

ADDITIONAL MANAGEMENT PLAN DATA

SAMPLING PROTOCOL

Where friable surfacing materials were encountered, the following sampling protocol was followed.

1. The homogeneous sampling area was divided into nine equal areas.
2. Random numbers were taken from a source (EPA's Sampling Strategy Booklet).
3. Three samples were collected at or near the center of the selected areas which totaled less than 1,000 square feet, five for 1,000 to 5,000 square feet, and seven or more for friable homogeneous areas greater than 5,000 square feet.

Where non-friable samples were collected, the following sampling protocol was followed:

1. Surfacing - three or more samples were collected, generally in non-conspicuous locations from each homogeneous material.
2. TSI - three or more samples were taken from homogeneous materials.
3. Miscellaneous - one or more samples were taken from miscellaneous materials in a manner sufficient to determine the asbestos content of each homogeneous material.

In some cases materials were assumed to contain asbestos. This was done with materials which always contain asbestos (transite or aircell insulation) or with materials which had been identified as ACM in a previous survey.

MANAGEMENT PLAN

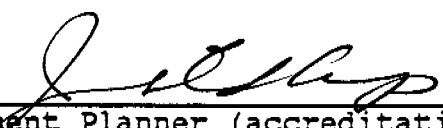
FOR

- ★ CHICO UNIFIED SCHOOL DISTRICT
- ★ PLEASANT VALLEY SENIOR HIGH SCHOOL
- ★ 1475 EAST AVENUE
CHICO, CA 95926

LEA Superintendent: ROBERT W. PURVIS

LEA AHERA Designee: PAUL B. GRAVES

PREPARED BY:


Management Planner (accreditation attached)
Hazard Management Services, Inc.
P. O. Box 7012
Modesto, CA 95355-7012
(209) 577-8209

UNIVERSITY OF CALIFORNIA

BERKELEY

UNIVERSITY EXTENSION

This is to certify that

James E Sharp

has attended and satisfactorily passed the exam
for the course

Building Inspection and Management Planning for Asbestos

November 16-20, 1987



This certification is valid until:
November 20, 1988

November 18 and 20, 1987
Exam dates

4
Certificate number

Vivian Sutcher
Assistant Dean
University Extension

Delval D.
Program Director
Pacific Asbestos Information Center

UNIVERSITY OF CALIFORNIA BERKELEY UNIVERSITY EXTENSION

This is to certify that

JAMES E. SHARP

has attended the refresher course
for building inspectors and management planners,

Advanced Topics in Building Inspection and Management Planning
December 13, 1988



Certificate number: 4


Valid until: December 13, 1989

Virvin Sutcher
Assistant Dean
University Extension

Deborah Dill
Program Director
Pacific Asbestos Information Center

MANAGEMENT PLANNER'S STATEMENT OF
SUFFICIENCY OF RESOURCES

I, James E Sharp, accredited Management Planner, do hereby certify that I have examined the budget requirements for compliance with the AHERA regulations and find them sufficiently accurate to successfully implement the provisions of this plan.



James E Sharp
Hazard Management Services, Inc.
P. O. Box 7012
Modesto, CA 95355-7012

1. I, Paul B. Graves, designated person to ensure the compliance of Pleasant Valley Sr. High School with the requirements of AHERA, do hereby certify that the school's responsibilities as stated in Federal Register 40CFR 763.84 have been, or will be, met within the mandated timeframe.

Paul B. Graves

- II. I, Paul B. Graves, designated person to ensure the compliance of Pleasant Valley Sr. High School with the requirements of AHERA, do hereby certify that, with respect to persons who inspected for ACBM and who will design or carry out response actions, except for operations and maintenance, with reference to ACBM, the school has used and will use only persons who have been accredited by an EPA-approved course under sections 206 (c) of Title II of the Act.

Paul B. Graves

- III. The School has addressed the possible conflicts of interests which could exist between parties providing service to the School to assist in AHERA compliance. After thorough review, we have determined that each compliance action shall be independently acquired.

Paul B. Graves

ASBESTOS HAZARD EMERGENCY RESPONSE ACT (AHERA)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

GENERAL DATA

(FORM A)

OLAEPA-A (NEW 6-88)

MUST BE TYPED AND SUBMITTED WITH EACH SCHOOL MANAGEMENT PLAN
* SEE REVERSE FOR CLARIFICATION OF TERMS

LOCAL EDUCATION AGENCY Chico Unified School District		COUNTY Butte	
SCHOOL NAME Pleasant Valley Senior High School		SCHOOL PHONE NUMBER (916) 891-3050	
ADDRESS (Number) 1475 East Avenue	(Street) Chico	(City) Chico	(Zip Code) 95926
CDS CODE * 04 61424 0437558	SCHOOL ENROLLMENT * 726	NUMBER OF SCHOOL EMPLOYEES * 69	NUMBER OF BUILDINGS AT THE SCHOOL 14

LEA AHERA DESIGNEE

NAME Paul B. Graves		PHONE NUMBER (916) 345-8192	
ADDRESS (Number) 4306 Kathy Lane	(Street) Chico	(City) Chico	(Zip Code) 95926
TRAINING COURSE(S) AND DATE(S)			

LEA DESIGNEE TRAINING BY HMS, INC., JANUARY 19, 1989

TOTAL TRAINING HOURS
6

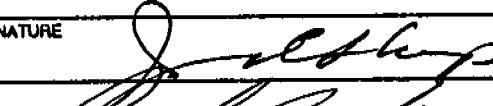


MANAGEMENT PLANNER

NAME JAMES E SHARP, SR.		PHONE NUMBER (209) 577-8209	
ADDRESS (Number) P.O. BOX 6848	(Street) MODESTO	(City) MODESTO	(Zip Code) 95355-6848
ACCREDITATION NUMBER 4	TRAINING AGENCY U.C. BERKELEY, P.A.I.C.		


DOCUMENTS ATTACHED (CHECK APPROPRIATE BOXES)

- ☒ Record of Friable and Non-Friable ACBM (Form B)
 ☒ Physical and Hazard Assessment of Friable ACBM or Friable Assumed ACBM (Form C)
 ☒ Operations and Maintenance Program (Form D)
 ☒ Periodic Surveillance Plan (Form E)
 ☒ Reinspection Plan (Form F)
 ☒ Parent/Employee Notification Plan (Form G)
 ☒ Resources Needed (Form H)

We certify that the general Local Education Agency (LEA) responsibilities, as stipulated by 40CFR Part 763, have been met or will be met, and that this submittal includes all buildings at this school.

MANAGEMENT PLANNER SIGNATURE 	DATE 3-15-89
LEA DESIGNEE SIGNATURE 	DATE 4/20/89
LEA SUPERINTENDENT SIGNATURE 	DATE 4/20/89

OFFICE OF LOCAL ASSISTANCE USE ONLY

DATE RETURNED (Reasons Stated Below)	DATE RESUBMITTAL RECEIVED	(DATE STAMP)
REASON(S) FOR RETURN		
PRINTED NAME OF REVIEWER		DATE
REVIEWER'S SIGNATURE 		

RECORD OF FRIABLE AND NONFRIABLE ACBM (FORM B)

OLA/EPA-B (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

SCHOOL		CDS CODE	
PLEASANT VALLEY SENIOR HIGH SCHOOL		04 61424 0437558	
SCHOOL PHONE NUMBER			
(916) 891-3050			
ADDRESS	(Number)	(Street)	(City)
1475 EAST AVE.		CHICO	95926

-IMPORTANT-

Each building and functional space with friable ACBM or friable assumed ACBM listed on this form requires completion of **FORM C** (PHYSICAL AND HAZARD ASSESSMENT OF FRIABLE ACBM OR FRIABLE ASSUMED ACBM). Indicate location of material on blueprint, diagram or narrative in square or linear feet, and attach a copy (Sec. 763.93).

LINE	BUILDING NAME & FUNCTIONAL SPACE (Indicate Address if Different From Above)	CHECK ONE			CHECK ONE			
		SURFACING	TSI	MISC.	ACBM		ASSUMED ACBM	
					FRIABLE	NON-FRIABLE	FRIABLE	NON-FRIABLE
1.	A - ATTIC		X			X		
2.	A - COVERED WALK	X				X		
3.	B - ATTIC		X		X			
4.	B - COVERED WALK	X				X		
5.	C - ATTIC		X			X		
6.	C - ROOM 20			X				X
7.	C - COVERED WALK	X				X		
8.	D - ATTIC AREA		X		X			
9.	D - COVERED WALK	X				X		
10.	E - RADIO STATION ATTIC		X			X		
11.	E - COVERED WALK	X				X		
12.	F - COVERED WALK	X				X		
13.	F - BOILER RM		X			X		
14.	F - RM 54 STOREROOM		X		X			
15.	F - ATTIC		X		X			
16.	F - SMALL GYM		X			X		
17.	G - GYM		X		X			
18.	G - LOCKER ROOMS		X			X		
19.	G - COVERED WALK	X				X		
20.	H - COVERED WALK	X				X		

**PHYSICAL AND HAZARD ASSESSMENT OF FRIABLE
ACBM OR FRIABLE ASSUMED ACBM (FORM C)
(SEC. 763.93)**

OLAFPA-C (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

			CDS CODE 04 61424 0437558	
SCHOOL PLEASANT VALLEY SENIOR HIGH SCHOOL			SCHOOL PHONE NUMBER (916) 891-3050	
ADDRESS (Number)	(Street)	(City)	(Zip Code)	
1475 EAST AVE.		CHICO	95926	
BUILDING NAME UNIT B			INSPECTION DATE 03/30/88	
FUNCTIONAL SPACE ATTIC			INDICATE LINE NO. FROM FORM B 3	
TYPE OF FRIABLE ACBM				
<input type="checkbox"/> SURFACING <input checked="" type="checkbox"/> TSI <input type="checkbox"/> MISCELLANEOUS				

1. CONDITION OF ACBM (Overall Rating)

CHECK APPROPRIATE BOX

☐ GOOD ☒ DAMAGED (Fair) ☐ SIGNIFICANTLY DAMAGED (Poor)

2. POTENTIAL FOR DISTURBANCE (Overall Rating)

CHECK APPROPRIATE BOX

☐ LOW ☒ MODERATE (Potential for damage) ☐ HIGH (Potential for significant damage)

3. HAZARD ASSESSMENT (Combine Ratings from Items 1 and 2 and Check Appropriate Box)

CONDITION OF ACBM	POTENTIAL FOR DISTURBANCE		
	LOW	MODERATE	HIGH
GOOD	1	2	3
DAMAGED	4	5 <input checked="" type="checkbox"/>	6
SIGNIFICANTLY DAMAGED	7	7	7

4. RECOMMENDED RESPONSE ACTION(S) AND COST(S)

RESPONSE ACTION	ESTIMATED COSTS
<input type="checkbox"/> A. OPERATION AND MAINTENANCE	\$
<input checked="" type="checkbox"/> B. REPAIR	\$ 100.00
<input type="checkbox"/> C. ENCAPSULATION	\$
<input type="checkbox"/> D. ENCLOSURE	\$
<input checked="" type="checkbox"/> E. REMOVAL	\$ 1,750.00
TOTAL	\$ 1,850.00

5. NARRATIVE OF RECOMMENDED RESPONSE ACTIONS (Attach Additional Sheets if Necessary)

Describe process to be used for each response listed in item 4.

	SCHEDULE	
	START	COMPLETE
B. REPAIR DAMAGED TSI JOINT WITH WETTABLE CLOTH	1989	1989
E. REMOVE ALL MUDDED TSI IN THIS ATTIC ACCORDING TO OLA SPECIFICATIONS REPAIRED 1/9 & 1/10/91	1989	1989

③

Inspection Form I-1

DISTRICT _____

Page _____ of _____

SCHOOL PV #1 S.Date 3-30-88Building Unit BInspector RBLocation Attic space
(functional area)HMS-SVH-05BMaterial: Surfacing TSI Misc. Muddled fitting
Description 4" OD% Asbestos 10-15Amount of Material (NF / F) 14 + 8 ⁽²²⁾ / 1 (ft²/lf) Assumed ACM: Y / N # of samples 1

CONDITION: % damaged:

Extent of damage:

0% <1% 1-10% 11-25% >25%none local distributedType damage: air; deterioration; water; physical; flakingDESCRIPTION: Foam wrapped pipewrap with muddled fittings
All fittings except one at fan unit in very good to excellent shape. Same pipe system as unit A from same boiler

POTENTIAL FOR DISTURBANCE:

PREVENTATIVE MEASURES:

Accessibility: H M L
Vibration : H M L
Air Erosion : H M L
Water : H M L

1. Fix Leaks
2. Prevent water contact
3. Do not DCSG
4. Do not affix signs/deco's
5. Avoid contact

COMMENTS: Pipes attached at fan unit has high vibrationOne small section of pipe does need some rewrapping at fan unit.

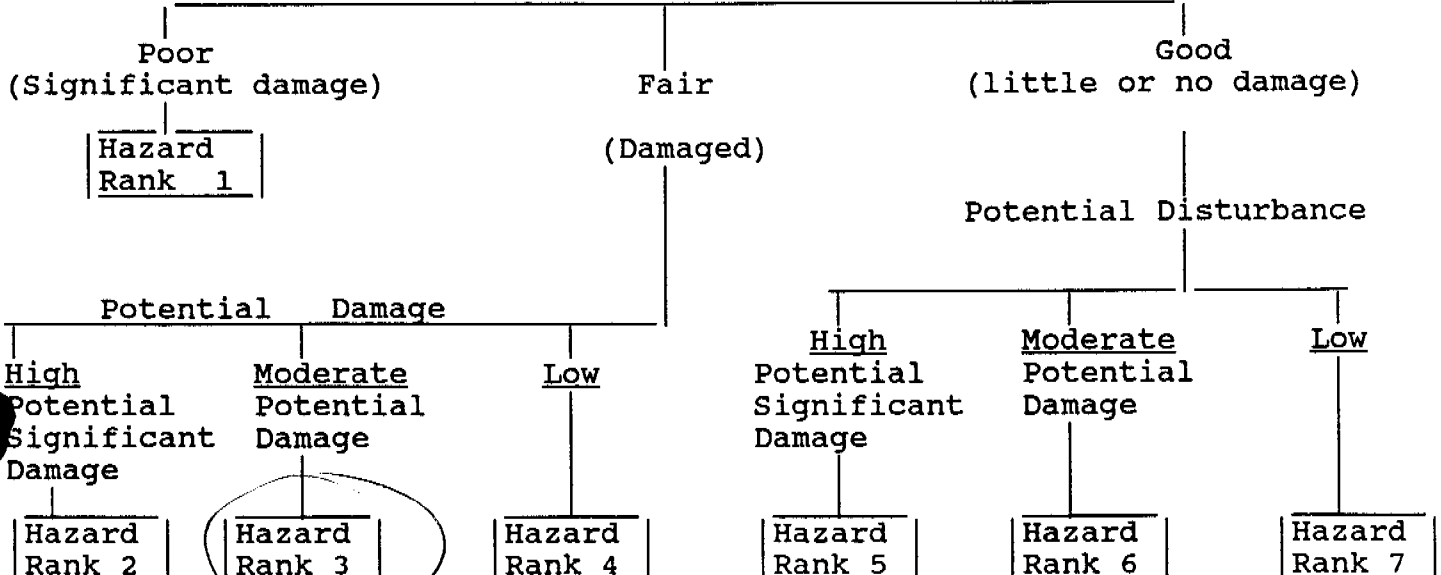
REMEDIAL ACTIONS

isolate/restrict repair/cleanup

enclose encapsulate

remove O&M

ACBM Condition - Assessment



**PHYSICAL AND HAZARD ASSESSMENT OF FRIABLE
ACBM OR FRIABLE ASSUMED ACBM (FORM C)
(SEC. 763.93)**

OLA/EPA-C (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

				CDS CODE 04 61424 0437558
SCHOOL PLEASANT VALLEY SENIOR HIGH SCHOOL				SCHOOL PHONE NUMBER (916) 891-3050
ADDRESS	(Number) 1475 EAST AVE.	(Street) CHICO	(City) CHICO	(Zip Code) 95926
BUILDING NAME UNIT D				INSPECTION DATE 03/30/88
FUNCTIONAL SPACE ATTIC SPACE				INDICATE LINE NO. FROM FORM B 8
TYPE OF FRIABLE ACBM				
<input type="checkbox"/> SURFACING <input checked="" type="checkbox"/> TSI <input type="checkbox"/> MISCELLANEOUS				

1. CONDITION OF ACBM (Overall Rating)

CHECK APPROPRIATE BOX

☐ GOOD
 ☒ DAMAGED (Fair)
 ☐ SIGNIFICANTLY DAMAGED (Poor)

2. POTENTIAL FOR DISTURBANCE (Overall Rating)

CHECK APPROPRIATE BOX

☐ LOW
 ☒ MODERATE (Potential for damage)
 ☐ HIGH (Potential for significant damage)

3. HAZARD ASSESSMENT (Combine Ratings from Items 1 and 2 and Check Appropriate Box)

CONDITION OF ACBM	POTENTIAL FOR DISTURBANCE		
	LOW	MODERATE	HIGH
GOOD	1	2	3
DAMAGED	4	5 X	6
SIGNIFICANTLY DAMAGED	7	7	7

4. RECOMMENDED RESPONSE ACTION(S) AND COST(S)

RESPONSE ACTION

ESTIMATED COSTS

<input type="checkbox"/> A. OPERATION AND MAINTENANCE	\$
<input checked="" type="checkbox"/> B. REPAIR	\$ 100.00
<input type="checkbox"/> C. ENCAPSULATION	\$
<input type="checkbox"/> D. ENCLOSURE	\$
<input checked="" type="checkbox"/> E. REMOVAL	\$ 2,600.00
TOTAL	\$ 2,700.00

5. NARRATIVE OF RECOMMENDED RESPONSE ACTIONS (Attach Additional Sheets if Necessary)

SCHEDULE

START COMPLETE

Describe process to be used for each response listed in item 4.

B. REPAIR DAMAGED TSI JOINT WITH WETTABLE CLOTH 1989 1989

E. REMOVE ALL MUDDY TSI IN THIS ATTIC ACCORDING TO OLA SPECIFICATIONS. 1989 1989

HAZARD MANAGEMENT SERVICES, INC.

Inspection Form I-1

DISTRICT _____

Page 8 of _____SCHOOL PV H.S.Date 3-30-88Building Unit DInspector RBLocation Attic space
(functional area)

HMS- _____

Material: Surfacing TSI Misc. _____ % Asbestos _____
 Description 3-4" OD mudded fittings on foam straight pipewrap # of samples 2
 Amount of Material (NF / F) 18+15 / 1 (ft²/lf) Assumed ACM: Y / N

CONDITION: % damaged: Extent of damage:
 0% <1% 1-10% 11-25% >25% none local distributed

Type damage: air; deterioration; water; physical; flakingDESCRIPTION: Pipe wrap in very good condition

POTENTIAL FOR DISTURBANCE:

Accessibility: H M L
 Vibration : H M L
 Air Erosion : H M L
 Water : H M L

PREVENTATIVE MEASURES:

1. Fix Leaks
2. Prevent water contact
3. Do not DCSG
4. Do not affix signs/deco's
5. Avoid contact

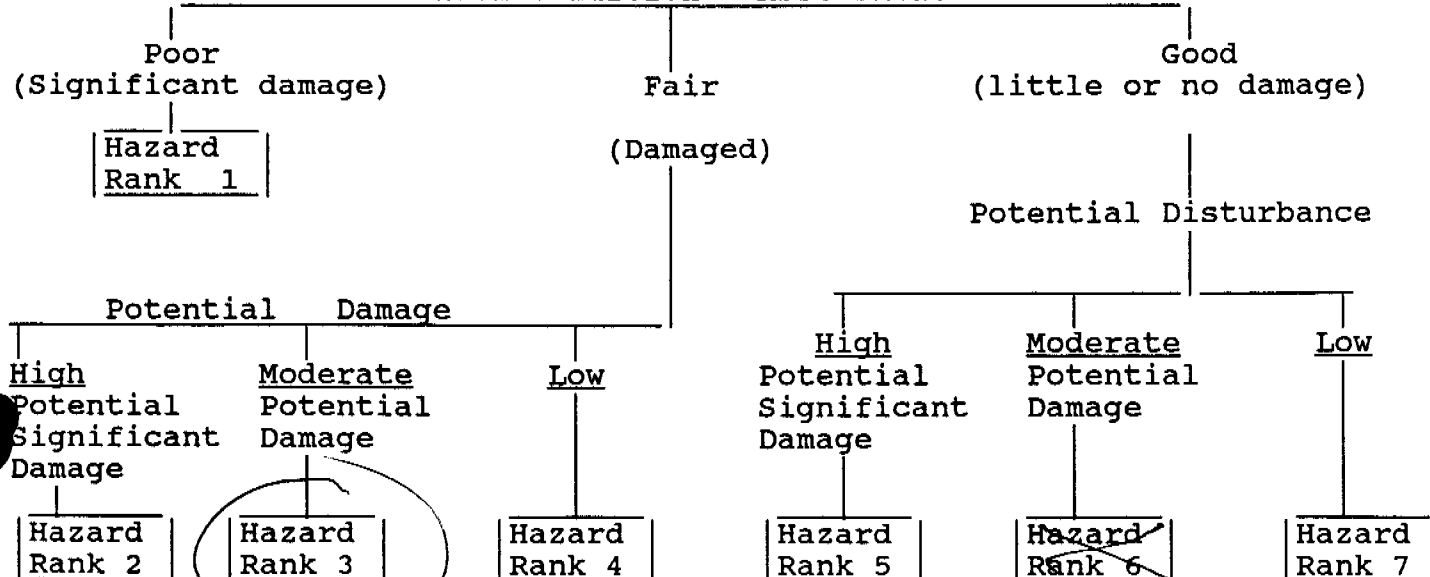
COMMENTS: Attached to fan
unit - pipe wrap closest
has greater vibration potential.

REMEDIAL ACTIONS
 isolate/restrict repair/cleanup

One mudded fitting on the floor
being stepped on. Enclose with
metal or wood cover or Remove
slightly damaged + friable

enclose encapsulate
remove O&M

ACBM Condition - Assessment



**PHYSICAL AND HAZARD ASSESSMENT OF FRIABLE
ACBM OR FRIABLE ASSUMED ACBM (FORM C)
(SEC. 763.93)**

OLA/EPA-C (NEW 8-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

				CDS CODE <div style="border: 1px solid black; padding: 2px;">04 61424 0437558</div>
SCHOOL PLEASANT VALLEY SENIOR HIGH SCHOOL				SCHOOL PHONE NUMBER <div style="border: 1px solid black; padding: 2px;">(916) 891-3050</div>
ADDRESS	(Number)	(Street)	(City)	(Zip Code)
	1475 EAST AVE.		CHICO	95926
BUILDING NAME UNIT F				INSPECTION DATE <div style="border: 1px solid black; padding: 2px;">03/30/88</div>
FUNCTIONAL SPACE ROOM 54				INDICATE LINE NO. FROM FORM B <div style="border: 1px solid black; padding: 2px;">14</div>
TYPE OF FRIABLE ACBM <input type="checkbox"/> SURFACING <input checked="" type="checkbox"/> TSI <input type="checkbox"/> MISCELLANEOUS				

1. CONDITION OF ACBM (Overall Rating)

CHECK APPROPRIATE BOX

<input type="checkbox"/> GOOD	<input type="checkbox"/> DAMAGED (Fair)	<input type="checkbox"/> SIGNIFICANTLY DAMAGED (Poor)
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2. POTENTIAL FOR DISTURBANCE (Overall Rating)

CHECK APPROPRIATE BOX

<input checked="" type="checkbox"/> LOW	<input type="checkbox"/> MODERATE (Potential for damage)	<input type="checkbox"/> HIGH (Potential for significant damage)
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3. HAZARD ASSESSMENT (Combine Ratings from Items 1 and 2 and Check Appropriate Box)

CONDITION OF ACBM	POTENTIAL FOR DISTURBANCE		
	LOW	MODERATE	HIGH
GOOD	1	2	3
DAMAGED	4 X	5	6
SIGNIFICANTLY DAMAGED	7	7	7

4. RECOMMENDED RESPONSE ACTION(S) AND COST(S)

RESPONSE ACTION	ESTIMATED COSTS
<input type="checkbox"/> A. OPERATION AND MAINTENANCE _____	\$ _____
<input checked="" type="checkbox"/> B. REPAIR _____	\$ 100.00
<input type="checkbox"/> C. ENCAPSULATION _____	\$ _____
<input type="checkbox"/> D. ENCLOSURE _____	\$ _____
<input checked="" type="checkbox"/> E. REMOVAL _____	\$ 1,600.00
TOTAL	\$ 1,700.00

5. NARRATIVE OF RECOMMENDED RESPONSE ACTIONS (Attach Additional Sheets if Necessary)

Describe process to be used for each response listed in item 4.

RESPONSE ACTION	SCHEDULE	
	START	COMPLETE
B. REPAIR DAMAGED TSI JOINT WITH WETTABLE CLOTH	1989	1989
E. REMOVE ALL MUDDIED TSI IN THIS ATTIC ACCORDING TO OLA SPECIFICATIONS	1989	1989

(14)

Inspection Form I-1

DISTRICT _____

Page _____ of _____

SCHOOL PV H.S.Date 3-30-88Building Unit #11 FInspector RBLocation Room 54 Storage Room
(functional area)HMS-~~PA~~-_____Material: Surfacing TSI Misc. 4" OD mudded pw on foam straight section
DescriptionAmount of Material (NF / F) 15 / 1 (ft²/lf) Assumed ACM: Y / N # of samples 0CONDITION: % damaged: Extent of damage:
0% <1% 1-10% 11-25% >25% none local distributedType damage: air; deterioration; water; physical; flakingDESCRIPTION: Pipewrap in excellent shape above storage room
leading to fan units. This was cut out by M+D, contractor of
somebody else. One exposed end cut out.

POTENTIAL FOR DISTURBANCE:

PREVENTATIVE MEASURES:

Accessibility: H M L
Vibration : H M L
Air Erosion : H M L
Water : H M L

1. Fix Leaks
2. Prevent water contact
3. Do not DCSG
4. Do not affix signs/deco's
5. Avoid contact

COMMENTS: Exposed end should
be rewrapped.

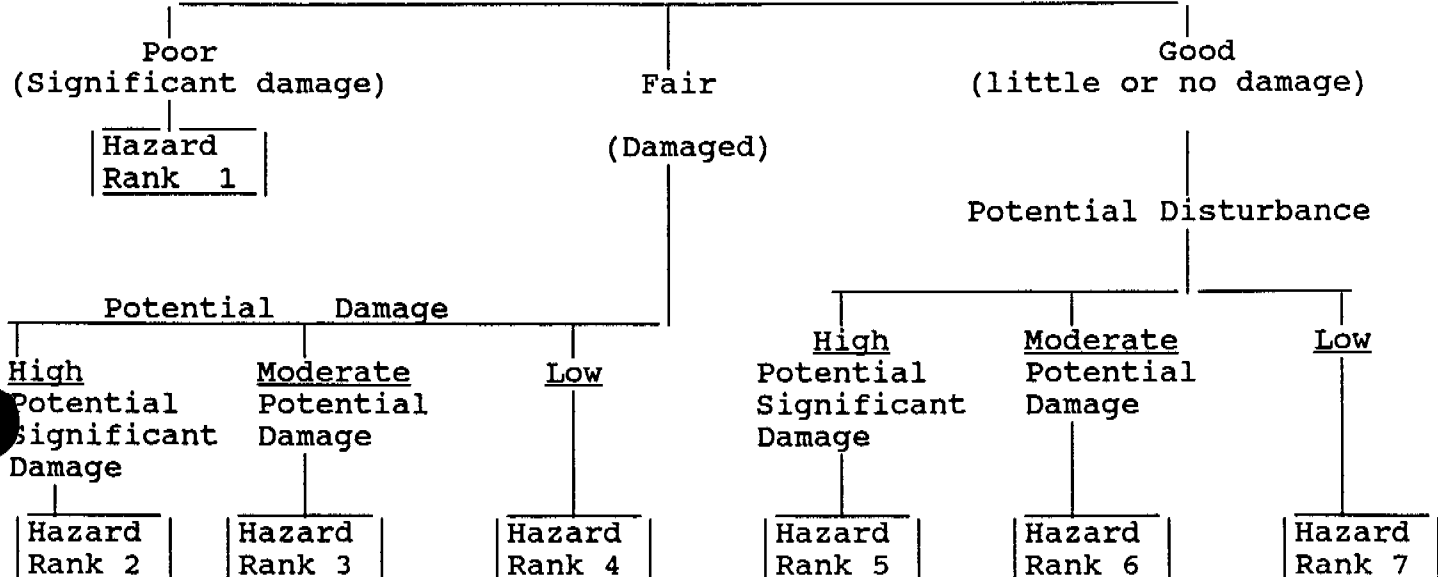
REMEDIAL ACTIONS

isolate/restrict repair/cleanup

enclose encapsulate

remove O&M

ACBM Condition - Assessment



**PHYSICAL AND HAZARD ASSESSMENT OF FRIABLE
ACBM OR FRIABLE ASSUMED ACBM (FORM C)
(SEC. 763.93)**

OLA/EPA-C (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

				CDS CODE <div style="border: 1px solid black; padding: 2px;">04 61424 0437558</div>
SCHOOL <div style="border: 1px solid black; padding: 2px;">PLEASANT VALLEY SENIOR HIGH SCHOOL</div>				SCHOOL PHONE NUMBER <div style="border: 1px solid black; padding: 2px;">(916) 891-3050</div>
ADDRESS	(Number)	(Street)	(City)	(Zip Code)
	<div style="border: 1px solid black; padding: 2px;">1475 EAST AVE.</div>		<div style="border: 1px solid black; padding: 2px;">CHICO</div>	<div style="border: 1px solid black; padding: 2px;">95926</div>
BUILDING NAME <div style="border: 1px solid black; padding: 2px;">UNIT F</div>				INSPECTION DATE <div style="border: 1px solid black; padding: 2px;">03/30/88</div>
FUNCTIONAL SPACE <div style="border: 1px solid black; padding: 2px;">ATTIC</div>				INDICATE LINE NO. FROM FORM B <div style="border: 1px solid black; padding: 2px;">15</div>
TYPE OF FRIABLE ACBM <input type="checkbox"/> SURFACING <input checked="" type="checkbox"/> TSI <input type="checkbox"/> MISCELLANEOUS				

1. CONDITION OF ACBM (Overall Rating)

CHECK APPROPRIATE BOX

☐ GOOD
 ☒ DAMAGED (Fair)
 ☐ SIGNIFICANTLY DAMAGED (Poor)

2. POTENTIAL FOR DISTURBANCE (Overall Rating)

CHECK APPROPRIATE BOX

☐ LOW
 ☐ MODERATE (Potential for damage)
 ☒ HIGH (Potential for significant damage)

3. HAZARD ASSESSMENT (Combine Ratings from Items 1 and 2 and Check Appropriate Box)

CONDITION OF ACBM	POTENTIAL FOR DISTURBANCE		
	LOW	MODERATE	HIGH
GOOD	1	2	3
DAMAGED	4	5	6 X
SIGNIFICANTLY DAMAGED	7	7	7

4. RECOMMENDED RESPONSE ACTION(S) AND COST(S)

RESPONSE ACTION	ESTIMATED COSTS
<input type="checkbox"/> A. OPERATION AND MAINTENANCE _____	\$ _____
<input type="checkbox"/> B. REPAIR _____	\$ _____
<input type="checkbox"/> C. ENCAPSULATION _____	\$ _____
<input type="checkbox"/> D. ENCLOSURE _____	\$ _____
<input checked="" type="checkbox"/> E. REMOVAL _____	\$ 1,800.00
TOTAL	\$ 1,800.00

5. NARRATIVE OF RECOMMENDED RESPONSE ACTIONS (Attach Additional Sheets if Necessary)

Describe process to be used for each response listed in item 4.

SCHEDULE	
START	COMPLETE

E. REMOVE DEBRIS FROM THIS AREA BY HEPA VACUUM AND WET-WIPING

1989 1989

HAZARD MANAGEMENT SERVICES, INC.

Inspection Form I-1

DISTRICT _____

Page _____ of 15SCHOOL PV HSDate 3-30-88Building Unit #4 FInspector RBLocation Attic space above offices
(functional area) Mens Locker RoomHMS-P011-18Material: Surfacing TST Misc. over 51, 52, 53Description Muddled pipewrap debris above offices under pipesAmount of Material (NF 1(F) 200 (ft²) lf)Assumed ACM: Y / N 15-20 # of samples 1CONDITION: % damaged: ~ 20 muddled joints

Extent of damage: _____

0% <1% 1-10% 11-25% >25% none local distributedType damage: air; deterioration; water; physical; flakingDESCRIPTION: Debris of muddled joint compound directly
under excellent wrapped pipes. Approx 20 muddled joints
all in excellent shape. This appears to probably be
present from installation.

POTENTIAL FOR DISTURBANCE:

PREVENTATIVE MEASURES:

Accessibility: H M L
 Vibration : H M L
 Air Erosion : H M L
 Water : H M L

1. Fix Leaks
2. Prevent water contact
3. Do not DCSG
4. Do not affix signs/deco's
5. Avoid contact

COMMENTS: Attic Space needs
debris to be cleaned up if
ACM is positive

REMEDIAL ACTIONS

isolate/restrict repair/cleanup

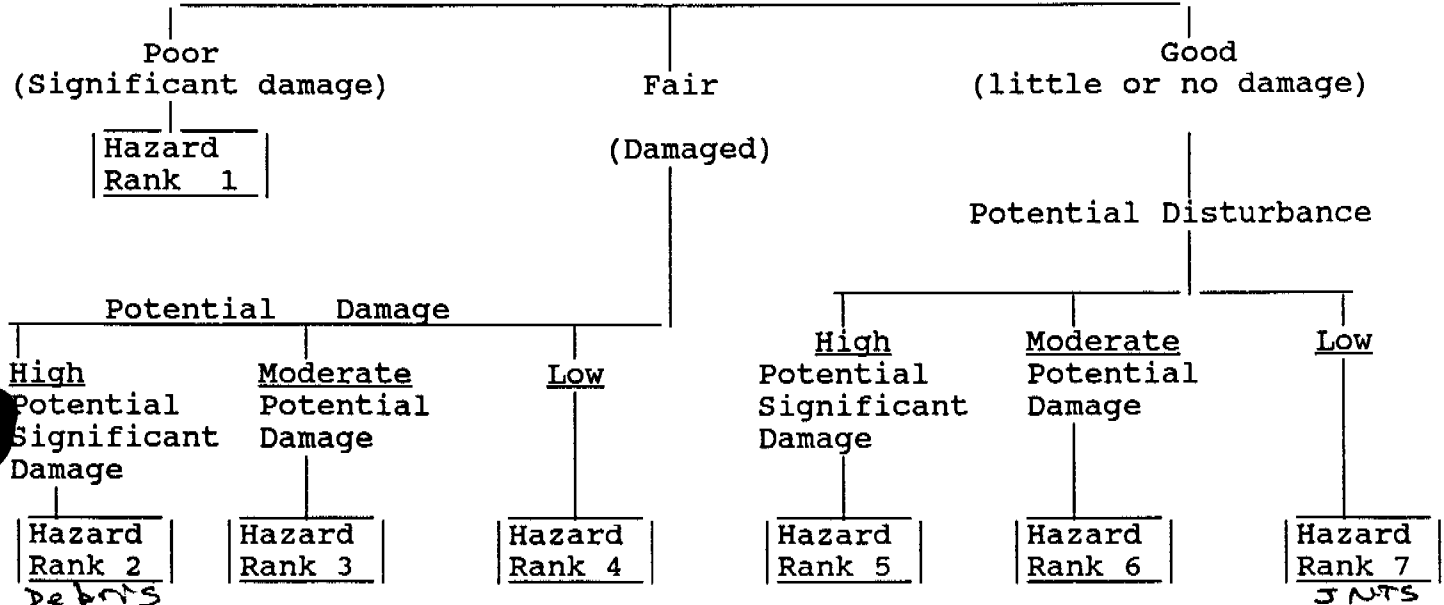
enclose

encapsulate

remove

O&M

ACBM Condition - Assessment



**PHYSICAL AND HAZARD ASSESSMENT OF FRIABLE
ACBM OR FRIABLE ASSUMED ACBM (FORM C)
(SEC. 763.93)**

OLA/EPA-C (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

				CDS CODE 04 61424 0437558
SCHOOL PLEASANT VALLEY SENIOR HIGH SCHOOL				SCHOOL PHONE NUMBER (916) 891-3050
ADDRESS	(Number) 1475 EAST AVE.	(Street) CHICO	(City) 95926	(Zip Code)
BUILDING NAME UNIT G				INSPECTION DATE 03/30/88
FUNCTIONAL SPACE GYM				INDICATE LINE NO. FROM FORM B 17
TYPE OF FRIABLE ACBM				
<input type="checkbox"/> SURFACING <input checked="" type="checkbox"/> TSI <input type="checkbox"/> MISCELLANEOUS				

1. CONDITION OF ACBM (Overall Rating)

CHECK APPROPRIATE BOX

☒ GOOD
 ☐ DAMAGED (Fair)
 ☐ SIGNIFICANTLY DAMAGED (Poor)

2. POTENTIAL FOR DISTURBANCE (Overall Rating)

CHECK APPROPRIATE BOX

☒ LOW
 ☐ MODERATE (Potential for damage)
 ☐ HIGH (Potential for significant damage)

3. HAZARD ASSESSMENT (Combine Ratings from Items 1 and 2 and Check Appropriate Box)

CONDITION OF ACBM	POTENTIAL FOR DISTURBANCE		
	LOW	MODERATE	HIGH
GOOD	1 X	2	3
DAMAGED	4	5	6
SIGNIFICANTLY DAMAGED	7	7	7

4. RECOMMENDED RESPONSE ACTION(S) AND COST(S)

RESPONSE ACTION	ESTIMATED COSTS
<input type="checkbox"/> A. OPERATION AND MAINTENANCE	\$
<input checked="" type="checkbox"/> B. REPAIR	\$ 250.00
<input type="checkbox"/> C. ENCAPSULATION	\$
<input type="checkbox"/> D. ENCLOSURE	\$
<input checked="" type="checkbox"/> E. REMOVAL	\$ 950.00
TOTAL	\$ 1,200.00

5. NARRATIVE OF RECOMMENDED RESPONSE ACTIONS (Attach Additional Sheets if Necessary)

	SCHEDULE	
	START	COMPLETE
B. REPAIR ALL TSI JOINTS WITH WETTABLE CLOTH AND COVER WITH PVC FITTINGS.	1989	1989
E. REMOVE ALL TSI JOINTS ACCORDING TO OLA SPECIFICATIONS	1989	1989

Describe process to be used for each response listed in item 4.

HAZARD MANAGEMENT SERVICES, INC.

Inspection Form I-1

(17)

DISTRICT _____

Page _____ of _____

SCHOOL PV H.S.Date 3-30-88Building Unit 6Inspector RBLocation Gymnasium
(functional area)

HMS- _____ - _____

Material: Surfacing TSI Misc. % Asbestos Assumed
Description 5" OD pipewrap mudded jointsAmount of Material (NF / F) 12 / .5 (ft² / lf) Assumed ACM: Y / N # of samples 0

CONDITION: % damaged:

Extent of damage:

<1% 1-10% 11-25% >25% none local distributed

Type damage: air; deterioration; water; physical; flaking

DESCRIPTION: Pipewrap is a foam with mud fittings.
One mud fitting was removed + some mud material visible

POTENTIAL FOR DISTURBANCE:

PREVENTATIVE MEASURES:

Accessibility: H M L
Vibration : H M L
Air Erosion : H M L
Water : H M L

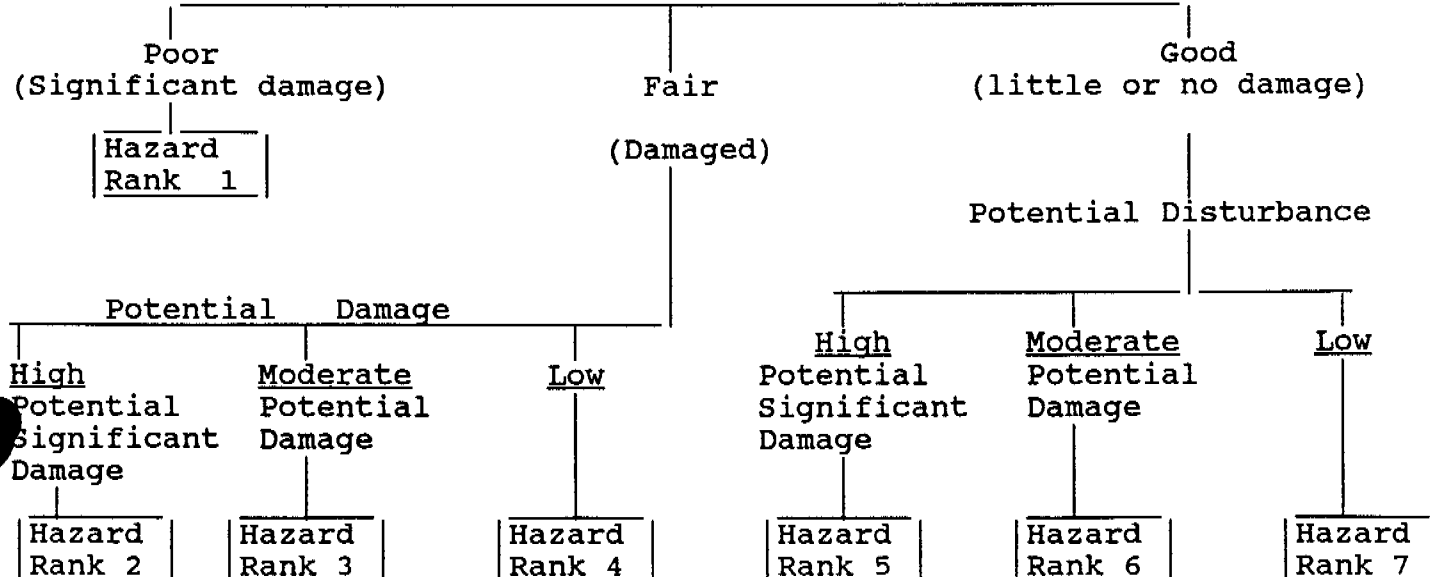
1. Fix Leaks
2. Prevent water contact
3. Do not DCSG
4. Do not affix signs/deco's
5. Avoid contact

COMMENTS: attached to fan unit.REMEDIAL ACTIONS
isolate/restrict repair/cleanup

enclose encapsulate

remove O&M

ACBM Condition - Assessment



OPERATIONS AND MAINTENANCE PROGRAM**(FORM D)**

OLA/EPA-D (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

				CDS CODE	04 61424 0437558
SCHOOL				SCHOOL PHONE NUMBER	
PLEASANT VALLEY HIGH SCHOOL				Ø16) 891-3050	
ADDRESS	(Number)	(Street)	(City)	(Zip Code)	
1475	East Ave.		Chico	95926	

For each area where friable ACM is present, assumed to be present, or is about to become present, write an operations and maintenance (O & M) program.

This O & M program must be developed for the entire school. The program must describe worker protection, initial and additional cleaning programs, building occupant protection (access control, signs, control of air movement, work practices, area cleaning, disposal methods), design and performance of other than small-scale, short-duration maintenance activities, and activities associated with minor and major fiber release episodes (Sec. 763.91).

IMPORTANT

Use Forms E through H to describe specific elements of this program. Use additional sheets when necessary.

FOR EACH AREA LISTED ON FORM C WHERE FRIABLE ACM IS PRESENT, OR IS ABOUT TO BECOME PRESENT, THE DISTRICT HAS ADOPTED THE FOLLOWING POLICIES WITH RESPECT TO WORKER PROTECTION, INITIAL AND SUBSEQUENT CLEANING, BUILDING OCCUPANT PROTECTION (ACCESS CONTROL, SIGNS, CONTROL OF AIR MOVEMENT, WORK PRACTICES, AREA CLEANING, DISPOSAL METHODS), DESIGN AND PERFORMANCE OF ALL ABATEMENT ACTIVITIES AND THOSE ACTIONS ASSOCIATED WITH MINOR AND MAJOR FIBER RELEASE EPISODES.

WORKER PROTECTION:

ALL MAINTENANCE AND CUSTODIAL WORKERS WILL RECEIVE A 2-HOUR ASBESTOS AWARENESS TRAINING WHICH WILL INCLUDE INFORMATION ON ASBESTOS, ITS USES, ITS PRODUCTS, WHERE IT WAS FOUND IN THE SCHOOL, HOW TO RECOGNIZE FRIABLE ASBESTOS AND DAMAGE AND WHO WILL TAKE CARE OF INCIDENTS AND QUESTIONS RELATING TO ASBESTOS, AND WHERE A COPY OF THE INSPECTION REPORT AND MANAGEMENT PLAN WILL BE KEPT.

CLEANING ACTIVITIES:

STEAM CLEANING OF CARPETS AND FLOORS WILL BE ALLOWED BY SCHOOL PERSONNEL WHO HAVE RECEIVED THE 2-HOUR TRAINING. ALL OTHER CLEANING EXERCISES WILL BE CONDUCTED BY EPA-ACCREDITED CONTRACTORS OR DISTRICT MAINTENANCE PERSONNEL UNDER THE DIRECTION OF THE DESIGNEE OR AN AHERA-ACCREDITED PROJECT DESIGNER.

BUILDING OCCUPANT PROTECTION:

ALL LOCAL, STATE AND FEDERAL REGULATIONS WILL BE FOLLOWED DURING CLEANING (OTHER THAN STEAM CLEANING) OR ABATEMENT PROJECTS. SECURITY OF THE AREA WILL BE PROVIDED, REQUIRED SIGNS WILL BE POSTED, AIR SYSTEMS WILL BE SHUT DOWN, SEALED OFF AND THE CONTAINMENT AREA WILL HAVE A NEGATIVE PRESSURE ESTABLISHED. WORK PRACTICES WILL BE AS REQUIRED BY STATE AND FEDERAL REGULATIONS AND DISPOSAL OF ASBESTOS WASTE WILL FOLLOW EPA AND CALIFORNIA DEPARTMENT OF HEALTH SERVICES REGULATIONS.

ABATEMENT AND FIBER RELEASE EPISODES:

ALL ABATEMENT PROJECTS AND ACTIVITIES RELATING TO FIBER RELEASE EPISODES WILL BE DESIGNED BY EPA-ACCREDITED PROJECT DESIGNERS MANAGED BY AN ASBESTOS PROJECT MANAGER AND AIR SAMPLES WILL BE TAKEN BY AN AIR SAMPLING PROFESSIONAL BEFORE REOCCUPANCY IS ALLOWED. THE ABATEMENT CONTRACTOR WILL UTILIZE EPA-ACCREDITED COMPETENT PERSONS AND WORKERS AND THE CONTRACT SHALL FOLLOW THE GUIDELINES IN OLA'S "MODEL CONTRACT SPECIFICATIONS" WHERE APPLICABLE. CLEARANCE AIR SAMPLES, TAKEN BEFORE REOCCUPANCY, WILL COMPLY WITH AHERA STANDARDS.

OPERATION AND MAINTENANCE PROGRAM
(FORM D CONTINUED)

RECORDKEEPING

All recordkeeping will be entered into the Management Plan at the District Office and each affected site within 30 days of occurrence. Recordkeeping will include:

1. Training Sessions - All training received by maintenance, custodial or designees, etc. will be documented in the Management Plan.
2. Fiber Release Episodes - All data accumulated during minor or major fiber release episodes will be entered into the Management Plan. This will include what happened, where it happened, who was present and documentation of remedial actions.
3. Abatement Projects - All abatement projects will be documented. This will include records of project design, contractor documents and clearance sample results as well as evidence of compliance with all regulatory requirements.
4. Periodic Surveillance - All data collected during scheduled or unscheduled observations of ACBM will be recorded in the plan. This includes 3-year accredited reinspection data.
5. Outside Service Contractors - All service contractors will receive notices that ACBM may be present in areas where they may be providing services. Data will be recorded in the plan showing that these personnel have been advised of the presence of ACBM.
6. Miscellaneous - Any other data produced which involves asbestos within our district will be included in the Management Plan.
7. Record of Remaining ACBM - As part of his recordkeeping function, the LEA designated person shall maintain the list of ACBM and assumed ACBM in an on-going current status by indicating on the Homogeneous Materials Record the removal of any ACBM or assumed ACBM. Thus, the list of ACBM and assumed ACBM will indicate at all times which materials remain after response actions are undertaken and completed.
8. Location of Management Plan - Inspection Reports and Management Plans for each site are located in the administrative offices of each school and a complete set is kept at the District.
9. Other Records - Records of all cleaning, preventative measures, annual notifications and work authorization will also become a part of the file.
10. Record Retention - All records will be kept on file at the district and at each site where ACBM is located and for three years after it has been removed.

**PERIODIC SURVEILLANCE PLAN
(FORM E)**

OLA/EPA-E (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

			CDS CODE
			04 61424 0437558
SCHOOL	PLEASANT VALLEY SENIOR HIGH SCHOOL		SCHOOL PHONE NUMBER
			(916) 891-3050
ADDRESS	(Number)	(Street)	(City)
1475 EAST AVE.			CHICO
			(Zip Code)
			95926

This plan must include a periodic surveillance of each building with friable ACM and nonfriable ACM at least every six months. The person performing periodic surveillance must receive two hours general training and 14 hours of additional training if work performed might disturb asbestos. The person will record the date, the area of inspection, the inspector's name, the description of any changes of the materials, and also visually inspect the areas (Sec. 763.92).

EACH BUILDING MATERIAL IDENTIFIED OR ASSUMED TO BE ASBESTOS IN THE ORIGINAL INSPECTION REPORTS PROVIDED BY HAZARD MANAGEMENT SERVICES, INC. (HMS, INC.) WILL BE RE-EVALUATED ON A REGULAR SIX-MONTH BASIS. THESE INSPECTIONS WILL BE CARRIED OUT BY PERSONNEL WHO HAVE RECEIVED, AT LEAST, THE MANDATORY TWO-HOUR AWARENESS TRAINING. IN ADDITION, HMS, INC. HAS INFORMED US TO BE AWARE DURING RECONSTRUCTION OR MAJOR MAINTENANCE ACTIVITIES THAT ACM MAY BE UNCOVERED. SCHOOL PERSONNEL WILL INSPECT ANY SUSPECT MATERIALS AND REQUEST ASSISTANCE FROM AN EPA-ACCREDITED PERSON, AS APPROPRIATE.

DURING THE SIX-MONTH EVALUATIONS, THE CONDITION OF EACH OF THE MATERIALS WILL BE NOTED AND ANY CHANGES WILL BE DOCUMENTED. THE PERSON CONDUCTING THIS SURVEILLANCE WILL RECORD THE DATE, HIS/HER NAME AND THE INSPECTION REPORT WILL BE MADE A PART OF THE MANAGEMENT PLAN FILE WITHIN 30 DAYS BY THE DISTRICT DESIGNEE. DURING THE COURSE OF THEIR REGULAR DUTIES, CUSTODIAL AND MAINTENANCE PERSONNEL WILL REPORT TO THE DESIGNEE ANY DETECTED CHANGES IN CONDITIONS OF ACM. THESE REPORTS WILL ALSO BECOME A PART OF THE MANAGEMENT PLAN RECORDS WITHIN 30 DAYS.

SURVEILLANCE REPORTS FROM TEACHERS AND OTHER STAFF WILL ALSO BE SOLICITED AND ENCOURAGED SO THAT EARLY REACTIONS TO DAMAGED OR DETERIORATING MATERIALS WILL BE POSSIBLE. THESE REPORTS SHOULD BE GIVEN TO THEIR SUPERVISORS OR DIRECTLY TO THE DISTRICT DESIGNEE.

THE FIRST SIX-MONTH REINSPECTION WILL TAKE PLACE SIX MONTHS AFTER IMPLEMENTATION OF THE MANAGEMENT PLAN BUT, IN NO CASE, WILL THE FIRST PERIODIC SURVEILLANCE OCCUR MORE THAN SIX MONTHS AFTER JULY 9, 1989.

PERIODIC SURVEILLANCE WILL BE PROVIDED BY DISTRICT PERSONNEL WHO HAVE RECEIVED, AT LEAST, THE TWO HOUR AWARENESS TRAINING. IF FRIABLE ASBESTOS MATERIALS MUST BE CONTACTED, THE INSPECTIONS WILL BE CONDUCTED BY PERSONNEL WHO HAVE RECEIVED THE ADDITIONAL 14 HOUR TRAINING AS REQUIRED BY AHERA.

REINSPECTION PLAN
(FORM F)

OLA/EPA-F (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

		CDS CODE	
		04 61424 0437558	
SCHOOL	PLEASANT VALLEY SENIOR HIGH SCHOOL		SCHOOL PHONE NUMBER
		(916)	891-3050
ADDRESS	(Number)	(Street)	(City)
	1475 EAST AVE.		CHICO
			(Zip Code)
			95926

The plan must meet the reinspection requirements of Section 763.85. This plan will include a reinspection every three years by an accredited inspector.

OUR DISTRICT WILL USE ONLY EPA-ACCREDITED AHERA INSPECTORS TO PERFORM THE THREE-YEAR REINSPECTIONS. THE DATA FROM THESE REINSPECTIONS WILL BECOME A PART OF THE MANAGEMENT PLAN WITHIN 30 DAYS. THE DATE, NAME OF THE INSPECTOR, ACCREDITATION DATA AND HIS/HER SIGNATURE WILL BE A PART OF THE REPORT. OUR FIRST THREE YEAR ACCREDITED REINSPECTION WILL OCCUR IN SEPTEMBER OF 1991.

**PARENT/EMPLOYEE NOTIFICATION PROGRAM
(FORM G)**

OLA/EPA-G (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

		CDS CODE	
		04 61424 0437558	
SCHOOL		SCHOOL PHONE NUMBER	
PLEASANT VALLEY SENIOR HIGH SCHOOL		(916) 891-3050	
ADDRESS	(Number)	(Street)	(City)
	1475 EAST AVE.		CHICO
			(Zip Code)
			95926

In the discussion section of this form, information should be included that describes steps taken to inform workers and building occupants, or their legal guardians, about inspections, response actions, and post response action activities, including periodic reinspection and surveillance activities that are planned or in progress. Notifications must be made once each school year (Sec. 763.84).

FOLLOWING IS A NOTICE THAT WILL BE PROVIDED TO INFORM WORKERS, BUILDING OCCUPANTS AND PARENTS OF THE ITEMS REQUIRED IN THE ASBESTOS HAZARD EMERGENCY RESPONSE ACT.

"TO: PARENTS, PTA, TEACHERS, STAFF
FROM: AHERA DESIGNEE
RE: SCHOOL ASBESTOS INSPECTIONS AND MANAGEMENT PLANS

OUR DISTRICT HAS HIRED HAZARD MANAGEMENT SERVICES, INC. (HMS, INC.), A CONSULTING COMPANY, TO COMPLETE THE EPA REQUIREMENTS TO REINSPECT ITS SCHOOL(S) FOR ASBESTOS AND PRODUCE A MANAGEMENT PLAN FOR THE CONTROL OF ITS ASBESTOS. THE MANAGEMENT PLAN INCLUDES THE INSPECTIONS, RESPONSE ACTIONS, POST RESPONSE ACTION ACTIVITIES AND PERIODIC REINSPECTION AND OPERATIONS AND MAINTENANCE ACTIVITIES. IT WILL ALSO INCLUDE THE NAMES OF THE INSPECTOR, THE MANAGEMENT PLANNER, OLA'S MANAGEMENT PLAN REQUIRED FORMS AND THE DOCUMENTATION OF ALL SIGNIFICANT EVENTS INCLUDING ANY FIBER RELEASE EPISODES. ALL DATA RELATING TO ASBESTOS ACTIVITIES WILL BE ENTERED INTO THE PLAN WITHIN 30 DAYS OF THE EVENT.

A COPY OF THE DISTRICT'S ENTIRE PLAN IS AVAILABLE IN THE DISTRICT OFFICE AT THE OFFICE OF THE DESIGNEE. INDIVIDUAL PLANS ARE AVAILABLE AT THE PRINCIPAL'S OFFICE AT EACH SITE."

THE INITIAL NOTIFICATION WILL BE MADE WHEN OUR MANAGEMENT PLAN IS COMPLETED AND SUBMITTED TO THE STATE. ANNUAL NOTIFICATIONS WILL BE MADE, THEREAFTER, IN OCTOBER OF EACH YEAR.

THE MANAGEMENT PLAN(S) WILL BE AVAILABLE FOR REVIEW DURING REGULAR BUSINESS HOURS. A NOMINAL DUPLICATING FEE MAY BE CHARGED FOR THOSE WHO WISH TO OBTAIN COPIES OF THE PLANS.

**EVALUATION OF RESOURCES NEEDED
(FORM H)**

OLV/EPA-H (NEW 6-88)

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF LOCAL ASSISTANCE

SCHOOL				CDS CODE	
PLEASANT VALLEY SENIOR HIGH SCHOOL				04 61424 0437558	
ADDRESS				SCHOOL PHONE NUMBER	
(Number) 1475 EAST AVE.				(City) CHICO	
(Street)				(Zip Code) 95926	
ESTIMATED TOTAL COST OF RESPONSE ACTIONS		ESTIMATED TOTAL COST OF INSPECTIONS		ESTIMATED TOTAL COST OF MANAGEMENT PLAN	
\$ 14,500.00		\$ 2,257.95		\$ 2257.95	

Discussion should include such information as funding required, equipment, facilities, support personnel (Sec. 763.93).

THE FIGURE FOR ESTIMATED TOTAL COST FOR RESPONSE ACTIONS INCLUDES COSTS FOR REMOVAL, ENCAPSULATION, ENCLOSURE, REPAIRS, AND OPERATIONS AND MAINTENANCE ACTIVITIES THAT PROTECT HUMAN HEALTH AND THE ENVIRONMENT FROM FRIABLE ACBM. OPERATIONS AND MAINTENANCE INCLUDES A PROGRAM OF WORK PRACTICES, INCLUDING PERIODIC SURVEILLANCE, TO MAINTAIN ACBM IN GOOD CONDITION, ENSURE CLEAN-UP OF FIBERS PREVIOUSLY RELEASED, AND TO PREVENT FURTHER RELEASE BY MINIMIZING AND CONTROLLING FIBER RELEASES.

COSTS: FOLLOWING ARE THE ITEMS FIGURED INTO THE ESTIMATE FOR RESPONSE ACTIONS - ADMINISTRATION, MAINTENANCE, PERIODIC SURVEILLANCE, CLEANING REPAIRS, ABATEMENT, REINSPECTION.*

INSPECTIONS: COSTS ARE ONE-HALF THE TOTAL CHARGED BY HAZARD MANAGEMENT SERVICES, INCORPORATED (HMS, INC.) FOR THE INSPECTION AND MANAGEMENT PLAN.

MANAGEMENT PLANS: COSTS ARE ONE-HALF THE TOTAL CHARGED BY HMS, INC. FOR THE INSPECTION AND MANAGEMENT PLANS.

*WHERE NO OTHER RESPONSE ACTIONS ARE REQUIRED (NO FRIABLE MATERIALS), THE "ESTIMATE FOR RESPONSE ACTIONS" INCLUDE CALCULATED COSTS FOR FIVE NON-ACCREDITED AND ONE ACCREDITED RE-INSPECTIONS.