PCM SAMPLES CAME BACK FAILED IN LIVING ROOM AND FIRST BEDROOM. .01

5. Unusual Conditions or Problems: NONE

6. Status at Quiting: TEST BEING RUN ON (F) IN CONTAINMENT AGAIN 10/17/90. ROOF OVER 1/2 WAY PEEPED, WILL START REMOVAL FIRST THING IN MORNING.

SEE REVERSE SIDE

Given to Exceltech 10-24-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/18/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: flood CONTROL JOB#: 915

LOCATION: 3021 C, SAN MIGUEL

NUMBER OF WORKERS: 6

1. Description of work done: roof REMOVAL

2. Equipment Employed: SHOVELS, HAMMERS, STAPLE-GUN TAPE, BAGS, poly STRING, SUITS, GENERATOR AIR-LESS SPRAYER

3. Sub-Contractors/Visitors on Job: guy magill, guy RESET

4. Test and / or Inspection Made: NONE

5. Unusual Conditions or Problems:

6. Status at Quiting: half of ROOF REMOVED AND BAGED. Should finish-up tomorrow

SEE REVERSE SIDE

Given to Excaltech 10-24-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/19/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: flood CONTROL JOB#: 918
LOCATION: 3021 E. SAN Miguel
NUMBER OF WORKERS: 6

1. Description of work done: ROOF REMOVAL And detail, ALSO STARTING PREP ON change order

2. Equipment Employed: Shovel's, Hog, Tape, Suits, bag's, poly, hammers,

3. Sub-Contractors/Visitors on Job: guy mcgill

4. Test and / or Inspection Made:

5. Unusual Conditions or Problems:

6. Status at Quiting: BAGOUT ON ROOF COMPLETE Little EXTRA WORK TO BE done ON ROOF

SEE REVERSE SIDE

Turn to Exceltech 10-24-90

ASNET
ASBESTOS SERVICES NETWORK

DAILY LOG

DATE: 10/22/90 SUPERVISOR: PERRY GIRARDIN

JOB NAME: FLOOD CONTROL JOB#: 918
LOCATION: 3021 E. SAN MIGUEL
NUMBER OF WORKERS: 6

1. Description of work done: STARTED PULLING UP BOARDS ON ROOF TO CLEAN INBETWEEN CRARS

2. Equipment Employed: SHOVELS, HAMMERS, BAS'S, PAY

3. Sub-Contractors/Visitors on Job: JOY McGILL

4. Test and / or Inspection Made: NONE

5. Unusual Conditions or Problems:

6. Status at Quiting: PULLED UP BOARDS CLEANING INBETWEEN

SEE REVERSE SIDE

Leave to Excel Tech 10-1-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"—~~CONTRACTOR~~ SIGN IN/OUT SHEET

JOB NAME: MARICOPA COUNTY flood control JOB #: 918 SUPERVISOR: Perry Dinardi

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
9/24/90	JANIE SAUNDERS	Janie Saunders	ASNET	7:30		paperwork	—
9/24/90	Laurence Guy McGill	Laurence Guy McGill	ExcelTech	7:30	4:00	oversight	1/2 face HEPA
9/24/90	Janice Petticrew	Janice Petticrew	ExcelTech	7:45		Proj. Mgmt.	—
9/24/90							

SUPERVISOR'S SIGNATURE: Perry Dinardi
(Must be signed)

Turn to Excltech 10-1-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: MARICOPA COUNTY FLOOD CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
9/25/90	Lawrence Guy McGill	Lawrence Guy McGill	Excltech	7:15	11:05	oversight	½ face
9/25/90	Janice Pettiveu	Janice Pettiveu	"	7:30		Proj. Mgmt.	—
1/25/90	DAN GINN	Dan Ginn		9:00			—

SUPERVISOR'S SIGNATURE: Perry Girardin
(Must be signed)

Given to Excel tech

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: MARICOPA COUNTY Flood CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
9/26/90	Lawrence Guy McGill	Lawrence Guy McGill	Excel tech	site 7:45	site 12:45	Oversight	½ face
9/26/90	Janice Petticrew	Janice Petticrew	Excel tech	12:00		Proj. Mgmt	½ face
9/26/90	Lawrence Guy McGill	Lawrence Guy McGill	"	8:40	9:00	Progress Inspect	" (C)

SUPERVISOR'S SIGNATURE: Perry Girardin
(Must be signed)

Given to Exceltech 10-1-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: [illegible]

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
9-27-90	Lawrence Guy McGill	Lawrence Guy McGill	Exceltech	site 7:00	site 3:30	Oversight	½ face
9-27-90	Janice Pettigrew	Janice Pettigrew	Exceltech	7:00		Oversight	½ face
"	Lawrence Guy McGill	Lawrence Guy McGill	"	12:45	1:10	Final Clearance	" (C)
"	"	"	"	2:45	3:00	" "	" (C)

SUPERVISOR'S SIGNATURE: [illegible]
(Must be signed)

Given to Excelltech 10-[redacted]-90

X

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: Flood Control JOB #: 918 SUPERVISOR: [illegible]

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
9/28/90	Lawrence Gary McGuire	Lawrence Gary McGuire	Excelltech Site	7:30	Site 4:00	Oversight	1/2 face
9/28/90	"	"	"	8:45	9:00	Visual inspect	1/2 face (B)
9/28/90	"	"	"	1:00	1:30	Final clearance	" (B)
"	"	"	"	3:10	3:20	"	" (B)
"	"	"	"	3:00	3:15	Visual Inspect	" (A)

SUPERVISOR'S SIGNATURE: [illegible]
(Must be signed)

Lawrence
Excaltech
10-9-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: Flood CONTROL JOB #: 918 SUPERVISOR: PERRY GINNARDINO

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
10-4-90	Laurence Guy McGill	Laurence Guy McGill	Excaltech	7:00		Oversight	½ face (site)
"	"	"	"	12:40	1:15	~~in~~ Containment ~~inspection~~ progress	" (Containment)

SUPERVISOR'S SIGNATURE: Perry Ginnardino
(Must be signed)

Given to Excel tech 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: flood control JOB #: 918 SUPERVISOR: PERRY GIRARDIN

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
10-5-90	Lawrence Guy McGill	Lawrence Guy McGill	Excel tech	2:15	2:35	Final Inspection	½ face, coveralls (contact L)
"	"	"	"	7:25	3:00	oversight	" (site "L")

SUPERVISOR'S SIGNATURE: Perry Girardin
(Must be signed)

Given to Excultech 10-9-90

ASNET
ASBESTOS SERVICES NETWORK

"VISITORS ONLY"——CONTAINMENT SIGN IN/OUT SHEET

JOB NAME: Flood CONTROL JOB #: 918 SUPERVISOR: PERRY GIRARDIN

DATE	(PRINT) NAME	SIGNATURE	EMPLOYER	TIME IN	TIME OUT	REASON	WHAT PROTECTION
10/8/90	Laurence Guy McGill	Laurence Guy McGill	Excultech	7:15	2:00	Proj. Mngmt.	(sites L & K) 1/2 Tyvek, coveralls
"	"	"	"	8:00	8:55	Final samples set	(containment site L) "
"	"	"	"	11:10	11:25	Final samples Pull	" "

SUPERVISOR'S SIGNATURE: _____
(Must be signed)

Given to Excaltech 10-15-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: Flood CONTROL JOB#: 918 CONSULTANT FIRM: EXCELTECH

AREA: STRUCTURE (R) DATE: 10/9/90 DAY: TUESDAY

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	7:15	3:30					site K
2) "	"	"	10:10	10:20					1/2 face, coverall (bath house) K
3) "	"	"	10:30	10:45					1/2 face, coverall (kitchen) K
4) "	"	"	3:15	3:30					1/2 face, coverall (bathroom) K
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Exceltech 10-17-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: flood control JOB#: 918 CONSULTANT FIRM: EXCELTECH

AREA: STRUCTURE (J) & (K) DATE: 10/10/90 DAY: WED

NAME (PRINT)	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	JZ7-88-8177	8:00	1:00					sites J & K
2) "	"	"	8:55	9:25	3:20	3:25			½ face K bathroom
3) "	"	"	9:35	10:05	3:05	3:15			½ face K kitchen
4) "	"	"	10:30	10:50	1:15	1:25			J Guest house
5) "	"	"	12:45	1:00	2:40	2:55			K Bath house
6) ~~"~~	~~"~~	~~"~~	~~1:15~~	~~1:25~~					~~J Guest house~~
7) ~~"~~	~~"~~	~~"~~							
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Brown
(MUST BE SIGNED)

Given to Excltech 10-17-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: Flood control JOB#: 918 CONSULTANT FIRM: EXCELTECH

AREA: STRUCTURE ~~(X)~~ (H) (J) DATE: 10/11/90 DAY: THURS

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	7:15	4:05					Site H, J
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excltech 10-17-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: FLOOD CONTROL JOB#: 918 CONSULTANT FIRM: EXCELTECH

AREA: STRUCTURE (H) DATE: 10/12/90 DAY: FRI

NAME (PRINT)	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	6:50	7:20					site H
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Excltech 10-17-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: Flood control JOB#: 918 CONSULTANT FIRM: EXCELTECH

AREA: F DATE: 10/15/90 DAY: MON

NAME (PRINT)	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	8:00	10:30	1:00	3:30			Y (Site H)
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Given to Epaltech 10-17-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET

ASNET

JOB NAME: _____ JOB#: _____ CONSULTANT FIRM: _____

AREA: Structure H,J DATE: 10/16/90 DAY: _____

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	7:25	~~1:20~~	~~1:45~~				sites H,J
2) "	"	"	1:20	1:45					½ face H containment
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: _____
(MUST BE SIGNED)

Sent to Excel Tech 10-24-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: Flood Control JOB#: 918 CONSULTANT FIRM: EXCEL TECH

AREA: (F) DATE: 10-17-90 DAY: Wed

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	11:10		1pm				Site H
2) "	"	"	12:30	1:10	~~2:45~~ 2:25	2:45			Containmt. H
3) ~~Pete Works~~	~~RW~~								
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Ervin
(MUST BE SIGNED)

Given to Excelteck 10-24-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: F-C JOB#: 918 CONSULTANT FIRM:

AREA: DATE: 10/18 DAY: THURS

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	7:30	3:00	—				Site H
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry D [illegible]
(MUST BE SIGNED)

Sent to Excaltech 10-24-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET

ASNET

JOB NAME: F-C JOB#: 9-18 CONSULTANT FIRM:

AREA: DATE: 10/19/90 DAY: Fri

NAME (PRINT)	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	521-88-8177	8:00	4:40					Site H
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: [illegible]
(MUST BE SIGNED)

Excel Tech
10-24-96

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET

ASNET

JOB NAME: F.C. JOB#: 918 CONSULTANT FIRM:

AREA: DATE: 10/22 DAY: MON

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	8:45	12:40	2:00	3:30	—	—	½ face
2)									
3)									
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Perry Brooks
(MUST BE SIGNED)

Given to Exeltech 10-24-90

CONSULTANT---[CONTAINMENT]----SIGN IN / OUT SHEET ASNET

JOB NAME: F-C JOB#: 918 CONSULTANT FIRM:

AREA: DATE: 10/23/90 DAY: TUES

(PRINT) NAME	SIGNATURE	S.S.#	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	WHAT PROTECTION
1) Lawrence Guy McGill	Lawrence Guy McGill	527-88-8177	7:55						
2) Laurence Spanulescu	SPANULESCU LAURENCE		11:45	12:10					
3) Guy RACETTE	M Racette	G McGill	11:45	12:10					
4)									
5)									
6)									
7)									
8)									
9)									
10)									
11)									
12)									
13)									
14)									

SUPERVISOR SIGNATURE: Percy Dirks
(MUST BE SIGNED)

Given to Excaltech 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist JOB #: 918

ADDRESS: 1407 E. State AVE. (House)

SUPERVISOR: JERRY GIRARDINO DATE: _____

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		✓
B. Horizontal Surfaces		
C. Pipes		
D. Ventilation Equipment		✓
E. Verticle Surfaces		
F. Ducts		✓
G. Register		
H. Lights		
Pre-abatement check list checked against area at completion		✓
All necessary restoration completed		✓

FIELD NOTES:
Record any problems encountered here: _____

FINAL AIR SAMPLE RESULTS: _____

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) Jerry Girardino

Given to Exceltech 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist. JOB #: 918

ADDRESS: 1407 E. State Ave (Duplex)

SUPERVISOR: Perry Bilardin DATE: _____

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		/
B. Horizontal Surfaces		
C. Pipes		
D. Ventilation Equipment		
E. Verticle Surfaces		
F. Ducts		
G. Register		
H. Lights		
Pre-abatement check list checked against area at completion		✓
All necessary restoration completed		✓

FIELD NOTES:
Record any problems encountered here: _____

FINAL AIR SAMPLE RESULTS: _____

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) [signature]

Given to Excaltech 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist JOB #: 918

ADDRESS: 1417 E. State Ave

SUPERVISOR: PERRY GIARDINA DATE: _____

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		/
B. Horizontal Surfaces		/
C. Pipes		/
D. Ventilation Equipment		/
E. Verticle Surfaces		/
F. Ducts		/
G. Register		/
H. Lights		/
Pre-abatement check list checked against area at completion		/
All necessary restoration completed		/

FIELD NOTES:
Record any problems encountered here: _____

FINAL AIR SAMPLE RESULTS: _____

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) Perry Giardina

Given to Excelsior 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist. JOB #: 918

ADDRESS: 2643 E. Siesta Ln. (church)

SUPERVISOR: PERRY GIRARDIN DATE: 9/21/90

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		✓
B. Horizontal Surfaces		
C. Pipes		
D. Ventilation Equipment		
E. Verticle Surfaces		
F. Ducts		
G. Register		
H. Lights		✓
Pre-abatement check list checked against area at completion		
All necessary restoration completed		

FIELD NOTES:
Record any problems encountered here: CEILING REMOVED AND CLEANED NO PROBLEMS. JANICE did VISUAL INSPECTION PASSED.

FINAL AIR SAMPLE RESULTS:

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) [signature]

Given to Excaltech 10-17-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist. JOB #: 918

ADDRESS: 3197 E. San Miguel (H)

SUPERVISOR: JERRY GIRARDIN DATE: 10/17/90

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		/
B. Horizontal Surfaces		/
C. Pipes		
D. Ventilation Equipment		
E. Verticle Surfaces		/
F. Ducts		
G. Register		
H. Lights		
Pre-abatement check list checked against area at completion		
All necessary restoration completed		

FIELD NOTES:
Record any problems encountered here:

FINAL AIR SAMPLE RESULTS:

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) Jerry Girardin

Given to Excaltech 10-17-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist. JOB #: 918

ADDRESS: 3411 E. Stanford Dr (J)

SUPERVISOR: PERRY GIRARDIN DATE: 10/9/90

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		/
B. Horizontal Surfaces		/
C. Pipes		
D. Ventilation Equipment		
E. Verticle Surfaces		/
F. Ducts		
G. Register		
H. Lights		
Pre-abatement check list checked against area at completion		
All necessary restoration completed		

FIELD NOTES:
Record any problems encountered here:

FINAL AIR SAMPLE RESULTS:

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) [signature]

Given to Excellich 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist. JOB #: 918

ADDRESS: 7303 N. 14th Street

SUPERVISOR: PERRY P. GIRARDIN DATE: 10/9/90

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		✓
B. Horizontal Surfaces		
C. Pipes		
D. Ventilation Equipment		✓
E. Verticle Surfaces		
F. Ducts		✓
G. Register		
H. Lights		
Pre-abatement check list checked against area at completion		✓
All necessary restoration completed		✓

FIELD NOTES:
Record any problems encountered here:

FINAL AIR SAMPLE RESULTS:

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) Perry Girardin

Given to Excltech 10-15-90

ASNET
ASBESTOS SERVICES NETWORK

FINAL INSPECTION CHECK LIST

JOB NAME: Flood Control Dist JOB #: 918

ADDRESS: 3021 E. San Miguel

SUPERVISOR: PERRY GIRARDIN DATE: _____

CHECK LIST:

Residual dust on:	YES	NO
A. Floor		/
B. Horizontal Surfaces		/
C. Pipes		/
D. Ventilation Equipment		/
E. Verticle Surfaces		/
F. Ducts		/
G. Register		/
H. Lights		/
Pre-abatement check list checked against area at completion		/
All necessary restoration completed		/

FIELD NOTES:
Record any problems encountered here: _____

FINAL AIR SAMPLE RESULTS: _____

SUPERVISOR'S SIGNATURE (MUST BE SIGNED) Perry Girardin

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE INFORMATION---SHOULD HAVE FOR EACH EMPLOYEE:

(1) CERTIFICATE

(2) MEDICAL

(3) FIT TEST

(4) WORK RELEASE (FOR EACH JOB)

(5) SIGNED STATEMENT THAT EMPLOYEE IS TRAINED IN ALL PHASES OF ASBESTOS ABATEMENT.

(6) SIGNED STATEMENT THAT EMPLOYEE HAS READ ASNET'S RESPIRATOR PROTECTION PROGRAM

(7) PICTURE I.D. OF EMPLOYEE

EnviroMD

Division of Instruction
Asbestos Related Issues

3443 East Fort Lowell Road
Tucson, Arizona 85716
(602)881-1000

CERTIFICATE OF ACCREDITATION

Pete Works

Has Satisfactorily Completed All Requirements
Of The Environmental Protection Agency Approved Course

Refresher for
Practices and Procedures in Asbestos Abatement

Has Obtained Reaccreditation as an

Asbestos Abatement Worker

The Course was Conducted at

EnviroMD, Inc. *on* *Nov. 10*, *1989*

Director

891110-03-1
Certificate Number

ASBESTOS MEDICAL EXAMINATION

SUMMARY OF RESULTS

Name of Employee: Peter L. Works Date of Exam: 2-22-90

Date of Birth: 11-3-57 Social Security Number: 461-33-5620

1. Medical conditions detected that would place employee at increased risk of material health impairment from exposure to asbestos, tremolite, anthrophyllite or actinolite:

2. Limitations recommended on employee or upon use of personal protective equipment (ie: clothing, respirators):

DFT normal - PT may wear respirator during exerg.;
no physical abnormalities or limitations.

I have informed the above employee of the results of this medical examination and of any medical conditions resulting from asbestos, tremolite, anthrophyllite, or actinolite exposure that require further explanation or treatment.

Physician's Signature Date 1/10/90

John L. Jones
Physician's Name (Typed)

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, PETER LEE WORKS HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

6/15/90
DATE

Peter L. Works
SIGNATURE OF EMPLOYEE

461-33-5620
SOCIAL SECURITY NUMBER

Gary Lodigan
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, PETER LEE WORKS ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 6/15/90

Peter S. Works
SIGNATURE OF EMPLOYEE

461-33-5670
SOCIAL SECURITY NUMBER

Kay Lodigan
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: Pete L. Works S.S.# 461-33-5620
(PRINT)

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: North Size: M

FULL FACE -- Model: PAPR Racal Size: M

Testing Conductor: James Walden Date of Test: 7-6-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: _____

Test Conductor's Initial: JW

Employee's Initial: PLW

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/27/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Maricopa City

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

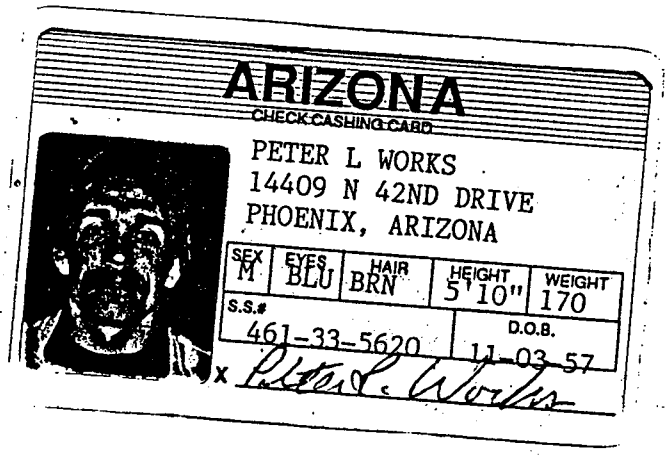
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

PETER LEE WORKS
(PRINT) NAME OF WORKER

P L Works
SIGNATURE OF WORKER

461-33-5620
SOCIAL SECURITY NUMBER

Guy Ledman
WITNESS



ARIZONA

CHECK CASHING CARD

PETER L WORKS
14409 N 42ND DRIVE
PHOENIX, ARIZONA

SEX	EYES	HAIR	HEIGHT	WEIGHT
M	BLU	BRN	5'10"	170

S.S.#	D.O.B.
461-33-5620	11-03-57

x Peter L. Works

A 3097

THE ASBESTOS INSTITUTE

Certifies that

MICHAEL C. VANDERLIP

Has attended the EPA approved course

AHERA

ANNUAL WORKER REFRESHER

and successfully passed the competency exam

Date of Issuance MAY 18, 1990

Date of Expiration MAY 18, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

EMPLOYEE TRAINING, RELEASE, AND
MEDICAL EXAMINATION DOCUMENTATION

Employee Name: Michael Vanderlip

Employee Address:

Employee Telephone No.:

Union Card Number: Classification of Worker:

Have you had in the past, or present, any respiratory problems? Yes No

Have you worked in the past with asbestos or fiberglass type materials? Yes No

The project you will be working on involves the use of asbestos and the removal of the asbestos from the building. Asbestos is considered a health hazard.

The company is supplying all necessary safety clothing and working conditions required and necessary for your protection from asbestos hazard.

You shall be instructed at commencement of the job on the required use of safety equipment, clothing, working conditions, and procedures. These must be rigidly adhered to. Smoking, eating, chewing gum are not permitted in the work areas. Disregarding of safety instructions shall result in instant dismissal.

You are aware of your legal right to select a powered air purifying respirator in lieu of any negative pressure respirator at the company's expense (OSHA 29 CFR 1926 58).

I am aware that smoking increases the risk of contracting lung cancer and/or Asbestosis, 90 times. I acknowledge that I have been advised by my employee and Physician at the annual medical exam to stop.

I acknowledge that safety instructions have been given to me by the company at my work commencement and I am thoroughly conversant with them and have answered the above questions truthfully.

Signed:

Employee Date 1/2/90

MEDICAL EXAMINATION:

Date: 1-2-90 Physician's Name: M. Whittaker, D.O./R. Darby, D.O. Address: 1840 W. Maryland Ave ~~Phoenix, Az.~~

Physician's OK to work while wearing respirator: YES

RESPIRATOR TRAINING:

Date: 1-10-90 Instructor's Name: W.E. STUMPP Brand: North Type: 1/2 Face

Size: Lg Qualitative Test Agent: Tester's Initials:

ASBESTOS TRAINING:

Date: Instructor's Name: Information Covered:

The above information is true to the best of my knowledge.

Signed:

Company Representative Date

Current Training (Copy of Card) Updated Training (Copy of Card)

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, Michael C Vanderlip ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 10-1-90

Mike Vanderlip
SIGNATURE OF EMPLOYEE

068-56-7924
SOCIAL SECURITY NUMBER

Gay Ledgan
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, Michael C Vanderlip HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

10-1-90
DATE

Mike Vanderlip
SIGNATURE OF EMPLOYEE

068-56-7924
SOCIAL SECURITY NUMBER

Gay Lagman
WITNESS

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 10/5/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist of Maricopa Cty

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

Michael C Vanderlip
(PRINT) NAME OF WORKER

Mike Vanderlip
SIGNATURE OF WORKER

069-56-7927
SOCIAL SECURITY NUMBER

Kay Thompson
WITNESS

ARIZONA IDENTIFICATION CARD ONLY
NOT VALID FOR THE OPERATION OF MOTOR VEHICLES

LIC NUMBER X478320

FIRST NAME Michael MIDDLE NAME C. LAST NAME Vanderlip

STREET ADDRESS 209 W Sherron

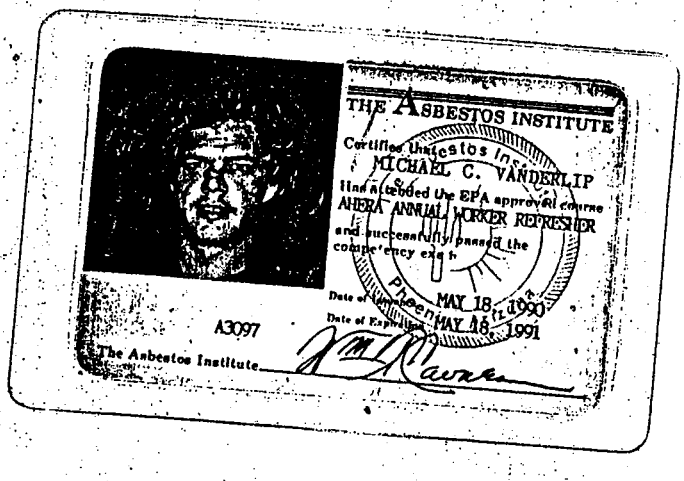
CITY OR POST OFFICE Phx STATE Ariz ZIP 85027

EXPIRES ON YOUR BIRTHDAY NEXT WITHIN 30 DAYS PRIOR 1990

SEX M WEIGHT 160 HEIGHT 6'1" EYES HZ HAIR Brn DATE OF BIRTH 18 12 63 MONTH DAY YEAR

X (SIGNATURE OF APPLICANT)

ASSISTANT DIRECTOR ADOT MOTOR VEHICLE DIVISION



THE ASBESTOS INSTITUTE

Certifies that MICHAEL C. VANDERLIP has attended the EPA approved course AHERA ANNUAL WORKER REFRESHER and successfully passed the competency exam

Date of Completion MAY 18, 1990

Date of Expiration MAY 18, 1991

A3097

The Asbestos Institute

A 2989

THE ASBESTOS INSTITUTE

Certifies that

JANIE L. SAURETTE

Has attended the EPA approved course

AHERA
ANNUAL REFRESHER
CONTRACTOR/SUPERVISOR

and successfully passed the competency exam

Date of Issuance APRIL 27, 1990

Date of Expiration APRIL 27, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

A.H.E.R.A. ACCREDITED

01403
CERTIFICATE NUMBER

National Institute for Asbestos and Hazardous Waste Training

1019 West Manchester Blvd. Inglewood, CA 90301 · (213) 645-4516

This is to certify that

JANIE L. SAURETTE

HAS SUCCESSFULLY COMPLETED THE COURSE AND PASSED THE EXAMINATION FOR CONTRACTOR/SUPERVISOR/COMPETENT PERSON AS PRESCRIBED BY THE ENVIRONMENTAL PROTECTION AGENCY FOR PRACTICES AND PROCEDURES IN ASBESTOS ABATEMENT.

APRIL 21, 1989

APRIL 19, 1990
EXPIRATION DATE

James McFarland
Program Director
National Institute for Asbestos and Hazardous Waste Training

ASNET
ASBESTOS SERVICES NETWORK

BASIC EXAMINATION FOR ASBESTOS WORKERS

DATE: 5-30-90 S.S.#: 527-80-9753 TELEPHONE #: 846-1454

NAME: JANIE SAURETTE DATE OF BIRTH: 8-15-49

ADDRESS: 7208 W. Roma Ave Phx AZ 85033
STREET CITY STATE ZIP

HEIGHT: 5 FT. 5 INCHES WEIGHT: 138 POUNDS

ARE YOU ON ANY MEDICATIONS? NO

KNOWN DRUG ALLERGIES? NO

BROKEN BONES? NO SURGERY? Right Hand

DO YOU WEAR GLASSES? (YES) / NO CONTACTS? YES / NO

YOU HAVE ANY KNOWN PROBLEMS REGARDING HEIGHTS OR CONFINED SPACES? NO
IF YES EXPLAIN:

HAVE YOU EVER HAD PROBLEMS WITH YOUR EARS? NO

DO YOU SMOKE? (YES) / NO HOW MUCH? 1/2 pk day

CARDIO-PULMONARY EXAMINATION

1. BLOOD PRESSURE: SYSTOLIC 98 DIASTOLIC 54 PULSE 70
2. HEART: MURMURS Ø RATE 73 RHYTHM NSR
   ENLARGEMENT Ø
3. LUNGS: Clear
4. PULMONARY FUNCTION: WITHIN NORMAL LIMITS YES
   (copy attached) OUTSIDE NORMAL LIMITS
5. P A CHEST X-RAY: WITHIN NORMAL LIMITS WNL
   OUTSIDE NORMAL LIMITS

IS MY OPINION THAT THE ABOVE NAMED PATIENT (IS) / IS NOT MEDICALLY QUALIFIED TO WEAR A RESPIRATOR IN THE PERFORMANCE OF HIS/HER JOB.

LIMITATIONS if any:

PHYSICIAN'S SIGNATURE: [signature]

ASNET

ASBESTOS SERVICES NETWORK

ENPLOYEE'S SIGNED STATEMENT OF TRAINING

I, JANIE SAURETTE HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

1-20-90
DATE

Janie L Saurette
SIGNATURE OF EMPLOYEE

527-80-9753
SOCIAL SECURITY NUMBER

Edward R. Barron
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, JANIE SAURETTE ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 1-20-90

Janie L Saurette
SIGNATURE OF EMPLOYEE

527-80-9753
SOCIAL SECURITY NUMBER

Edward R. Barron
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: JAMIE SAURETTE S.S.# 527-80-9753
(PRINT)

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: North Size: M

FULL FACE -- Model: Racal Size: M

Testing Conductor: Edward P. Brown Date of Test: 10/5/90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: _____

Test Conductor's Initial: EPB

Employee's Initial: [signature]

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 10/22/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist of Maricopa County

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

JANIE SAURETTE
(PRINT) NAME OF WORKER

Janie L Saurette
SIGNATURE OF WORKER

527-80-9753
SOCIAL SECURITY NUMBER

Edward P Barron
WITNESS

National Institute for Asbestos and Hazardous Waste Training
(A.H.E.R.A. ACCREDITED)

THIS CERTIFIES THAT

JANIE L. SAURETTE

HAS SUCCESSFULLY COMPLETED THE COURSE AND PASSED THE EXAMINATION FOR CONTRACTOR/SUPERVISOR/COMPETENT PERSON AS PRESCRIBED BY THE ENVIRONMENTAL PROTECTION AGENCY FOR PRACTICES AND PROCEDURES IN ASBESTOS ABATEMENT.

DATE 04/19/89

CERTIFICATION NO. 01403

SS# 527-80-9753

VALID FOR 12 MONTHS

JIM McFARLAND

PROGRAM DIRECTOR

ARIZONA DRIVER LICENSE

LIC NO 527809753 CL 2

EXPIRES ON YOUR BIRTHDAY IN 1992

RENEW WITHIN SIX MONTHS PRIOR

JANIE,LOURETTE,SAURETTE
7208 W ROMA AVE
PHOENIX AZ 85033
C094359

SEX	WEIGHT	HEIGHT	EYES	HAIR	ORGAN DONOR
F	135	505	GR	BR	YES

ISSUE DATE	RESTRICTION	MED CODE	BIRTH DATE
071388			081549

X SIGNATURE OF APPLICANT Janie L Saurette

DIRECTOR MVD Rick Pierce

A 3193

THE ASBESTOS INSTITUTE

Certifies that

DAVID CHASE

Has attended the EPA approved course

AHERA

ANNUAL WORKER REFRESHER

and successfully passed the competency exam

Date of Issuance JUNE 8, 1990

Date of Expiration JUNE 8, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

A 1729

THE ASBESTOS INSTITUTE

Certifies that

DAVID CHASE

Has attended the EPA approved course

AHERA ASBESTOS WORKER
ANNUAL REFRESHER CERTIFICATION

and successfully passed the competency exam

Date of Issuance JUNE 8, 1989

Date of Expiration JUNE 8, 1990

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

HEALTHCARE CENTERS FOR BUSINESS AND INDUSTRY

☒ 1149 E. Washington St.
Phoenix, AZ 85034 254-6622
☐ 3302 W. Thomas Rd.
Phoenix, AZ 85017 233-2900

SPIROMETRY REPORT = Passed: Yes ✓ No ____

Height (in)	Age	Sex	Name
71"	28	M	DAVID Chase

	Actual Value	Predicted Value	% of Predicted
FVC	5.14 lt.	5.57	92%
FEV_1	4.17 lt.	4.37	95%
FEF2575	3.89 lt.	4.58	84%
Ratio FEV_1/FVC	0.81 = 81%	75%	

FVC TRIAL#1
ACT. PRED. %PR
FVC:
5.14 5.57 92.
FEV1:
4.17 4.37 95.
%FEV1:
81.0 84.0 96.
FEV2:
5.06 5.28 95.
FEF2575:
3.89 4.58 84.
PEF:
9.17 9.97 91.
PRED REF 2
HEIGHT(IN) 71
AGE: 28
SEX: MALE
DATE:6/6/90

FVC TRIAL#2
ACT. PRED. %PR
FVC:
5.21 5.57 89.
FEV1:
4.35 4.37 99.
%FEV1:
79.7 84.0 93.
FEV2:
4.91 5.28 92.
FEF2575:
3.37 4.58 74.
PEF:
8.08 9.97 81.
PRED REF 2

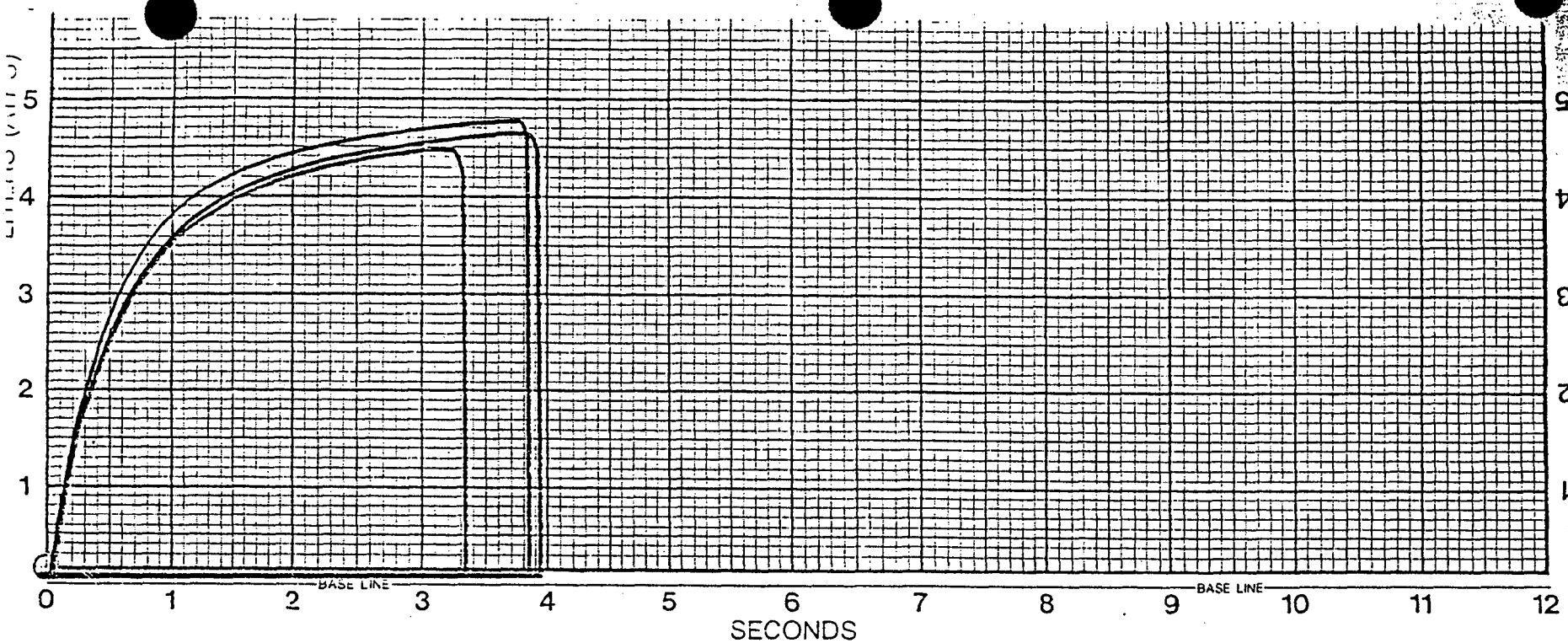
VARIABILITY:
FVC: 2.48%
FEV1: 5.22%

FVC TRIAL#3
ACT. PRED. %PR
FVC:
4.85 5.57 87.
FEV1:
3.88 4.37 88.
%FEV1:
79.9 84.0 95.
FEV2:
4.83 5.28 91.
FEF2575:
3.37 4.58 73.
PEF:
9.27 9.97 92.
PRED REF 2

VARIABILITY:
FVC: 2.48%
FEV1: 5.22%

APPROVED FOR
WEARING RESPIRATOR
R.E. Silva, MD
R.E. SILVA, M.D.
06-06-90

BCP



PARAMETER	PRE BRONCHODILATOR				POST BRONCHODILATOR			
	PREDICTED	ATPS OBSERVED	BTPS OBSERVED	% OF PREDICTED	ATPS OBSERVED	BTPS OBSERVED	% OF PREDICTED	% CHANGE
FVC (Liters)								
FEV_1 (Liters)								
FEV_1/FVC								

NAME

PATIENT NAME: David Chase

IDENTIFICATION NUMBER: 14877 TESTED BY: Valerie PHYSICIAN: Silva

AGE: 28 SEX: M WEIGHT: ____ HEIGHT: 71" RACE: ____

SUBJECT'S EFFORT: ____ GOOD ____ FAIR ____ POOR ____

DATE: 6-6-90 TIME: ____ TEMP.: ____ PRESSURE: ____

NAME DAVID CHASE

I. D. NO. 585-76-6129

DATE 6-6-90

OCCUPATION LABOR - ABATEMENT

YEARS 2 YRS 8 MOS.

RESPIRATORY HISTORY: Check if yes and list details in comment section below.

PERSONAL

- ☐ Injury or operation to chest
- ☐ Heart trouble
- ☐ Bronchitis
- ☐ Pneumonia
- ☐ Pleurisy
- ☐ Tuberculosis
- ☐ Asthma
- ☐ Eczema
- ☐ Dermatitis
- ☐ Pneumoconiosis
- ☐ Byssinosis
- ☐ Other
- ☐ Exertional shortness of breath
- ☐ Productive cough

OCCUPATIONAL

- ☐ Coal mine
- ☐ Other mine
- ☐ Quarry
- ☐ Foundry
- ☐ Pottery
- ☐ Cotton, flax, hemp mill
- ☒ Asbestos
- ☐ Other dusty job
- ☐ Gases or fumes
- ☐ Farming

HOBBIES

- ☒ Woodworking/Carpentry
- ☐ Furniture refinishing
- ☐ Painting
- ☐ Welding
- ☐ Automobile repair
- ☐ Animal/~~Bird~~ breeding
- ☒ Hair dressing
- ☐ Weaving
- ☐ Upholstering
- ☐ Volunteer Fireman

SMOKING

- ☐ Cigars
- ☐ Cigarettes

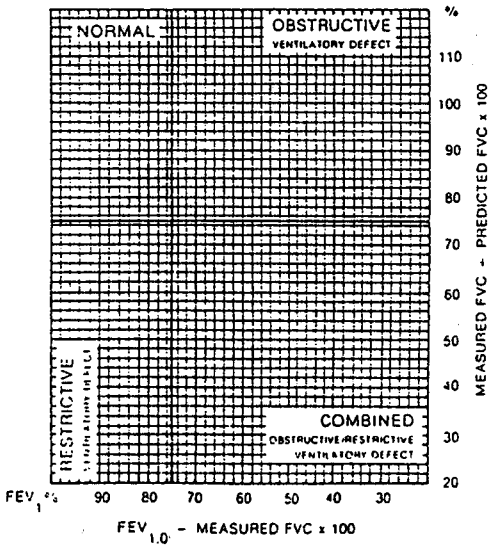
How long ago did you quit smoking? _____ yrs

How many years have you smoked? _____ yrs

How much per day? _____ pks

COMMENTS

PREDICTION QUADRANT



ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, DAVID CHASE HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

Sept 19, 90
DATE

David Chase
SIGNATURE OF EMPLOYEE

585-76-6129
SOCIAL SECURITY NUMBER

Gay Lenagan
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, DAVID CHASE ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: Sept 19, 90

585-76-6129
SOCIAL SECURITY NUMBER

SIGNATURE OF EMPLOYEE

WITNESS

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/21/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Maricopa City

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

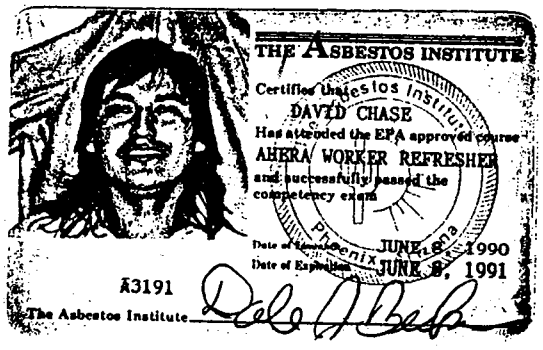
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

DAVID CHASE
(PRINT) NAME OF WORKER

David Chase
SIGNATURE OF WORKER

585-76-6129
SOCIAL SECURITY NUMBER

Gay Lessman
WITNESS



THE ASBESTOS INSTITUTE

Certifies that

DAVID CHASE

Has attended the EPA approved course

AHERA WORKER REFRESHER

and successfully passed the competency exam

Date of Issuance JUNE 18, 1990

Date of Expiration JUNE 8, 1991

A3191

The Asbestos Institute

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: DAVID CHASE S.S.# 585-76-6129
(PRINT)

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: NORTH Size: LG

FULL FACE -- Model: RACAL Size: LG

Testing Conductor: PERRY GIRARDIN Date of Test: 9/24/90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: _____

Test Conductor's Initial: P.G.

Employee's Initial: D.G.

A 2573

THE ASBESTOS INSTITUTE

Certifies that

DAVID WEDDLE

Has attended the EPA approved course

AHERA
ANNUAL REFRESHER CERTIFICATION
ASBESTOS ABATEMENT WORKER

and successfully passed the competency exam

Date of Issuance DECEMBER 28, 1989

Date of Expiration DECEMBER 28, 1990

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

FORM 8111 - CONTINUATION

NAME Weddle, David BCP

ADDRESS 2432 W. Peoria Avenue Suite 1205 Phoenix, Az. DATE 4/18/90

RE- Evaluation

Prior Physical - (see attached copy)

Changes and/or additions - Denied

Respiratory History Review -

Previous exposure to asbestos or other contaminants - 8yrs. asbestos

Previous history of respiratory problems - Denied

Smoking history- 1pk a day

Length of time - 10yrs.

Physical Examination - WT. 165 BP. 118/72 T. 98.6

Heent ok. Hum 3 ⊕ lungs CTA
Abd soft ⊖ HS ⊖ tender ⊖ HSM/masses
tests ok 3' inguinal ⊖ hernia
Ext FROM 5 cce bilateral ok
cp 7/12 ok No incred a sym bulge.
PPTs ok
A: General health satisfactory
P: No work restriction
. CXR
Rx - & get a screen
~~Encourage~~ Encourage ↓ smoking.

MEDICAL EXAMINATION DOCUMENTATION

Employee Name: DAVID WEDDLE
Employee Address: 2929 W. PUGET
Employee Telephone No.: 995-8540
Union Card Number: N/A Classification of Worker: LABORER
Have you had in the past, or present, any respiratory problems? Yes (No)
Have you worked in the past with asbestos or fiberglass type materials? (Yes) No
The project you will be working on involves the use of asbestos and the removal of the asbestos from the building. Asbestos is considered a health hazard.

The company is supplying all necessary safety clothing and working conditions required and necessary for your protection from asbestos hazard.

You shall be instructed at commencement of the job on the required use of safety equipment, clothing, working conditions, and procedures. These must be rigidly adhered to. Smoking, eating, chewing gum are not permitted in the work areas. Disregarding of safety instructions shall result in instant dismissal.

You are aware of your legal right to select a powered air purifying respirator in lieu of any negative pressure respirator at the company's expense (OSHA 29 CFR 1926 58).

I am aware that smoking increases the risk of contracting lung cancer and/or Asbestosis, 90 times. I acknowledge that I have been advised by my employee and Physician at the annual medical exam to stop.

I acknowledge that safety instructions have been given to me by the company at my work commencement and I am thoroughly conversant with them and have answered the above questions truthfully.

Signed: David Weddle 12/20/89
Employee Date

MEDICAL EXAMINATION:
Date: 4-19-89 Physician's Name: DR. DARBY Address: 1840 W. MARYLAND PHOENIX AZ
Physician's OK to work while wearing respirator:

RESPIRATOR TRAINING:
Date: 4-19-89 Instructor's Name: W.E. SUMPP Brand: NORTH Type: 1/2 FACE
Size: LARGE Qualitative Test Agent: IRT SMOKE Tester's Initials: WGI

ASBESTOS TRAINING:
Date: 12-28-89 Instructor's Name: R. CLOSE Information Covered: NAC
ASBESTOS ENST AHERA WORKER
ANNUAL REFRESHER
The above information is true to the best of my knowledge.

Signed: William E. Sumpp PERSONNEL DIRECTOR 4-19-89
Company Representative Date

Current Training
Updated Training
(Copy of Card)

A 3573

THE ASBESTOS INSTITUTE

Certifies that

DAVID WEDDLE

Has attended the EPA approved course
AHERA
ANNUAL REFRESHER CERTIFICATION
ASBESTOS ABATEMENT WORKER

and successfully passed the competency exam

Date of Issuance DECEMBER 28, 1989
Date of Expiration DECEMBER 28, 1990

Director
The Asbestos Institute

NATIONAL ASBESTOS COUNCIL TRAINING DEPARTMENT
This certifies that

DAVID WEDDLE

Card No. 387-78-8677

Has attended and satisfactorily completed all requirements of

RECERTIFICATION OF 24HRS.

Presented by card of the NAC Asbestos Abatement Worker Training Program

1/24/89 R. CLOSE
Expiration Date Field Instructor

1/24/89 Thomas G. [illegible]
Expiration Date Training Director

COMMUNITY HOSPITAL MEDICAL CENTER
0501 N. 19TH AVE. PHOENIX, ARIZONA 85015

DEPARTMENT OF
MEDICAL IMAGING

NAME VEDDER, DAVID
X-RAY 21 1, 11 DATE 4/16/90 AGE 20
HOSPITAL NO. 734076 U ROOM NO. OP SEX M
ATTENDING PHYSICIAN R. WHITAKER

BCT Physical

DO NOT WRITE IN THIS SPACE

NEW

Treatment or Examination

DATE

4/16/90 chest with oblique

The chest was examined in the frontal and oblique projections. The heart, lungs and osseous thorax are normal. There is no evidence of pleural plaquing or calcifications.

IMPRESSION:

1. Normal chest.

JF:ja
4-19-90

X RADIOLOGIST

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, David Weddle HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

9-19-90
DATE

David Weddle
SIGNATURE OF EMPLOYEE

387-78-8677
SOCIAL SECURITY NUMBER

Gay Lodgman
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, David weddle ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 9-19-90

David weddle
SIGNATURE OF EMPLOYEE

387-78-8677
SOCIAL SECURITY NUMBER

Gay Teagan
WITNESS

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/21/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Maricopa City.

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

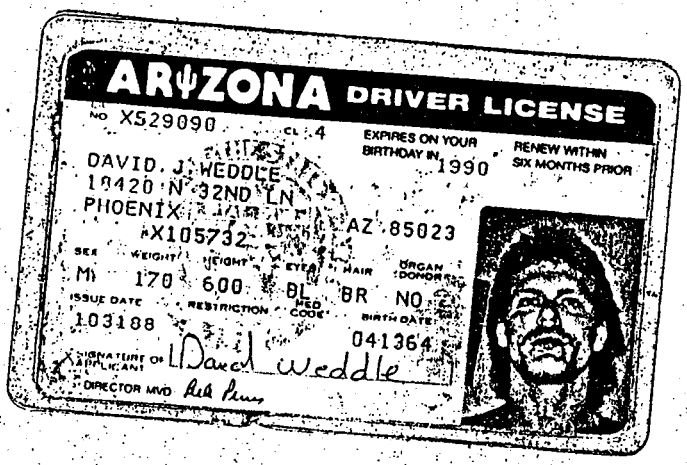
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

David Weddle
(PRINT) NAME OF WORKER

David Weddle
SIGNATURE OF WORKER

387-78-8677
SOCIAL SECURITY NUMBER

Guy Lozano
WITNESS



ARIZONA DRIVER LICENSE

NO X529090 CL 4

EXPIRES ON YOUR BIRTHDAY IN 1990

RENEW WITHIN SIX MONTHS PRIOR

DAVID J WEDDLE
10420 N 32ND LN
PHOENIX AZ 85023

#X105732

SEX	WEIGHT	HEIGHT	EYES	HAIR	ORGAN DONOR
M	170	6.00	BL	BR	NO

ISSUE DATE 103188

RESTRICTION

MED CODE

BIRTH DATE 041364

X SIGNATURE OF APPLICANT David Weddle

DIRECTOR MVD

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: David weddle S.S.# 387-28-8677
(PRINT)

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: NORTH Size: Lg

FULL FACE -- Model: RACAL Size: Lg

Testing Conductor: PERRY GINARDIN Date of Test: 9/24/90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:

1. Breathe normally for one minute.
2. Breathe deeply.
3. Turn head from side to side.
4. Nod head up and down.
5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

6. Jog in place.
7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: _____

Test Conductor's Initial: PG

Employee's Initial: DW

A 3276

THE ASBESTOS INSTITUTE

Certifies that

SCOTT ADDISON

Has attended the EPA approved course

AHERA
WORKER

and successfully passed the competency exam

Date of Issuance JUNE 20, 1990

Date of Expiration JUNE 20, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

ASNET
ASBESTOS SERVICES NETWORK

BASIC EXAMINATION FOR ASBESTOS WORKERS

DATE: 6-21-90 S.S.#: 601-20-5283 TELEPHONE #: 942-4305

NAME: Scott ADDison DATE OF BIRTH: 9-24-71

ADDRESS: 320 E BroadMoor ct Phx Az 85022
STREET CITY STATE ZIP

HEIGHT: 5 FT. 11 INCHES WEIGHT: 220 POUNDS

ARE YOU ON ANY MEDICATIONS? NO

KNOWN DRUG ALLERGIES? NO

BROKEN BONES? CLAVICLE - age 6 SURGERY? NO

DO YOU WEAR GLASSES? YES / (NO) @ 20/20 CONTACTS? YES / (NO) @ 20/20

DO YOU HAVE ANY KNOWN PROBLEMS REGARDING HEIGHTS OR CONFINED SPACES? NO
IF YES EXPLAIN:

HAVE YOU EVER HAD PROBLEMS WITH YOUR EARS? NO

DO YOU SMOKE? YES / (NO) HOW MUCH?

CARDIO-PULMONARY EXAMINATION

1. BLOOD PRESSURE: SYSTOLIC 100 DIASTOLIC 60 PULSE 68
2. HEART: MURMURS Ø RATE 60 RHYTHM Normal
   ENLARGEMENT Ø
3. LUNGS: Clear
4. PULMONARY FUNCTION: WITHIN NORMAL LIMITS WNL
   (copy attached) OUTSIDE NORMAL LIMITS
5. P A CHEST X-RAY: WITHIN NORMAL LIMITS WNL
   OUTSIDE NORMAL LIMITS

IT IS MY OPINION THAT THE ABOVE NAMED PATIENT (IS) / IS NOT MEDICALLY QUALIFIED TO WEAR A RESPIRATOR IN THE PERFORMANCE OF HIS/HER JOB.

LIMITATIONS if any: None

PHYSICIAN'S SIGNATURE: [signature]

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, Scott ADDison HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

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HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

6-14-90
DATE

Scott Addison
SIGNATURE OF EMPLOYEE

601-20-5283
SOCIAL SECURITY NUMBER

Gary Lodgson
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, Scott Addison ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 6-14-90

Scott Addison
SIGNATURE OF EMPLOYEE

601-20-5283
SOCIAL SECURITY NUMBER

Shay Lodgman
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: Scott ADDison S.S.#601-20-5283
(PRINT)

RESPIRATOR MANUFACTURER: Racal

1/2 MASK --- Model: _____ Size: _____

FULL FACE X Model: Racal Size: M

Testing Conductor: Tim Date of Test: 6-29-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: X

FAILED: _____ REMARKS: _____

Test Conductor's Initial: TM

Employee's Initial: SA

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist of Maricopa Cty.

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

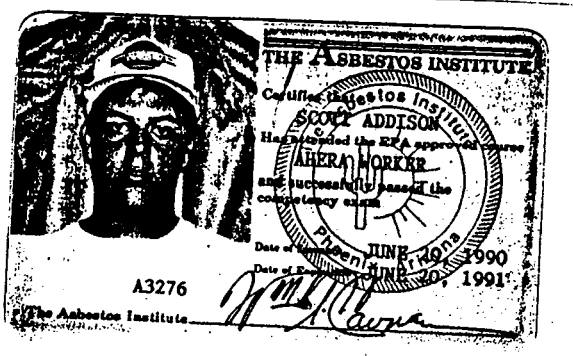
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

Scott ADDison
(PRINT) NAME OF WORKER

Scott Addison
SIGNATURE OF WORKER

601-20-5283
SOCIAL SECURITY NUMBER

Shay Lagman
WITNESS


THE ASBESTOS INSTITUTE
Certified Asbestos Institute
SCOTT ADDISON
Has attended the EPA approved course
AHERA WORKER
and successfully passed the competency exam
Phoenix, Arizona
Date of
JUNE 20, 1990
Date of Expiration
JUNE 20, 1991
A3276
The Asbestos Institute

A 2982

THE ASBESTOS INSTITUTE

Certifies that

EDWARD P. BARRON

Has attended the EPA approved course

AHERA
ANNUAL REFRESHER
CONTRACTOR/SUPERVISOR

and successfully passed the competency exam

Date of Issuance APRIL 27, 1990

Date of Expiration APRIL 27, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

A 1446

THE ASBESTOS INSTITUTE

Certifies that

EDWARD P. BARRON

Has attended the EPA approved course

AHERA CONTRACTOR/SUPERVISOR
ANNUAL REFRESHER CERTIFICATION

and successfully passed the competency exam

Date of Issuance APRIL 21, 1989

Date of Expiration APRIL 21, 1990

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

A.H.E.R.A. ACCREDITED

01100
CERTIFICATE NUMBER

National Institute for Asbestos and Hazardous Waste Training

This is to certify that

EDWARD PATRICK BARRON

HAS SUCCESSFULLY COMPLETED THE COURSE AND PASSED THE EXAMINATION FOR CONTRACTOR/SUPERVISOR AS PRESCRIBED BY THE ENVIRONMENTAL PROTECTION AGENCY FOR PRACTICES AND PROCEDURES IN ASBESTOS ABATEMENT.

SEPTEMBER 22, 1988

MAY 28, 1989
EXPIRATION DATE

James McFarland
[illegible] Director
Nati[illegible] Asbestos
and H[illegible] Training

THIS CERTIFIES THAT

EDWARD P. BARRON

CERTIFICATE # 562

SUCCESSFULLY COMPLETED

ASBESTOS WORKER TRAINING
THREE DAY COURSE

ON

MAY 28, 1988

THIS CERTIFICATE EXPIRES MAY 28, 1989

DAN NAPIER & ASSOCIATES

DAVID NULL, PhD, CIH
DAN NAPIER, MS, CIH, CSP

ASNET
ASBESTOS SERVICES NETWORK

BASIC EXAMINATION FOR ASBESTOS WORKERS

DATE: 8/24/90 S.S.#: 300-66-2820 TELEPHONE #: 861-3184

NAME: EDWARD P. BARRON DATE OF BIRTH: 6/28/60

ADDRESS: 7208 W Roma Phoenix AZ 85033
STREET CITY STATE ZIP

HEIGHT: 6 FT. 0 INCHES WEIGHT: 180 POUNDS

ARE YOU ON ANY MEDICATIONS? NO

KNOWN DRUG ALLERGIES? ?

BROKEN BONES? NO SURGERY? NO

DO YOU WEAR GLASSES? YES / NO CONTACTS? YES / NO

DO YOU HAVE ANY KNOWN PROBLEMS REGARDING HEIGHTS OR CONFINED SPACES? NO
IF YES EXPLAIN:

HAVE YOU EVER HAD PROBLEMS WITH YOUR EARS? NO

DO YOU SMOKE? YES / NO HOW MUCH? 1 PACK DAY

CARDIO-PULMONARY EXAMINATION

1. BLOOD PRESSURE: SYSTOLIC 110 DIASTOLIC 76 PULSE 60 REG.
2. HEART: MURMURS Ø RATE 60 RHYTHM Regular
   ENLARGEMENT Ø
3. LUNGS: Clear
4. PULMONARY FUNCTION: WITHIN NORMAL LIMITS W/NL
   (copy attached) OUTSIDE NORMAL LIMITS
5. P A CHEST X-RAY: WITHIN NORMAL LIMITS WNL
   OUTSIDE NORMAL LIMITS

IT IS MY OPINION THAT THE ABOVE NAMED PATIENT IS / IS NOT MEDICALLY QUALIFIED TO WEAR A RESPIRATOR IN THE PERFORMANCE OF HIS/HER JOB.

LIMITATIONS if any:

PHYSICIAN'S SIGNATURE: [signature]

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, EDWARD P. BARRON HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

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HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

10-10-89
DATE

Edward P Barron
SIGNATURE OF EMPLOYEE

300-66-2820
SOCIAL SECURITY NUMBER

Janis Lamotte
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, EDWARD . P BARRON ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 10-10-89

Edward P Barron
SIGNATURE OF EMPLOYEE

300-66-2820
SOCIAL SECURITY NUMBER

WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: Edward P. Barron S.S.# 300-66-2820
(PRINT)

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: North Size: M

FULL FACE -- Model: RACAL Size: M

Testing Conductor: John Ginn Date of Test: 9-19-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:

1. Breathe normally for one minute.
2. Breathe deeply.
3. Turn head from side to side.
4. Nod head up and down.
5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

6. Jog in place.
7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: X

FAILED: _____ REMARKS: _____

Test Conductor's Initial: JG

Employee's Initial: E.P.B

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist of Maricopa Cty

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

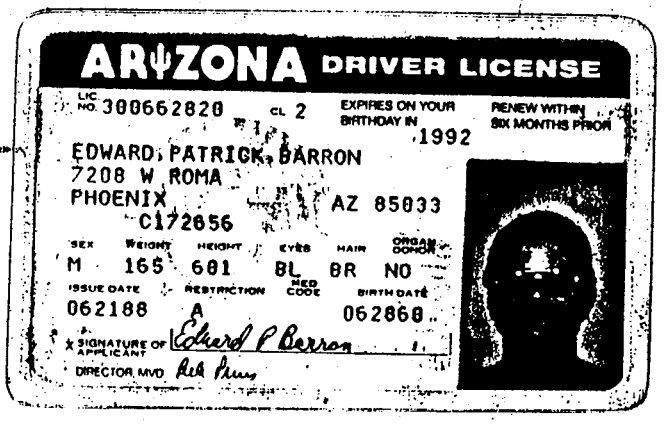
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

Edward P. Barron
(PRINT) NAME OF WORKER

Edward P Barron
SIGNATURE OF WORKER

300-66-2820
SOCIAL SECURITY NUMBER

WITNESS



ARIZONA DRIVER LICENSE

LIC NO. 300662820 CL 2 EXPIRES ON YOUR BIRTHDAY IN 1992 RENEW WITHIN SIX MONTHS PRIOR

EDWARD PATRICK BARRON
7208 W ROMA
PHOENIX AZ 85033
C172656

SEX	WEIGHT	HEIGHT	EYES	HAIR	ORGAN DONOR
M	165	601	BL	BR	NO

ISSUE DATE	RESTRICTION	MED CODE	BIRTH DATE
062188	A		062860

X SIGNATURE OF APPLICANT Edward P Barron

DIRECTOR MVD Rick Pierce

Mayhew Environmental Training Associates

Certificate Number
7ME052390004W
Social Security #527-50-9316

Accreditation Expires
05/23/91

This is to Certify that

Dan Ginn

has successfully completed

AHERA Asbestos Worker Training

May 21 - 23, 1990

and passed the associated examination

May 23, 1990 in Phoenix, Arizona.

Conducted by:

M E T A
Mayhew Environmental Training Associates
INCORPORATED

P.O. Box 786 Lawrence, Kansas 66044
1-800-444-6382

For further information contact: Betty Fenstemaker, Registrar

President

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, Dan Lewis HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

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PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

5-23-90
DATE

Dan A Lewis
SIGNATURE OF EMPLOYEE

527-50-9316
SOCIAL SECURITY NUMBER

Kay Ferguson
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, Dan Lemin ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 5-23-90

Dan A. Lemin
SIGNATURE OF EMPLOYEE

527-50-9316
SOCIAL SECURITY NUMBER

Gay Lodgman
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: DAN GINN S.S.#____-___-_____
(PRINT)

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: NORTH Size: _____

NIOSH APPROVAL #

FULL FACE -- Model: RAYCAL TC-21C-353 Size: M

Testing Conductor: Omar Gonzalez Date of Test: 5-22-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

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   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: PAPR

Test Conductor's Initial: OG MSA

Employee's Initial: [signature]

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Niagara City

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

DAN GINN
(PRINT) NAME OF WORKER

Dan A Ginn
SIGNATURE OF WORKER

527-50-9316
SOCIAL SECURITY NUMBER

Jay Teagan
WITNESS

ARIZONA IDENTIFICATION CARD
NOT VALID FOR OPERATION OF MOTOR VEHICLES

LIC NO. 527509316 CL I ENDORSEMENTS
EXPIRES 110693
DAN. ALLEN. GINN
6927 W OLIVE
PEORIA AZ 85345

SEX M | WEIGHT 190 | HEIGHT 602 | EYES BR | HAIR BR | ORGAN DONOR NO

ISSUE DATE 012990 | RESTRICTION | MED CODE | BIRTH DATE 110640

X SIGNATURE OF APPLICANT | STA NO. 2094224

A 2752

THE ASBESTOS INSTITUTE

Certifies that

JOHN R. GINN

Has attended the EPA approved course

AHERA
ANNUAL REFRESHER
CONTRACTOR SUPERVISOR

and successfully passed the competency exam

Date of Issuance FEBRUARY 23, 1990

Date of Expiration FEBRUARY 23, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

A 1250

THE ASBESTOS INSTITUTE

Certifies that

JOHN R. GINN

Has attended the EPA approved course

PRACTICES & PROCEDURES IN ASBESTOS ABATEMENT CONTRACTOR/SUPERVISOR

and successfully passed the competency exam

Date of Issuance JANUARY 26, 1989

Date of Expiration JANUARY 26, 1990

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

PHYSICAL EXAMINATION

☐ PRE-EMPLOYMENT ☐ ANNUAL ☐ OTHER:

LAST	FIRST	MIDDLE	RACE	SEX	BIRTHDATE	MARITAL STATUS
GINN	JOHN	R.	W	M	10-8-42	M

ADDRESS: STREET	CITY	STATE	ZIP CODE	TELEPHONE
6927 WEST OLIVE	PEORIA,	ARIZONA	85345	937-5105

DEPARTMENT AND POSITION:	DATE EMPLOYED	EMERGENCY PHONE

MEDICAL HISTORY

HAVE YOU EVER SUFFERED FROM:	NO	YES	IF YES, EXPLAIN
Epilepsy, convulsions, mental or nervous breakdown or other nervous disorder?	✓		
Any disease of the heart, high blood pressure, dropsy, dyspnea?	✓		
Rheumatic Fever?	✓		
Disease of the lungs: Tuberculosis or contact?	✓		
Pleurisy, pneumonia, bronchitis, emphysema, silicosis?	✓		
Asthma, hay fever, other allergies or allergic diseases or conditions?	✓		
Diseases of the stomach, intestines, gallbladder, liver or other abdominal organs?	✓		
Diseases of the bladder, kidney, pyelitis, cystitis?	✓		
Disease or injury to eyes, ears, mastoid, sinuses, tonsils?	✓		
Rheumatism, arthritis, neuritis or any disease of the bones, joints or muscles?	✓		
Diabetes, Myxedema or other metabolic diseases or conditions?	✓		
Have you ever suffered any major injury or accident?	✓		
Have you ever had any major surgery?	✓		
Do you have a hernia?	✓		
Any other disease or condition or handicap resulting in temporary or permanent disability?		✓	Injury Thumb & Shortening Distal Tip. – Fact. Accident.
Are you taking any medication?	✓		
Frequent headaches, dizziness?	✓		
Frequent backaches or back injuries?	✓		
Do you drink alcohol? Approximate daily consumption?	✓		
Have you ever been absent from work due to excessive alcohol consumption?	✓		
Do you use drugs of any type?	✓		

WOMEN ONLY:	Are your periods regular?	Do they cause disability?	Date of last menstruation?
	Are you now pregnant?	Date of last pregnancy?	

I certify that the above answers are true and complete I am aware that any material and deliberate falsification of the facts on the above is grounds for discharge. I further agree to submit to a medical physical examination.

12/6/89
DATE

SIGNATURE OF APPLICANT

TOTAL P

Att: Ossnet | Dr. Gerin

PHYSICAL EXAMINATION

TEMPERATURE	PULSE	HEIGHT	WEIGHT	COLOR BLIND
98.6	78/min	6' 0"	190	No

	B/P	PULSE
AT REST	120/80	75
AFTER EXERCISE	126/78	80
2 MIN. AFTER EXERCISE	138/80	96

VISION: Glasses

Distance	C	U
Right — 20/20	☐	☐
Left — 20/20	☐	☐

VISION: Glasses

Near	C	U
Right — 20/40	☐	☐
Left — 20/20	☐	☐

HEARING: Right Normal Left Normal

LUNG ANALYSIS Clear

CHEST X-RAY: Date and Results 12/6/89 Normal Chest

EKG 12/6/89 Normal EKG

CBC Normal

STRESS EKG Not Done

SMAC 24 Normal

URIN: A ☐ S ☐

OTHER LAB. EXAM: Complete Blood Chem. Urine + CBC - Normal

	NORMAL	ABNORMAL
General Appearance	✓	
Skin	✓	
Head, neck, thyroid	✓	
Ears and eyes	✓	
Condition of teeth and gums	✓	
Throat, tonsils and sinuses	✓	
Lymphatic System	✓	
Heart	✓	
Thorax and lungs	✓	
Abdomen (Hernia)	✓	
Genitalia	✓	
Hernia	✓	
Skeleton and extremities	✓	
Nervous System—reflexes	✓	
Mental Reaction	✓	
Disability or Handicaps	✓	
Other Physical Findings	✓	

Pulmonary Function

	Normal	A. Findings
FVC	4.8	4.76
FEV1	3.6	3.20
FEV1/FVC%		67.9
Peak Flow	560	608
FEF (25-75%)	220	110
Vol (after %)	<10%	0.7

Mon. abnormal left thumb — normal feet
Dislocated toe

CLASSIFICATION:
☑ No Work Limitations
☐ Not Medically Recommended for Employment

☐ Is medically recommended
☐ Has degree of medical risk of: None

1 ☐ 2 ☐ 3 ☐ 4 ☐

Factors in risk 1 to 4 are:

PROCTOSCOPY:
Negative to 25 cm

Wm. H. Gerin M.D.

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, John R. Gin HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

10-12-89
DATE

John R. Gin
SIGNATURE OF EMPLOYEE

526-58-7416
SOCIAL SECURITY NUMBER

Janie Lavinette
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, John R. Ginn ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 11-12-88

526-58-7416
SOCIAL SECURITY NUMBER

John R. Ginn
SIGNATURE OF EMPLOYEE

Janie Lavoette
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: John Ginn (PRINT) S.S.# 526-58-7416

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: North Size: M

FULL FACE -- Model: RACAL PAPR Size: M

Testing Conductor: Ed Barron Date of Test: 9-19-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:

1. Breathe normally for one minute.
2. Breathe deeply.
3. Turn head from side to side.
4. Nod head up and down.
5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

6. Jog in place.
7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: X

FAILED: _____ REMARKS: _____

Test Conductor's Initial: EB

Employee's Initial: JG

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist of Maricopa Cty.

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

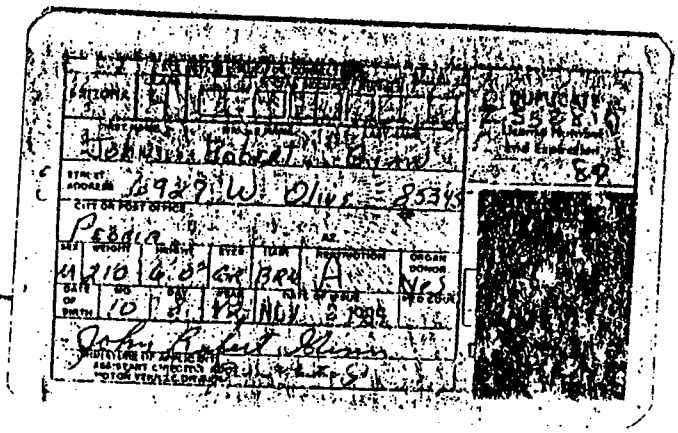
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

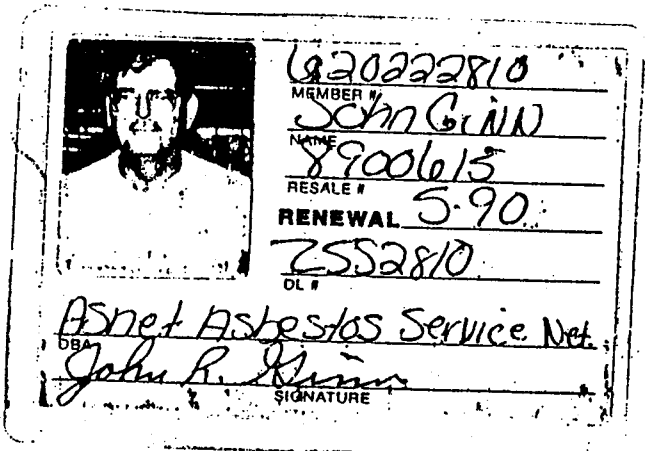
John R. Ginn
(PRINT) NAME OF WORKER

John R. Ginn
SIGNATURE OF WORKER

526-58-7416
SOCIAL SECURITY NUMBER

Janet Lavalle
WITNESS




G20222810
MEMBER #
John Grin
NAME
8900615
RESALE #
RENEWAL 5-90
ZSS2810
DL #
Asnet Asbestos Service Net
DBA
SIGNATURE

A 2986

THE ASBESTOS INSTITUTE

Certifies that

PERRY GIRARDIN

Has attended the EPA approved course

AHERA
ANNUAL REFRESHER
CONTRACTOR/SUPERVISOR

and successfully passed the competency exam

Date of Issuance APRIL 27, 1990

Date of Expiration APRIL 27, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

A 1553

THE ASBESTOS INSTITUTE

Certifies that

PERRY PETER GIRARDIN

Has attended the EPA approved course

AHERA
CONTRACTOR/SUPERVISOR ANNUAL REFRESHER COURSE

and successfully passed the competency exam

Date of Issuance MAY 26, 1989

Date of Expiration MAY 26, 1990

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

THIS CERTIFIES THAT

PERRY GIRARDIN

CERTIFICATE # 561

SUCCESSFULLY COMPLETED

ASBESTOS WORKER TRAINING
THREE DAY COURSE

ON

MAY 28, 1988

THIS CERTIFICATE EXPIRES MAY 28, 1989

DAN NAPIER & ASSOCIATES

DAVID NULL, PhD, CIH
DAN NAPIER, MS, CIH, CSP

© GOES 462-1/2

LITHO IN U.S.A.

A.H.E.R.A. ACCREDITED

01129
CERTIFICATE NUMBER

National Institute for Asbestos and Hazardous Waste Training

1019 West Manchester Blvd. Inglewood, CA 90301 (213) 645-4516

This is to certify that

PERRY PETER GIRARDIN

HAS SUCCESSFULLY COMPLETED THE COURSE AND PASSED THE EXAMINATION FOR CONTRACTOR/SUPERVISOR/COMPETENT PERSON AS PRESCRIBED BY THE ENVIRONMENTAL PROTECTION AGENCY FOR PRACTICES AND PROCEDURES IN ASBESTOS ABATEMENT.

NOVEMBER 28 - DECEMBER 1, 1988

NOVEMBER 30, 1989
EXPIRATION DATE

James McFarland
Program Director
National Institute for Asbestos
and Hazardous Waste Training

ASNET
ASBESTOS SERVICES NETWORK

BASIC EXAMINATION FOR ASBESTOS WORKERS

DATE: 5/30/90 S.S.#: 006-68-0362 TELEPHONE #: 930-9715

NAME: PERRY P. GIRARDIN DATE OF BIRTH: 2-2-69

ADDRESS: 6702 N. 67 AVE GLENDALE AZ
STREET CITY STATE ZIP

HEIGHT: 5 FT. 10 INCHES WEIGHT: 175 POUNDS

ARE YOU ON ANY MEDICATIONS? NO

KNOWN DRUG ALLERGIES? NO

BROKEN BONES? NO SURGERY?

DO YOU WEAR GLASSES? YES / (NO) CONTACTS? YES / NO

DO YOU HAVE ANY KNOWN PROBLEMS REGARDING HEIGHTS OR CONFINED SPACES? NO
IF YES EXPLAIN:

HAVE YOU EVER HAD PROBLEMS WITH YOUR EARS? NO

DO YOU SMOKE? (YES) / NO HOW MUCH?

CARDIO-PULMONARY EXAMINATION

1. BLOOD PRESSURE: SYSTOLIC DIASTOLIC PULSE

2. HEART: MURMURS Ø RATE RHYTHM

ENLARGEMENT Ø

3. LUNGS: Clear

4. PULMONARY FUNCTION: WITHIN NORMAL LIMITS WNL

(copy attached) OUTSIDE NORMAL LIMITS

5. P A CHEST X-RAY: WITHIN NORMAL LIMITS WNL

OUTSIDE NORMAL LIMITS

IT IS MY OPINION THAT THE ABOVE NAMED PATIENT (IS) / IS NOT MEDICALLY QUALIFIED TO WEAR A RESPIRATOR IN THE PERFORMANCE OF HIS/HER JOB.

LIMITATIONS if any:

PHYSICIAN'S SIGNATURE: [signature]

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, PERRY P. GIRARDIN HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

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PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

3/16/90
DATE

Perry P. Girardin
SIGNATURE OF EMPLOYEE

006-68-0362
SOCIAL SECURITY NUMBER

Janice Lavette
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, PERRY P. Durardi ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 3/16/90

Perry P. Durardi
SIGNATURE OF EMPLOYEE

006-68-0362
SOCIAL SECURITY NUMBER

Janice Lavette
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: Perry Girardin (PRINT) S.S.# 006-68-0362

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: North Size: M

FULL FACE -- Model: RACAL Size: M

Testing Conductor: Ed Barron Date of Test: 9-19-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:

1. Breathe normally for one minute.
2. Breathe deeply.
3. Turn head from side to side.
4. Nod head up and down.
5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

6. Jog in place.
7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: X

FAILED: _____ REMARKS: _____

Test Conductor's Initial: EB

Employee's Initial: PG

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Maricopa City

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

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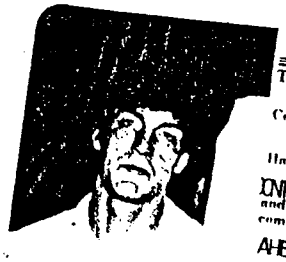
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

PERRY GIRARDIN
(PRINT) NAME OF WORKER

Perry P. Girardi
SIGNATURE OF WORKER

006-68-0362
SOCIAL SECURITY NUMBER

WITNESS



THE ASBESTOS INSTITUTE

Certifies that

PERRY GIRARDIN

Has attended the EPA approved course

CONTRACTOR/SUPERVISOR REFRESHER

and successfully passed the competency exam

AHERA

Date of Issuance APRIL 27, 1990

Date of Expiration APRIL 27, 1991

A2986

The Asbestos Institute

ARIZONA DRIVER LICENSE

LIC NO Z798485 CL 2 EXPIRES ON YOUR BIRTHDAY IN 1991 RENEW WITHIN SIX MONTHS PRIOR

PERRY,P,GIRARDIN
8502 N 67 AVE
GLENDALE AZ 85302
Z143544

SEX	WEIGHT	HEIGHT	EYES	HAIR	ORGAN DONOR
M	175	509	BR	BR	YES

ISSUE DATE	RESTRICTION	MED CODE	BIRTH DATE
080888			020269

X SIGNATURE OF APPLICANT OR DIRECTOR MVD

A 2762

THE ASBESTOS INSTITUTE

Certifies that

THOMAS GREER

Has attended the EPA approved course

AHERA
ANNUAL REFRESHER
WORKER

and successfully passed the competency exam

Date of Issuance FEBRUARY 24, 1990

Date of Expiration FEBRUARY 24, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

END

A 1990

THE ASBESTOS INSTITUTE

Certifies that

THOM J. GREER

Has attended the EPA approved course

PRACTICES & PROCEDURES FOR AHERA ASBESTOS ABATEMENT WORKERS

and successfully passed the competency exam

Date of Issuance JULY 7, 1989

Date of Expiration JULY 7, 1990

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

EMPLOYEE TRAINING, RELEASE, AND
MEDICAL EXAMINATION DOCUMENTATION

Employee Name: Thom J. Greer
Employee Address: 2240 W. Carribean
Employee Telephone No.: 942-4978
Union Card Number: N/A Classification of Worker: WORKER
Have you had in the past, or present, any respiratory problems? Yes (No)
Have you worked in the past with asbestos or fiberglass type materials? (Yes) No

The project you will be working on involves the use of asbestos and the removal of the asbestos from the building. Asbestos is considered a health hazard.

The company is supplying all necessary safety clothing and working conditions required and necessary for your protection from asbestos hazard.

You shall be instructed at commencement of the job on the required use of safety equipment, clothing, working conditions, and procedures. These must be rigidly adhered to. Smoking, eating, chewing gum are not permitted in the work areas. Disregarding of safety instructions shall result in instant dismissal.

You are aware of your legal right to select a powered air purifying respirator in lieu of any negative pressure respirator at the company's expense (OSHA 29 CFR 1926 58).

I am aware that smoking increases the risk of contracting lung cancer and/or Asbestosis, 90 times. I acknowledge that I have been advised by my employee and Physician at the annual medical exam to stop.

I acknowledge that safety instructions have been given to me by the company at my work commencement and I am thoroughly conversant with them and have answered the above questions truthfully.

Signed: Thom J. Greer 10/9/89
Employee Date

MEDICAL EXAMINATION:
Date: 10/9/89 Physician's Name: Mark D. Whittaker, M.D. Address: 1840 W. Maryland ~~Phoenix, Az. 85015~~
Physician's OK to work while wearing respirator: YES

RESPIRATOR TRAINING:
Date: 10-9-89 Instructor's Name: BILL STUMPP Brand: NORTH Type: 1/2 FACE
Size: MED Qualitative Test Agent: IRT SMOKE Tester's Initials: WEJ

ASBESTOS TRAINING:
Date: 7-7-89 Instructor's Name: ASBESTOS INT Information Covered:
AHERA WORKER

The above information is true to the best of my knowledge.

Signed: William E. Stumpp
Company Representative Date 7-7-89

Current Training Updated Training
(Copy of Card)

A 1990

THE ASBESTOS INSTITUTE

Certifies that

THOM J. GREER

Has attended the EPA approved course

AHERA
PRACTICES & PROCEDURES FOR ASBESTOS ABATEMENT WORKERS

and successfully passed the competency exam

Date of Issuance JULY 7, 1989
Date of Expiration JULY 7, 1990

Director
The Asbestos Institute

The Asbestos Institute Phoenix, Arizona

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, Thomas J. Green HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

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HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
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USE OF PROTECTIVE EQUIPMENT
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PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

8-27-90
DATE

Thomas J. Green
SIGNATURE OF EMPLOYEE

566-43-8824
SOCIAL SECURITY NUMBER

Gay Ferguson
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, Thomas J. Greer ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 8-27-90

566-47-8524
SOCIAL SECURITY NUMBER

SIGNATURE OF EMPLOYEE

WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: Thomas Greer S.S.#566-42-8824
(PRINT)

RESPIRATOR MANUFACTURER: RAYCAL

1/2 MASK --- Model: _____ Size: _____

FULL FACE -- Model: RAYCAL Size: M

Testing Conductor: James A Walden Date of Test: 9/6/90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:

1. Breathe normally for one minute.
2. Breathe deeply.
3. Turn head from side to side.
4. Nod head up and down.
5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

6. Jog in place.
7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: _____

Test Conductor's Initial: J.A.W. _____

Employee's Initial: [illegible]

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Maricopa City

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

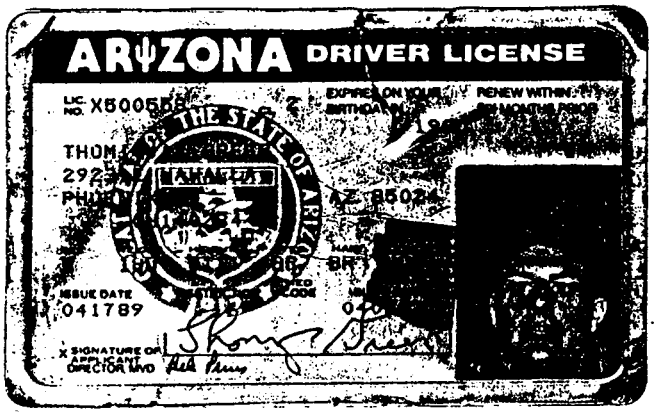
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

Thomas T. Green
(PRINT) NAME OF WORKER

Thom T. Green
SIGNATURE OF WORKER

566-49-8824
SOCIAL SECURITY NUMBER

Gay Ledgum
WITNESS


ARIZONA DRIVER LICENSE
LIC. NO. X500
EXPIRES ON YOUR BIRTHDAY
RENEW WITHIN
THOM
292
PHO
AZ 85024
ISSUE DATE
041789
X SIGNATURE OF APPLICANT
DIRECTOR MVD

ASNET
ASBESTOS SERVICES NETWORK

BASIC EXAMINATION FOR ASBESTOS WORKERS

DATE: 10/17/90 S.S.#: 566-47-8824 TELEPHONE #: 915-85-40

NAME: Thomas J. Green DATE OF BIRTH: 4/8/62

ADDRESS: 2928 EN. Puget Phx. AZ. 85051
STREET CITY STATE ZIP

HEIGHT: 5 FT. 11 INCHES WEIGHT: 195 POUNDS

ARE YOU ON ANY MEDICATIONS? NO

KNOWN DRUG ALLERGIES? NO

BROKEN BONES? NO SURGERY? NO

DO YOU WEAR GLASSES? YES / (NO) CONTACTS? YES / (NO)

DO YOU HAVE ANY KNOWN PROBLEMS REGARDING HEIGHTS OR CONFINED SPACES? NO
IF YES EXPLAIN:

HAVE YOU EVER HAD PROBLEMS WITH YOUR EARS? YES Have Cauliflower Ear

DO YOU SMOKE? (YES) / NO HOW MUCH? 10 cigs. A DAY

CARDIO-PULMONARY EXAMINATION

1. BLOOD PRESSURE: SYSTOLIC 124 DIASTOLIC 80 PULSE 60

2. HEART: MURMURS 0 RATE regular RHYTHM 0

ENLARGEMENT 0

3. LUNGS:

4. PULMONARY FUNCTION: WITHIN NORMAL LIMITS WNL

(copy attached) OUTSIDE NORMAL LIMITS

5. P A CHEST X-RAY: WITHIN NORMAL LIMITS ann

OUTSIDE NORMAL LIMITS

IT IS MY OPINION THAT THE ABOVE NAMED PATIENT (IS) / (~~IS NOT~~ md) MEDICALLY QUALIFIED TO WEAR A RESPIRATOR IN THE PERFORMANCE OF HIS/HER JOB.

LIMITATIONS if any:

PHYSICIAN'S SIGNATURE: Abraham Sapan

A 2746

THE ASBESTOS INSTITUTE

Certifies that

JERRY LESTER

Has attended the EPA approved course

AHERA
ANNUAL REFRESHER
WORKER

and successfully passed the competency exam

Date of Issuance FEBRUARY 24, 1990

Date of Expiration FEBRUARY 24, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

FORM 8111

CONTINUATION

NAME Lester, Jerry BCP Construction

ADDRESS 2432 W. Peoria Avenue Suite 1205 Phoenix, Az. DATE 2/21/90

RE- Evaluation

Prior Physical - (see attached copy)

Changes and/or additions - Denied

Respiratory History Review -

Previous exposure to asbestos or other contaminants - asbestos 2 yrs.

Previous history of respiratory problems - Denied

Smoking history- 2 pks a day

Length of time - 10 yrs.

Physical Examination -

Wt: 151 BP: 130/90 T: 98.6

CC:

HEENT: OD. [illegible] w/

lungs CTA Abd soft BS [illegible]

[illegible]

[illegible]

Ext [illegible]

A: General health satisfactory

No respiratory or with restriction

[illegible]

COMMUNITY HOSPITAL MEDICAL CENTER
6501 N. 19TH AVE. PHOENIX, ARIZONA 85015

NAME Lester, Jerry
X-RAY [illegible] DATE 02-21-[illegible] AGE [illegible]
HOSPITAL NO. 72[illegible] ROOM NO. CP SEX M
ATTENDING PHYSICIAN M. Whitaker
DOB 09-23-[illegible]

DEPARTMENT OF
MEDICAL IMAGING

DCP Physical

DO NOT WRITE IN THIS SPACE

Treatment or Examination

DATE

CLD 02-21-[illegible] Chest

PA right anterior oblique projections of the chest appears negative for evidence of an active inflammatory neoplastic disease. The lung fields are ventilated equal bilaterally. The diaphragmatic leaflets are smoothly marginated. Costophrenic cardiophrenic sulci appear clear. The bronchovascular pattern, cardiac silhouette superior mediastinum appears to be within normal limits. Osseous architecture about the thorax is symmetrical and preserved.

CONCLUSION:

1. Chest study appears negative for evidence of an acute pulmonary or cardiac pathology.

GE/cb
d & t: 2/22/90

x
RADIOLOGIST
GEORGE ENGISCH, D.O.

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, JERRY W LESTER HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

PHYSICAL CHARACTERISTICS OF ASBESTOS
HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

6/19/90
DATE

Jerry W Lester
SIGNATURE OF EMPLOYEE

527-73-9302
SOCIAL SECURITY NUMBER

Kay Lodugni
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, JERRY W LESTER ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 6/19/90

Jerry W Lester
SIGNATURE OF EMPLOYEE

SOCIAL SECURITY NUMBER

Gay Lockyear
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: JERRY W LESTER S.S.# 527 - 73 - 9302
(PRINT)

RESPIRATOR MANUFACTURER: Ray Cal

1/2 MASK --- Model: _____ Size: _____

FULL FACE -- Model: PAR.R. Size: M

Testing Conductor: DAVID ALEXANDER Date of Test: 6/20/90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: X 6-20-90

FAILED: _____ REMARKS: _____

Test Conductor's Initial: D.A

Employee's Initial: Jerry W Lester

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist of Maricopa City

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

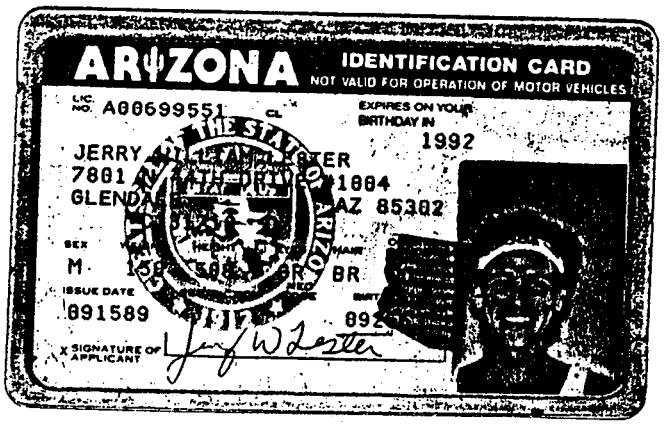
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

JERRY W LESTER
(PRINT) NAME OF WORKER

Jerry W Lester
SIGNATURE OF WORKER

527-73-9302
SOCIAL SECURITY NUMBER

Guy Lowman
WITNESS



ARIZONA IDENTIFICATION CARD

NOT VALID FOR OPERATION OF MOTOR VEHICLES

LIC. NO. A00699551 CL

EXPIRES ON YOUR BIRTHDAY IN 1992

JERRY [illegible] LESTER

7801 N [illegible] 1004

GLENDA[illegible] AZ 85302

SEX M

HAIR BR

ISSUE DATE 091589

X SIGNATURE OF APPLICANT Jerry W Lester

Mayhew Environmental Training Associates

Certificate Number
7ME052390005W
Social Security #527-91-3594

Accreditation Expires
05/23/91

This is to Certify that

Scott Repp

has successfully completed

AHERA Asbestos Worker Training

May 21- 23, 1990

and passed the associated examination

May 23, 1990 in Phoenix, Arizona.

Conducted by:

M E T A
Mayhew Environmental Training Associates
INCORPORATED

P.O. Box 786 Lawrence, Kansas 66044
1-800-444-6382

For further information contact: Betty Fenstemaker, Registrar

President

ASNET
ASBESTOS SERVICES NETWORK

BASIC EXAMINATION FOR ASBESTOS WORKERS

DATE: 6/30/90 S.S.#: 527-91-3594 TELEPHONE #: NONE

NAME: SCOTT NEPP DATE OF BIRTH: 5/7/68

ADDRESS: 6737 W MYRTLE GLEN AZ
STREET CITY STATE ZIP

HEIGHT: 6 FT. 1 INCHES WEIGHT: 175 POUNDS

ARE YOU ON ANY MEDICATIONS? NO

KNOWN DRUG ALLERGIES? NO

BROKEN BONES? NO SURGERY? NO

DO YOU WEAR GLASSES? YES / NO CONTACTS? YES / NO

DO YOU HAVE ANY KNOWN PROBLEMS REGARDING HEIGHTS OR CONFINED SPACES? NO
IF YES EXPLAIN:

HAVE YOU EVER HAD PROBLEMS WITH YOUR EARS? NO

DO YOU SMOKE? YES / NO HOW MUCH? 1 PACK DAY

CARDIO-PULMONARY EXAMINATION

1. BLOOD PRESSURE: SYSTOLIC 130 DIASTOLIC 70 PULSE 70
2. HEART: MURMURS Ø RATE 70 RHYTHM NSR
   ENLARGEMENT Ø
3. LUNGS: Clear
4. PULMONARY FUNCTION: WITHIN NORMAL LIMITS WNL
   (copy attached) OUTSIDE NORMAL LIMITS
5. P A CHEST X-RAY: WITHIN NORMAL LIMITS WNL
   OUTSIDE NORMAL LIMITS

IS MY OPINION THAT THE ABOVE NAMED PATIENT IS / IS NOT MEDICALLY QUALIFIED TO WEAR A RESPIRATOR IN THE PERFORMANCE OF HIS/HER JOB.

LIMITATIONS if any:

PHYSICIAN'S SIGNATURE: [signature]

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, Scott Repp HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

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HEALTH HAZARDS ASSOCIATED WITH ASBESTOS
RESPIRATORY PROTECTION
USE OF PROTECTIVE EQUIPMENT
PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

5/21/90
DATE

Scott Repp
SIGNATURE OF EMPLOYEE

527-91-3594
SOCIAL SECURITY NUMBER

Gay Ledgerwood
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, Scott A Repp ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 5/21/90

Scott Repp
SIGNATURE OF EMPLOYEE

527-71-3594
SOCIAL SECURITY NUMBER

Gay Lodigiani
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: SCOTT REPP (PRINT) S.S.# 527 - 91 - 3594

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: NORTH Size: _____

FULL FACE -- Model: RAYCAL NIOSH APPROVAL # TC-21C-353 Size: M

Testing Conductor: Omar Gonzalez Date of Test: 5-22-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:

1. Breathe normally for one minute.
2. Breathe deeply.
3. Turn head from side to side.
4. Nod head up and down.
5. Read the "Rainbow Passage".

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6. Jog in place.
7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: P.A.P.R

Test Conductor's Initial: OG MSA

Employee's Initial: SR

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Maricopa City

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

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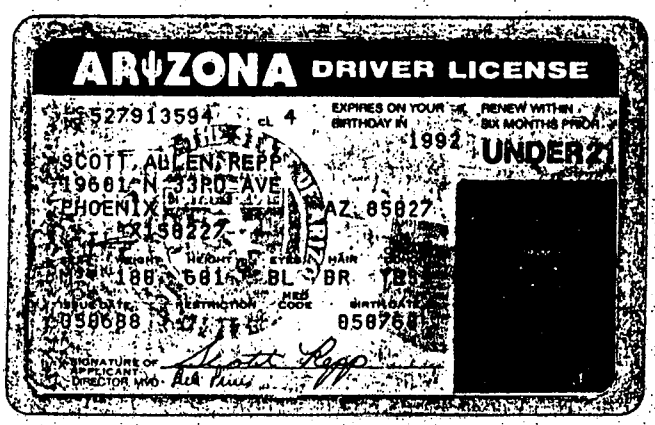
(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

Scott A Repp	Scott A Repp
(PRINT) NAME OF WORKER	SIGNATURE OF WORKER
527-91-3594	Jay Teagan
SOCIAL SECURITY NUMBER	WITNESS



ARIZONA DRIVER LICENSE

527913594 CL 4

EXPIRES ON YOUR BIRTHDAY IN 1992

RENEW WITHIN SIX MONTHS PRIOR

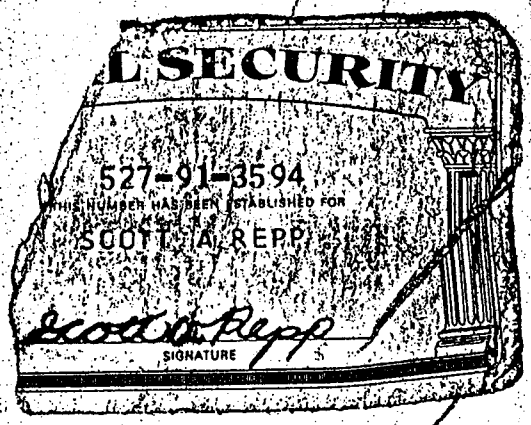
UNDER 21

SCOTT ALLEN REPP
19601 N 33RD AVE
PHOENIX AZ 85027
X158222

HEIGHT 5'11" WEIGHT 180 EYES BL HAIR BR SEX M

DATE OF BIRTH 050768

SIGNATURE OF APPLICANT OR DIRECTOR WHO ACT FOR



L SECURITY

527-91-3594

THIS NUMBER HAS BEEN ESTABLISHED FOR

SCOTT A REPP

SIGNATURE

A 3537

THE ASBESTOS INSTITUTE

Certifies that

DAVE ROGERS

Has attended the EPA approved course

AHERA
CONTRACTOR/SUPERVISOR REFRESHER
AUGUST 24, 1990

and successfully passed the competency exam

Date of Issuance AUGUST 24, 1990

Date of Expiration AUGUST 24, 1991

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

A 2223

THE ASBESTOS INSTITUTE

Certifies that

DAVID W. ROGERS

Has attended the EPA approved course

AHERA
PRACTICES AND PROCEDURES FOR CONTRACTOR/SUPERVISOR

and successfully passed the competency exam

Date of Issuance AUGUST 24, 1989

Date of Expiration AUGUST 24, 1990

The Asbestos Institute
Phoenix, Arizona

Director
The Asbestos Institute

HEALTHCARE CENTERS FOR BUSINESS AND INDUSTRY

☒ 1149 E. Washington St.
Phoenix, AZ 85034 254-6622

☐ 3302 W. Thomas Rd.
Phoenix, AZ 85017 233-2900

SPIROMETRY REPORT = Passed: Yes ✓ No ____

Height (in)	Age	Sex	Name
77"	26	M	Dave Rogers

	Actual Value	Predicted Value	% of Predicted
FVC	7.26 lt.	6.51	100%
FEV_1	6.40 lt.	4.98	100%
FEF2575	6.85 lt.	4.96	100%
Ratio FEV_1/FVC	0.88 = 88%	75%	

NORMAL TEST and APPROVED FOR WEARING RESPIRATOR.

R.E. Silva, MD

R.E. SILVA, M.D

03-22-90

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF TRAINING

I, DAVE ROGERS HAVE RECEIVED AT LEAST
(PLEASE PRINT NAME)
SIXTEEN (16) HOURS OF TRAINING IN THE DANGERS INHERENT IN HANDLING ASBESTOS AND BREATHING ASBESTOS DUST AND IN PROPER WORK PROCEDURES AND PERSONAL AND AREA PROTECTIVE MEASURES. THE TOPICS COVERED IN THE COURSE INCLUDED THE FOLLOWING:

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PRESSURE DIFFERENTIAL SYSTEMS
WORK PRACTICES INCLUDING HANDS ON OR ON-JOB TRAINING
PERSONAL DECONTAMINATION PROCEDURES
AIR MONITORING, PERSONAL AND AREA

BY SIGNING THIS DOCUMENT I AM ACKNOWLEDGING THAT MY EMPLOYER ASNET HAS ADVISED ME OF MY RIGHTS TO TRAINING AND PROTECTION RELATIVE TO MY EMPLOYMENT.

2-14-90
DATE

Dave Rogers
SIGNATURE OF EMPLOYEE

526-79-8401
SOCIAL SECURITY NUMBER

Janie Lauzette
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

EMPLOYEE'S SIGNED STATEMENT OF RESPIRATOR PROTECTION PROGRAM

I, DAVE ROGERS ACKNOWLEDGE RECEIPT OF
(PLEASE PRINT NAME)
ASNET'S RESPIRATOR PROTECTION PROGRAM. I HAVE READ AND UNDERSTOOD THIS POLICY. I WILL ENFORCE THIS POLICY TO THE BEST OF MY ABILITY.

DATE: 2-14-90

Dave Rogers
SIGNATURE OF EMPLOYEE

526-79-8401
SOCIAL SECURITY NUMBER

Janis Lauritsen
WITNESS

ASNET

ASBESTOS SERVICES NETWORK

RESPIRATOR FIT TESTING

EMPLOYEE NAME: DAVE Rogers S.S.# 526-79-8401
(PRINT)

RESPIRATOR MANUFACTURER: _____

1/2 MASK --- Model: North Size: M

FULL FACE -- Model: RACAL Size: M

Testing Conductor: Ed. Barrow Date of Test: 9-18-90

IRRITANT FUME PROTOCOL:

A. Put on and adjust respirator, wear for at least 10 minutes before starting the test. Be certain that the respirator is comfortable.

B. Perform Positive and Negative fit tests. Place cartridges on the respirator. Go inside the irritant smoke chamber.

C. Irritant smoke challenge:
   1. Breathe normally for one minute.
   2. Breathe deeply.
   3. Turn head from side to side.
   4. Nod head up and down.
   5. Read the "Rainbow Passage".

"When the sunlight strikes raindrops in the air they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for a pot of gold at the end of the rainbow."

   6. Jog in place.
   7. Breathe normally.

If you smell the irritant smoke you have failed the respirator test. You must select a different respirator and retake this test, until you do not smell or taste the irritant smoke.

PASSED: ✓

FAILED: _____ REMARKS: _____

Test Conductor's Initial: EBB _____

Employee's Initial: DNR

ASNET
ASBESTOS SERVICES NETWORK

CERTIFICATE OF WORKER'S RELEASE:

DATE: 9/20/90

PROJECT NAME: Flood Control

PROJECT ADDRESS: Various Addresses

OWNER'S NAME: Flood Control Dist. of Maricopa Cty.

In consideration of my employment by Asbestos Service Network dba/ ASNET in connection with the removel and disposal of asbestos, or other work in asbestos-contaminated areas, I hereby acknowledge, warrant, represent, covenant and agree as follows:

(1.) I acknowledge and understand that I have been or will be employed in connection with the removal of, disposal of, or other treatment to asbestos, or other work in asbestos-contaminated work areas, and I acknowledge that in handling asbestos and breathing asbestos dust, including, but not linited to, THE FACT THAT ASBESTOS CAN CAUSE ASBESTOSIS AND IS A KNOWN CARCINOGEN AND CAN THEREFORE CAUSE VARIOUS TYPES OF CANCER.

(2.) I acknowledge and understand that ANY CONTACT WITH ASBESTOS, WHETHER IT CAN BE SEEN OR NOT, MAY CAUSE ASBESTOSIS AND VARIOUS FORMS OF CANCER WHICH MAY NOT SHOW UP FOR MANY YEARS, and I covenant and agree faithfully to take all precautions required of me.

(3.) I knowingly assume all risks in connection with potential exposure to asbestos and I do hereby release and forever discharge the Owner, Architect, independent laboratory or engineers employed by the Owner or Architect, or personal representatives, whatsoever, at common law or otherwise, except any rights which the undersigned may have under the provisions of the applicable Workmen's Compensation Laws. Except as specifically set forth herein, I hereby waive and relinquish any and all claims of every nature which I now have or claim to have which are in any way, directly or indirectly related to exposure of asbestos and asbestos-contaminating materials.

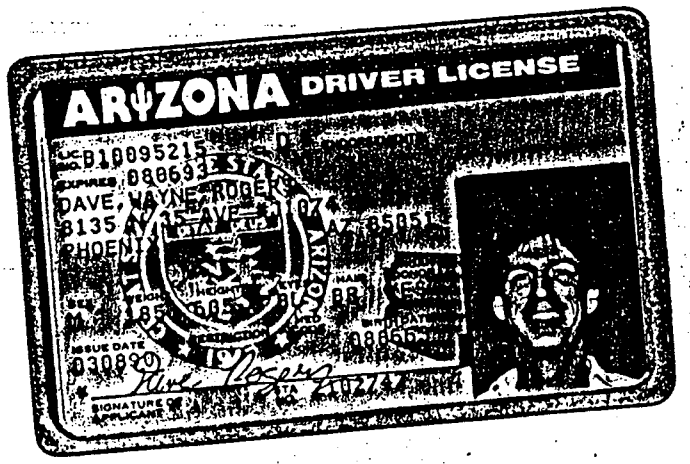
(4.) I hereby warrant and represent that I have not been disabled, laid-off, or compensated in damages or otherwise, because of the disease of asbestosis.

DAVE ROGERS
(PRINT) NAME OF WORKER

Dave Rogers
SIGNATURE OF WORKER

526-75-8401
SOCIAL SECURITY NUMBER

Jacie Lamarette
WITNESS


ARIZONA DRIVER LICENSE
B10095215
DAVE, WAYNE ROGERS
8135 AVE
PHOENIX
ISSUE DATE
SIGNATURE OF APPLICANT

APPENDIX G

SITE PHOTOGRAPHS

North side of Structure D after removal of roof was complete.

North side of Structure C during the abatement activities.

EXCELTECH	SITE PHOTOGRAPHS	REVIEWED BY: JMP	APPROVED BY: MM
	F. C. D. M. C.		
	ARIZONA CANAL	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY & PHOENIX, AZ	DATE: 26 NOV 90	DRAWING #: 50036-G1

North side of Structure B during the abatement activities.

Heater vents in the storage room of Structure C prior to removal.

EXCELTECH	SITE PHOTOGRAPHS	REVIEWED BY:	APPROVED BY:
	F. C. D. M. C.		
	ARIZONA CANAL	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY & PHOENIX, AZ	DATE: 26 NOV 90	DRAWING #: 50036-G2

Final clearance air monitoring inside containment in Structure C.

Final clearance inspection of containment inside Structure C.

EXCELTECH	SITE PHOTOGRAPHS	REVIEWED BY: JMP	APPROVED BY: MM
	F. C. D. M. C.		
	ARIZONA CANAL	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY & PHOENIX, AZ	DATE: 26 NOV 90	DRAWING #: 50036-G3

Air monitoring during roof abatement of Structure J.

Final clearance inspection of roof after removal on Structure J.

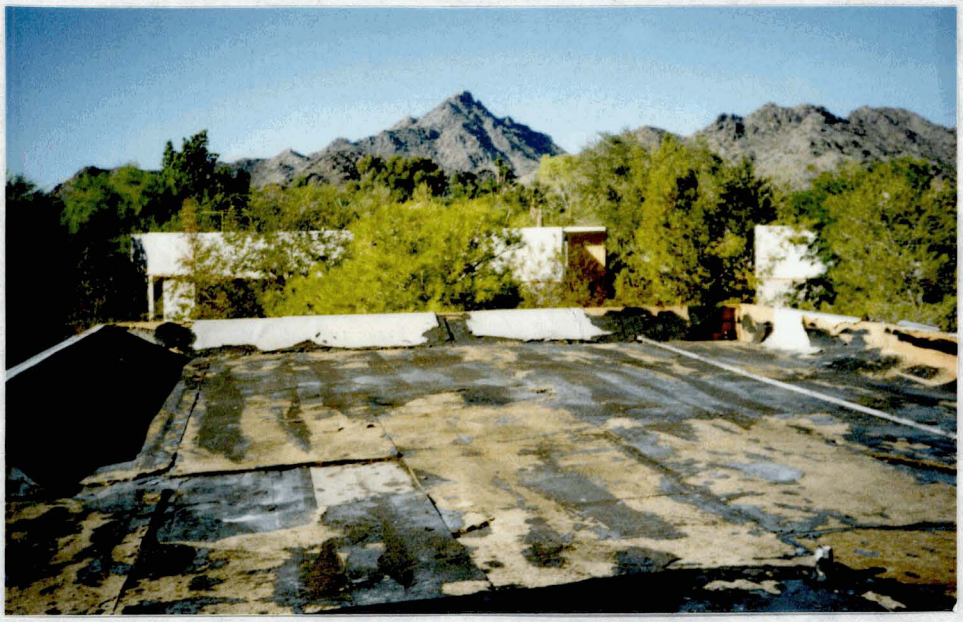
EXCELTECH	SITE PHOTOGRAPHS	REVIEWED BY: JMP	APPROVED BY: MM
	F. C. D. M. C.		
	ARIZONA CANAL	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY & PHOENIX, AZ	DATE: 26 NOV 90	DRAWING #: 50036-G4

Outside view of containment for Structure H.

Final clearance inspection of the roof after removal on Structure H.

EXCELTECH	SITE PHOTOGRAPHS	REVIEWED BY: JMP	APPROVED BY: MM
	F. C. D. M. C.		
	ARIZONA CANAL	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY & PHOENIX, AZ	DATE: 26 NOV 90	DRAWING #: 50036-G5

Final clearance inspection inside containment in Structure H.



Final clearance inspection of the roof after removal on Structure E.

EXCELTECH	SITE PHOTOGRAPHS	REVIEWED BY:	APPROVED BY:
	F. C. D. M. C.		
	ARIZONA CANAL	JOB #: 5-50036-51	DRAWN BY: TED
	PARADISE VALLEY & PHOENIX, AZ	DATE: 26 NOV 90	DRAWING #: 50036-G6