Bulk Material Analysis Report

Client: Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904139
Sample Number: CPM - 200B

Analyst: DN

Location: Chico Unified School District/Chapman.

Gross Description: White floor tile-like material.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT: Non-Det. %
- Chrysotile
- Amosite
- Crocidolite

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT: 1-5 %
- Cellulose
- Fibrous Glass
- Polyethylene

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT: 95-99 %
- Unspecified Particulates

Supervisor: David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES

Analytical method: 40 CFR 763, Subpart F, Appendix A (AHERA)
## SIX-MONTH SURVEILLANCE

**DISTRICT**  CHICO UNIFIED SCHOOL DISTRICT  
**DATE**  12/18/89  
**SCHOOL**  Chapman Elementary School  
**INSPECTOR**  Robert Peters  

<table>
<thead>
<tr>
<th>BLDG.</th>
<th>HOMOG. MAT. #</th>
<th>ASBESTOS MATERIAL</th>
<th>LOCATION</th>
<th>CONDITION: CODE &amp; COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>TSI 75-80</td>
<td></td>
<td>Room 7 Water heater</td>
<td>(7) Removed ✓</td>
</tr>
<tr>
<td>A</td>
<td>PW St 85-90</td>
<td></td>
<td>Room 5 Kitchen</td>
<td>(7) Removed ✓</td>
</tr>
<tr>
<td>A</td>
<td>PW CNR 75-80</td>
<td></td>
<td>Room 7</td>
<td>(7) Removed ✓</td>
</tr>
<tr>
<td>A</td>
<td></td>
<td></td>
<td>Room 7 Transite Pipe Assumed</td>
<td>(7) Removed ✓</td>
</tr>
<tr>
<td>A</td>
<td>9&quot; VFT 10-15</td>
<td>Room 5 Brown</td>
<td>(1) Good (5) Over ✓</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>9&quot; VFT 10-15</td>
<td>Room 4 Entrance</td>
<td>(1) Good ✓</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>9&quot; VFT 10-15</td>
<td>Restroom 1 Acid</td>
<td>(7) Removed ✓</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>12&quot; VFT 1-5</td>
<td>MPR Blue</td>
<td>(1) Good ✓</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>A.C. Plaster 1-5</td>
<td>Room 3 MPR</td>
<td>(7) Removed ✓</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>A.C. Plaster 1-5</td>
<td>Rooms 1,8,2 A.C.</td>
<td>(7) Removed ✓</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>PW Jnt 1-5</td>
<td>Room 4 Storage</td>
<td>Locked</td>
<td></td>
</tr>
</tbody>
</table>

### CONDITION CODES

**GENERAL CONDITION:**  
(1) GOOD  
(2) DAMAGED  
(3) SIGNIFICANTLY DAMAGED (25% OR MORE)

**CHANGE IN CONDITION:**  
(4) NO  
(5) YES (IF YES, EXPLAIN UNDER COMMENTS)

**ABATED:**  
(6) REPAIRED  
(7) REMOVED  
(8) ENCAPSULATED  
(9) ENCLOSED  
(10) ISOLATED & RESTRICTED

**MISC:**  
(11) INACCESSIBLE, NO SURVEILLANCE DATA  
(12) OTHER (EXPLAIN UNDER COMMENTS)
# SIX-MONTH SURVEILLANCE

**DISTRICT:** CHICO UNIFIED SCHOOL DISTRICT  
**DATE:** 12/18/89  
**SCHOOL:** Chapman Elementary School  
**INSPECTOR:** Robert Peters

<table>
<thead>
<tr>
<th>BLDG.</th>
<th>HOMOG. MAT. #</th>
<th>ASBESTOS MATERIAL</th>
<th>LOCATION</th>
<th>CONDITION: CODE &amp; COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>PW Str</td>
<td>5-10</td>
<td>Room 4 storage</td>
<td>Locked ✓</td>
</tr>
<tr>
<td>A</td>
<td>PW Str</td>
<td>5-10</td>
<td>Pantry</td>
<td>Locked ✓</td>
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<tr>
<td>B</td>
<td>9&quot; VFT</td>
<td>10-15</td>
<td>Room 14 Gray</td>
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</tr>
<tr>
<td>B</td>
<td>9&quot; VFT</td>
<td>10-15</td>
<td>Room 13, 15, 16</td>
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</tr>
<tr>
<td>B</td>
<td>Transite Panel</td>
<td>Assumed</td>
<td>Exterior</td>
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<tr>
<td>C</td>
<td>A.C. Plaster</td>
<td>1-5</td>
<td>Room 14, 13 Staff Restrooms</td>
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<tr>
<td>C</td>
<td>9&quot; VFT</td>
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<td>Room 9-12 15-16</td>
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</tr>
<tr>
<td>D</td>
<td>Mud jnt</td>
<td>65-80</td>
<td>Room 15 Boiler room</td>
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<tr>
<td>D</td>
<td>Mud jnt</td>
<td>75-80</td>
<td>Room 15 Boiler room</td>
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<tr>
<td>D</td>
<td>PW str</td>
<td>55-60</td>
<td>Room 15 Boiler room</td>
<td>(7) Removed</td>
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</tbody>
</table>

## CONDITION CODES

**GENERAL CONDITION:**  
(1) GOOD  
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**ABATED:**  
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(7) REMOVED  
(8) ENCAPSULATED  
(9) ENCLOSED  
(10) ISOLATED & RESTRICTED

**MISC:**  
(11) INACCESSIBLE, NO SURVEILLANCE DATA  
(12) OTHER (EXPLAIN UNDER COMMENTS)
**SIX-MONTH SURVEILLANCE**

**DISTRICT**: CHICO UNIFIED SCHOOL DISTRICT  
**SCHOOL**: Chapman Elementary School  
**DATE**: 12/18  
**INSPECTOR**: Robert Peters

<table>
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<tr>
<th>BLDG.</th>
<th>HOMOG.</th>
<th>ASBESTOS MATERIAL</th>
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<tr>
<td>D</td>
<td>Boardon B/R</td>
<td>85-90</td>
<td>Room 15</td>
<td>Boiler room (7) Removed</td>
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<tr>
<td>D</td>
<td>A.C. Plaster</td>
<td>1-5</td>
<td>Room 15, 16</td>
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<tr>
<td>E</td>
<td>9&quot; VFT</td>
<td>10-15</td>
<td>Room 17, 18</td>
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<tr>
<td>F</td>
<td>9&quot; VFT</td>
<td>1-5</td>
<td>Room 3 (classroom #68)</td>
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<tr>
<td>F</td>
<td>Transite Panel</td>
<td>Assumed</td>
<td>Room 1 (classroom #5,7)</td>
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<tr>
<td>G</td>
<td>Mud jnt</td>
<td>1-5</td>
<td>Room 3, 4, 2, 1</td>
<td>(1) Good</td>
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<td>Transite Panel</td>
<td>Assumed</td>
<td>Room 1, 2, 3, 4</td>
<td>(1) Good</td>
</tr>
</tbody>
</table>

**CONDITION CODES**

GENERAL CONDITION:  
(1) GOOD  (2) DAMAGED  (3) SIGNIFICANTLY DAMAGED (25% OR MORE)

CHANGE IN CONDITION:  
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ABATED:  
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MISC:  
(11) INACCESSIBLE, NO SURVEILLANCE DATA  (12) OTHER (EXPLAIN UNDER COMMENTS)
UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [State Manifest Document Number: 88269058]

2. Page 1

3. Generator's Name and Mailing Address

4. Generator's Phone Number

5. Transporter 1 Company Name

6. US EPA ID Number [State Transporter's ID: 769-7-49-7]

7. Transporter 2 Company Name

8. US EPA ID Number [State Transporter's ID: 769-7-49-7]

9. Designated Facility Name and Site Address

10. US EPA ID Number [State Facility's ID: 769-7-49-7]

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)


a. State EPA/Other

b. State EPA/Other

c. State EPA/Other

d. State EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a. b.

c. d.

16. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

17. Transporter 1 Acknowledgement of Receipt of Materials

18. Transporter 2 Acknowledgement of Receipt of Materials

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name Signature Month Day Year

Do Not Write Below This Line Yellow. TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
**UNIFORM HAZARDOUS WASTE MANIFEST**

**1. Generator's US EPA ID No.**

**2. Page 1**

**3. Generator's Name and Mailing Address**

Chico Unified School District (Chapman)

**4. Generator's Phone**

**5. Transporter 1 Company Name**

ARS, Inc.

**6. US EPA ID Number**

CAXG813634892

**7. Transporter 2 Company Name**

**8. US EPA ID Number**

**9. Designated Facility Name and Site Address**

Anderson Solid Waste
Cambridge Rd.
Anderson, CA 95007

**10. US EPA ID Number**

CAXG81388952

**11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)**

- Asbestos Hazardous Waste Solid
  - NOS, ORMS-RG, NA9188

<table>
<thead>
<tr>
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<tbody>
<tr>
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<tr>
<td>2</td>
<td>State 151</td>
<td>EPA/Other</td>
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<td>EPA/Other</td>
</tr>
</tbody>
</table>

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**Printed/Typed Name**

**Signature**

**Date**

**17. Transporter 1 Acknowledgement of Receipt of Materials**

<table>
<thead>
<tr>
<th>Printed/Typed Name</th>
<th>Signature</th>
<th>Month Day Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alan Otto</td>
<td>Alan Otto</td>
<td>1/01/99</td>
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</table>

**18. Transporter 2 Acknowledgement of Receipt of Materials**

<table>
<thead>
<tr>
<th>Printed/Typed Name</th>
<th>Signature</th>
<th>Month Day Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scott Risberg</td>
<td>Scott Risberg</td>
<td>1/01/99</td>
</tr>
</tbody>
</table>

**19. Discrepancy Indication Space**

**20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.**

<table>
<thead>
<tr>
<th>Printed/Typed Name</th>
<th>Signature</th>
<th>Month Day Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>David C. Thistle</td>
<td>David C. Thistle</td>
<td>1/01/99</td>
</tr>
</tbody>
</table>

Do Not Write Below This Line

**Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS**
<table>
<thead>
<tr>
<th>3. Generator's Name and Mailing Address</th>
<th>4. Generator's Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chico Unified School District (Chapman)</td>
<td>(916) 347-5241</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Transporter 1 Company Name</th>
<th>6. US EPA ID Number</th>
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<tbody>
<tr>
<td>ARS, Inc.</td>
<td>CAD981634892</td>
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</table>

<table>
<thead>
<tr>
<th>7. Transporter 2 Company Name</th>
<th>8. US EPA ID Number</th>
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<tbody>
<tr>
<td>Anderson Solid Waste</td>
<td>CAD981389052</td>
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<table>
<thead>
<tr>
<th>9. Designated Facility Name and Site Address</th>
<th>10. US EPA ID Number</th>
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<tr>
<td>Anderson Solid Waste</td>
<td>(916) 347-5241</td>
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<thead>
<tr>
<th>11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)</th>
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<tbody>
<tr>
<td>Asbestos Hazardous Waste Solid --- MOPS, ORM-S-RQ, NA9188</td>
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<table>
<thead>
<tr>
<th>16. Special Handling Instructions and Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do not break or puncture bags</td>
</tr>
</tbody>
</table>

**GENERATOR'S CERTIFICATION:**
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**Transporter 1 Acknowledgement of Receipt of Materials**

**Transporter 2 Acknowledgement of Receipt of Materials**
UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator’s US EPA ID No.
   2. Page 1
   Information in the shaded areas is not required by Federal law.
   3. Generator’s Name and Mailing Address
      Unified School District (Chapman)
      163 Pitzer St.
      4. Generator’s Phone

5. Transporter 1 Company Name
   ARC, Inc.
   6. US EPA ID Number
   CAD981634892
   7. Transporter 2 Company Name

9. Designated Facility Name and Site Address
   Anderson Solid Waste
   Cambridge Rd.
   Anderson, CA 95007
   10. US EPA ID Number
   CAD981380952
   11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
      Asbestos Hazardous Waste Solid NOS, ORM-SQ, NA9188

12. Containers
    No. Type
    0

13. Total
    Quantity
    0

14. Unit
    Wt/Vol.
    p

15. Special Handling Instructions and Additional Information

16. GENERATOR’S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

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Printed/Typed Name
Robert Peterson
Signature
Robert Peterson
Month Day Year
17. Transporter 1 Acknowledgement of Receipt of Materials
   Printed/Typed Name
   Kenneth Jones
   Signature
   Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials
   Printed/Typed Name
   Signature
   Month Day Year
19. Discrepancy Indication Space
   Printed/Typed Name
   Signature
   Month Day Year

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
   Printed/Typed Name
   Signature
   Month Day Year

Do Not Write Below This Line

YELLOW, GENERATOR RETAINS
## Uniform Hazardous Waste Manifest

1. Generator's US EPA ID No. 89506001
2. Information in the shaded areas is not required by Federal law.

### 3. Generator's Name and Mailing Address
- Chico Unified School District (Chapman)
- 1163 East 7th St

### 4. Generator's Phone

### 5. Transporter 1 Company Name
- ABS INC
- 801 CEDAR ST

### 6. US EPA ID Number
- 14481194214348137

### 7. Transporter 2 Company Name
- Anderson Solid Waste
- Cambridge Rd

### 8. US EPA ID Number
- 98188952

### 9. Designated Facility Name and Site Address
- Anderson Solid Waste
- 43 Anderson Rd

### 10. US EPA ID Number
- 98188952

### 11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)
- Asbestos, Hazardous waste solid
- NOS. OR M-0191988

### 12. Container Type
- SOV

### 13. Total Quantity
- 91 cm x 219.90

### 14. Unit
- P

### J. Additional Descriptions for Materials Listed Above
- Do not break or puncture bags

15. Special Handling Instructions and Additional Information

---

16. **Generator's Certification:**

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Printed/Typed Name: Dennis H. Leung
Signature: [Signature]
Month Day Year: 2/12/89

Printed/Typed Name: Henry G. Gubler
Signature: [Signature]
Month Day Year: 2/26/89

Printed/Typed Name: Charles E. Riff
Signature: [Signature]
Month Day Year: 5/20/89

---

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: D.F. 3rd
Signature: [Signature]
Month Day Year: 5/20/89
### UNIFORM HAZARDOUS WASTE MANIFEST

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<th>Details</th>
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<tr>
<td>A. State Manifest Document Number</td>
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<tr>
<td>B. State Generator's ID</td>
<td>H.1692181631489124</td>
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<td>C. State Generator's ID</td>
<td>H.1692181631489124</td>
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<tr>
<td>D. Transporter's Phone</td>
<td>409-3428</td>
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<tr>
<td>E. State Transporter's ID</td>
<td>409-3428</td>
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<tr>
<td>F. Transporter's Phone</td>
<td>C.1692181631489124</td>
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<tr>
<td>G. State Facility’s ID</td>
<td>C.1692181631489124</td>
</tr>
<tr>
<td>H. Facility’s Phone</td>
<td>C.1692181631489124</td>
</tr>
<tr>
<td>5. Transporter 1 Company Name</td>
<td>AHS INC</td>
</tr>
<tr>
<td>6. US EPA ID Number</td>
<td>C1692181631489124</td>
</tr>
<tr>
<td>7. Transporter 2 Company Name</td>
<td></td>
</tr>
<tr>
<td>8. US EPA ID Number</td>
<td></td>
</tr>
<tr>
<td>9. Designated Facility Name and Site Address</td>
<td>Anderson Solid Waste</td>
</tr>
<tr>
<td>10. US EPA ID Number</td>
<td>981388752</td>
</tr>
<tr>
<td>11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)</td>
<td>Asbestos Hazardous Waste solid</td>
</tr>
<tr>
<td>12. Containers No.</td>
<td>50Y</td>
</tr>
<tr>
<td>13. Total Quantity</td>
<td>20100</td>
</tr>
<tr>
<td>14. Unit Wt/Vol</td>
<td>0</td>
</tr>
<tr>
<td>15. Special Handling Instructions and Additional Information</td>
<td>Do not break or puncture bags</td>
</tr>
</tbody>
</table>

### GENERATOR’S CERTIFICATION
I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [Signature] 1/17/11

[Transporter’s Name] 1/17/11

Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature] 1/17/11

DHS 8022 A (1/86)
EPA 8700–22
(Rev. 9-98) Previous editions are obsolete.
UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. 04981411571566000000

2. Page 1 of 1

3. Generator's Name and Mailing Address
   Chico Unified School District (Chapman)
   1163 East 7th St.

4. Generator's Phone ( )

5. Transporter 1 Company Name
   ARS, Inc.

6. US EPA ID Number 109999841344892

7. Transporter 2 Company Name
   ARS, Inc.

8. US EPA ID Number

9. Designated Facility Name and Site Address
   Anderson Solid Waste
   Cambridge Blvd
   Anderson CA 95507

10. US EPA ID Number 149999881389992

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
   a. Asbestos, Hazardous Waste/Solid
   b. NOS, ORM-R QNA91788
   c. ADR 100000

    Type
    Quantity
    Weight / Vol.
    State
    EPA/Other

13. Total

14. Handling Codes for Wastes Listed Above
   a. 03
   b. d.

15. Special Handling Instructions and Additional Information
   Do not break or puncture bags

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

   If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

   Printed/Typed Name
   Signature
   Robert Peters

   Printed/Typed Name
   Signature
   John Smith

   Printed/Typed Name
   Signature
   Charlie E. Ruff

   Printed/Typed Name
   Signature
   Bullock

DHS 8022 A (1/88)
EPA 8700-92
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generator's Name and Mailing Address</td>
<td>Chico Unified School District (Chapman)</td>
</tr>
<tr>
<td>Transporter 1 Company Name</td>
<td>ARS, INC.</td>
</tr>
<tr>
<td>Transporter 2 Company Name</td>
<td>CAMBRIDGE EDA</td>
</tr>
<tr>
<td>Designated Facility Name and Site Address</td>
<td>Anderson Solid Waste, Cambridge, CA 95017</td>
</tr>
<tr>
<td>US DOT Description</td>
<td>Asbestos, Hazardous Waste, Solid</td>
</tr>
<tr>
<td>Containers No.</td>
<td>3</td>
</tr>
<tr>
<td>Total Quantity</td>
<td>0.00</td>
</tr>
<tr>
<td>Handling Codes</td>
<td>03</td>
</tr>
<tr>
<td>Special Handling Instructions and Additional Information</td>
<td>Do not break or puncture bags</td>
</tr>
</tbody>
</table>

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: **Ricelle Peters**  
Signature: **Robert Peters**  
Month: **11**  
Day: **11**  
Year: **1998**

Printed/Typed Name: **Transporter 1**  
Signature: **Transporter Name**  
Month: **01**  
Day: **11**  
Year: **1998**

Printed/Typed Name: **Transporter 2**  
Signature: **Transporter Name**  
Month: **01**  
Day: **11**  
Year: **1998**

Printed/Typed Name: **Facility Owner or Operator**  
Signature: **Signature**  
Month: **01**  
Day: **11**  
Year: **1998**

**YELLOW: GENERATOR RETAINS**
Instructions on the Back

2. Page 1

3. Generator's Name and Mailing Address
   CHICO UNIFIED SCHOOL DISTRICT
   1163 EAST SEVENTH STREET
   (925) 357-1400

4. Generator's Phone (925) 357-1400

5. Transporter 1 Company Name
   AC - INC
   171 AC 1912 11111414990

6. US EPA ID Number
   ACF, INC
   1111912111119911

7. Transporter 2 Company Name
   ACF, INC
   1111912111119911

8. US EPA ID Number
   ACF, INC
   1111912111119911

9. Designated Facility Name and Site Address
   ANDESON SOLID WASTE
   CAMBRIDGE RD
   ANDESON CA 95607
   1111912111119911

10. US EPA ID Number
    1111912111119911

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
    a. ANDESON HAZARDOUS WASTE SOL
       N9L, ORME-RQ, 9H11B3
    b. 
    c. 
    d. 

12. Containers
    No. Type
    State 151 EPA/Other
    State
    State EPA/Other
    State
    State EPA/Other
    EPA/Other

13. Total Quantity
    
14. Unit Vol/Wt
    
15. Waste No.
    
16. Handling Codes for Wastes Listed Above
    a. 03
    b. 
    c. 
    d. 

17. Transporter 1 Acknowledgement of Receipt of Materials

18. Transporter 2 Acknowledgement of Receipt of Materials

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19

Printed/Typed Name: Signature: Month Day Year

In case of an emergency or spill, call the national response center 1-800-424-8802.
Within California call 1-800-852-5650.
<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Generator's US EPA ID No.</td>
<td>88017342</td>
</tr>
<tr>
<td>3. Generator's Name and Mailing Address</td>
<td>CHICO UNIFIED SCHOOL DISTRICT (CHAIRMAN) 1127 E. SEVENTH STREET 95928-5999</td>
</tr>
<tr>
<td>4. Generator's Phone</td>
<td>(530) 895-2323</td>
</tr>
<tr>
<td>5. Transporter 1 Company Name</td>
<td>J.S. W.</td>
</tr>
<tr>
<td>6. US EPA ID Number</td>
<td>195106621618</td>
</tr>
<tr>
<td>7. Transporter 2 Company Name</td>
<td>J.S. W.</td>
</tr>
<tr>
<td>8. US EPA ID Number</td>
<td>195106621618</td>
</tr>
<tr>
<td>9. Designated Facility Name</td>
<td>ANGELOON SOIL WASTE</td>
</tr>
<tr>
<td>10. US EPA ID Number</td>
<td>195106621618</td>
</tr>
<tr>
<td>11. US DOT Description</td>
<td>ANGELOON SOIL WASTE</td>
</tr>
<tr>
<td>12. Containers No.</td>
<td>5</td>
</tr>
<tr>
<td>13. Total Quantity</td>
<td>151</td>
</tr>
<tr>
<td>14. Unit Wt/ Vol</td>
<td>151</td>
</tr>
<tr>
<td>15. Special Handling Instructions and Additional Information</td>
<td>DO NOT BREAK OR PUNCTURE CANS/CONTAINERS</td>
</tr>
<tr>
<td>16. GENERATOR'S CERTIFICATION</td>
<td>I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.</td>
</tr>
</tbody>
</table>

Printed/Typed Name: [Signature]

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [Signature]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: [Signature]

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [Signature]

Month Day Year

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS
## General Data

**Local Education Agency**
- Chico Unified School District

**School Name**
- Chapman Elementary School

**Address**
- 1071 East 16th Street, Chico, 95928

**School Phone Number**
- (916) 891-3100

**CDS Code**
- 04 61424 6002968

**School Enrollment**
- 589

**Number of School Employees**
- 54

**Number of Buildings at the School**
- 1

## LEA AHERA Designee

**Name**
- Paul B. Graves

**Address**
- 4306 Kathy Lane, Chico, 95926

**Phone Number**
- (916) 345-8192

**Training Course(s) and Date(s)**
- Ahera Designee Training by HMS, Inc. on January 19, 1989

**Total Training Hours**
- 6

## Management Planner

**Name**
- James E. Sharp, Sr.

**Address**
- P.O. Box 6848, Modesto, CA 95355

**Phone Number**
- (209) 577-8209

**Training Agency**
- UC Berkeley, P.A.I.C.

**Accreditation Number**
- 4

## Documents Attached

- 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.

## Signatures

**Management Planner Signature**
- [Signature]
- Date: 3-15-89

**LEA Designee Signature**
- [Signature]
- Date: 4-20-89

**LEA Superintendent Signature**
- [Signature]
- Date: 7-24-89

---

**Office of Local Assistance Use Only**

**Date Returned (Reason Stated Below)**

**Date Resubmittal Received**

**Reason(s) for Return**

**Printed Name of Reviewer**

**Reviewer's Signature**
**RECORD OF FRIABLE AND NONFRIABLE ACBM**

**(FORM B)**

**OIG/EPA-8 (NEW 5-88)**

<table>
<thead>
<tr>
<th>LINE</th>
<th>BUILDING NAME &amp; FUNCTIONAL SPACE</th>
<th>CHECK ONE</th>
<th>CHECK ONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Indicate Address if Different From Above)</td>
<td>SURFACING</td>
<td>TSI</td>
</tr>
<tr>
<td>1.</td>
<td>A - WATER HEATER ROOM 47</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>A - WATER HEATER ROOM 47</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>A - ROOMS 5, 4, 1, 12</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>A - ROOM 3, 1, 8, 2</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>A - ROOM 4</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>B - ROOM 9 ALL CLASSROOMS</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>B - EXTERIOR OF BUILDING</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>C - RUNS 13, 14</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>C - ROOM 12 ALL CLASSROOMS</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>D - ROOM 15 (BOILER ROOM)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>D - ROOM 16 (BOTH RESTROOMS)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>E - ROOM 4 (CLASSROOMS 17, 18)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>G - ROOMS 1, 2, 3, 4</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>G - ROOMS 1, 2, 3, 4</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>F - ABOVE ALL DOORS</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**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).
Bulk Material Analysis Report

Client: Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904140
Sample Number: CPM - 200C
Site:


Gross Description: White floor tile-like material.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT:
Chrysotile Non-Det.%
Amosite Non-Det.%
Crocidolite Non-Det.%

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:
Cellulose 1-5 %
Fibrous Glass Non-Det.%
Polyethylene Non-Det.%

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:
Unspecified Particulates 95-99 %

Supervisor: David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES
Analytical method: 40 CFR 763, Subpart F, Appendix A (AHERA)
Bulk Material Analysis Report

Client:
Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904141
Sample Number: CPM - 201A
Site:

Location:

Gross Description: Off-white fibrous ceiling-like material.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT:
Chrysotile
Amosite
Crocidolite

Non-Det.%
Non-Det.%
Non-Det.%

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:
Cellulose
Fibrous Glass
Polyethylene

60-65 %
25-30 %
Non-Det. %

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:
Unspecified Particulates

5-10 %

Supervisor:

David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES
Analytical method: 40 CFR 763, Subpart F, Appendix A (AHRR)
Client: Hazard Management Services, Inc.
P.O. Box 7012, Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 89044142
Sample Number: CPM - 2018


Gross Description: Off-white fibrous ceiling-like material.

Comments:

Microscopic Description

<table>
<thead>
<tr>
<th>TOTAL ASBESTOS PRESENT:</th>
<th>Non-Det.%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chrysotile</td>
<td>Non-Det.%</td>
</tr>
<tr>
<td>Amosite</td>
<td>Non-Det.%</td>
</tr>
<tr>
<td>Crocidolite</td>
<td>Non-Det.%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:</th>
<th>90-95 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cellulose</td>
<td>60-65 %</td>
</tr>
<tr>
<td>Fibrous Glass</td>
<td>25-30 %</td>
</tr>
<tr>
<td>Polyethylene</td>
<td>Non-Det.%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:</th>
<th>5-10 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unspecified Particulates</td>
<td>5-10 %</td>
</tr>
</tbody>
</table>

Supervisor: [Signature]

David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES

Analytical method: 40 CFR 763, Subpart F, Appendix A (AHERA)
Bulk Material Analysis Report

Client:
Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904143
Sample Number: CPM - 201C

Location:

Gross Description: Off-white fibrous ceiling-like material.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT:
- Chrysotile: Non-Det.%
- Amosite: Non-Det.%
- Crocidolite: Non-Det.%

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:
- Cellulose: 55-60%
- Fibrous Glass: 30-35%
- Polyethylene: Non-Det.%

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:
- Unspecified Particulates: 5-10%

Supervisor:

David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES
Analytical method: 40 CFR 763, Subpart Y, Appendix A (AHERA)

Consulting and Laboratory Services in the Forensic and Environmental Health Sciences
3777 Depot Road, Suite 406-408, Hayward, CA 94545 415/887-8828 FAX 415/887-4218
Bulk Material Analysis Report

Client:
Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904144
Sample Number: CPM - 202A
Site:

Location:

Gross Description: Off-white linoleum-like material with off-white fibrous backing.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT:
Chrysotile
Amsite
Crocidolite

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:
Cellulose
Fibrous Glass
Polyethylene
Synthetic

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:
Unspecified Particulates

Supervisor: David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES
Analytical method: 40 CFR 763, Subpart F, Appendix A (NRRA)
Bulk Material Analysis Report

Client: Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904145
Sample Number: CPM - 202B

Location: Chico Unified School District/Chapman.

Gross Description: Off-white linoleum-like material with off-white fibrous backing.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT:

<table>
<thead>
<tr>
<th>Component</th>
<th>Non-Det.%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chrysotile</td>
<td></td>
</tr>
<tr>
<td>Amosite</td>
<td></td>
</tr>
<tr>
<td>Crocidolite</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:

<table>
<thead>
<tr>
<th>Component</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cellulose</td>
<td>30-35</td>
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<tr>
<td>Fibrous Glass</td>
<td>5-10</td>
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<tr>
<td>Polyethylene</td>
<td>Non-Det.</td>
</tr>
<tr>
<td>Synthetic</td>
<td>10-15</td>
</tr>
</tbody>
</table>

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:

<table>
<thead>
<tr>
<th>Component</th>
<th>%</th>
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</thead>
<tbody>
<tr>
<td>Unspecified Particulates</td>
<td>40-45</td>
</tr>
</tbody>
</table>

Supervisor: David Kahane

See reverse for explanation of terms and reporting practices

Analytical method: 40 CFR 763, Subpart P, Appendix A (ANRA)
Bulk Material Analysis Report

Client: Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904146
Sample Number: CPM - 202C
Site:

Location:

Gross Description: Off-white linoleum-like material with off-white fibrous backing.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT:

<table>
<thead>
<tr>
<th>Chrysotile</th>
<th>Non-Det.%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amosite</td>
<td>Non-Det.%</td>
</tr>
<tr>
<td>Crocidolite</td>
<td>Non-Det.%</td>
</tr>
</tbody>
</table>

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:

<table>
<thead>
<tr>
<th>Cellulose</th>
<th>30-35 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fibrous Glass</td>
<td>5-10 %</td>
</tr>
<tr>
<td>Polyethylene</td>
<td>Non-Det.%</td>
</tr>
<tr>
<td>Synthetic</td>
<td>10-15 %</td>
</tr>
</tbody>
</table>

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:

| Unspecified Particulates | 40-45 % |

Supervisor: David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES
Analytical method: 40 CFR 763, Subpart F, Appendix A (AHRA)

Consulting and Laboratory Services in the Forensic and Environmental Health Sciences
3777 Depot Road, Suite 406 - 408, Hayward, CA 94545
415/887-8828 FAX 415/887-4218
Bulk Material Analysis Report

Client: Hazard Management Services, Inc.
P.O. Box 7012
Modesto, CA 95355

Client Number: 146
Report Number: 20921
Date Received: 01/30/89
Date Examined: 03/09/89

Lab Number: 8904147
Sample Number: CPM - 203A
Gross Description: Off-white fibrous drywall-like material.

Comments: Microscopic Description

TOTAL ASBESTOS PRESENT:
Chrysotile
Amosite
Crocidolite
Non-Det. %
Non-Det. %
Non-Det. %

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:
Cellulose
Fibrous Glass
Polyethylene
Synthetic
40-45 %
Trace %
Non-Det. %
5-10 %

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:
Unspecified Particulates
45-50 %

Supervisor: David Kahane

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES
Analytical method: 40 CFR 763, Subpart F, Appendix A (AHRA)
**Bulk Material Analysis Report**

**Client:**
Hazard Management Services, Inc.  
P.O. Box 7012  
Modesto, CA 95355

**Client Number:** 146  
**Report Number:** 20921  
**Date Received:** 01/30/89  
**Date Examined:** 03/09/89

**Lab Number:** 8904148  
**Sample Number:** CPM - 203B  
**Analyst:** DN

**Location:**

**Gross Description:** Off-white fibrous drywall-like material.

**Comments:**

---

**Microscopic Description**

<table>
<thead>
<tr>
<th>Material</th>
<th>Non-Det.%</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL ASBESTOS PRESENT:</td>
<td></td>
</tr>
<tr>
<td>Chrysotile</td>
<td></td>
</tr>
<tr>
<td>Amosite</td>
<td></td>
</tr>
<tr>
<td>Crocidolite</td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT:**  20-25 %

<table>
<thead>
<tr>
<th>Material</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cellulose</td>
<td>10-15 %</td>
</tr>
<tr>
<td>Fibrous Glass</td>
<td>Non-Det.%</td>
</tr>
<tr>
<td>Polyethylene</td>
<td>Non-Det.%</td>
</tr>
<tr>
<td>Synthetic</td>
<td>5-10 %</td>
</tr>
</tbody>
</table>

**TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT:**  75-80 %

<table>
<thead>
<tr>
<th>Material</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unspecified Particulates</td>
<td>75-80 %</td>
</tr>
</tbody>
</table>

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**Supervisor:**  
David Kahane

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SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES

Analytical method: 40 CFR 763, Subpart F, Appendix A (AHERA)

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NVLAP Accredited by the National Institute of Standards, National Institutes of Standards and Technology for Testing for Asbestos.
Forensic Analytical Specialties, Inc.

Bulk Material Analysis Report

Client: Hazard Management Services, Inc.  
P.O. Box 7012  
Modesto, CA 95355

Client Number: 146  
Report Number: 20921  
Date Received: 01/30/89  
Date Examined: 03/09/89

Lab Number: 8904149  
Sample Number: CPM - 203C  
Site: 

Location: 

Gross Description: Off-white fibrous drywall-like material.

Comments:

Microscopic Description

TOTAL ASBESTOS PRESENT:
Chrysotile  Non-Det.%
Amosite  Non-Det.%
Crocidolite  Non-Det.%

TOTAL NON-ASBESTOS FIBROUS MATERIAL PRESENT: 65-70%
Cellulose  55-60%
Fibrous Glass  Non-Det.%
Polyethylene  Non-Det.%
Synthetic  5-10%

TOTAL NON-ASBESTOS NON-FIBROUS MATERIAL PRESENT: 30-35%
Unspecified Particulates  30-35%

Supervisor:  

SEE REVERSE FOR EXPLANATION OF TERMS AND REPORTING PRACTICES
Analytical method: 40 CFR 763, Subpart T, Appendix A (ANERRA)