

**2007 AHERA REINSPECTION AND SURVEILLANCE
OF
MARGARET A. MCKENNA ADMINISTRATION BUILDING
(FORMERLY - NIAGARA ADMINISTRATION BUILDING)
350 DANIEL STREET
LINDENHURST, NY 11757**

**PREPARED FOR:
LINDENHURST UFSD
350 DANIEL STREET
LINDENHURST, NY 11757**

Prepared By:
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2370

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MARGARET A. MCKENNA ADMINISTRATION BUILDING

1.0 INTRODUCTION

ECG Engineering, LLC. was retained by the Lindenhurst UFSD to perform an AHERA three year reinspection at the Margaret A. McKenna Administration Building (formerly the Niagara Administration Building) according to the following guidelines:

1. Perform a reinspection of all known or assumed ACBM in accordance with ' 40 CFR 763.85 (b) for the above named building, which includes:
 - A. A visual reinspection of all known or assumed ACBM.
 - B. Identification of any changes in the condition of known or assumed ACBM.
 - C. Any assessment or reassessments made of friable material.
 - D. The date of reinspection, the name and signature of the person making the reinspection and state of accreditation.
2. Update existing management plan and provide written recommendations as required by ' 40 CFR 763.85 (b) (3) (VIII) and ' 40 CFR 763.88 (d) for the above mentioned building.
3. Prepare a district wide executive summary and a reinspection report with an updated management plan for the above mentioned building.

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2.0 METHODOLOGY

The methodology for performing the reinspection is based upon EPA publication # EPA700/B-92/001 A Guide to Performing Reinspections Under the Asbestos Hazard Emergency Response Act (AHERA). This EPA guidance document provides sample forms for use during reinspections.

A facsimile of Sample Reinspection Form 1 from the above guide was used to identify and assess each Homogeneous Sampling Area detected in the original AHERA inspection and the first reinspection.

A Facsimile of Reinspection Form 2 from the guide was used to record the results of the reinspection. The form further records the recommendations of the management planner.

The procedures and protocols used for conducting this reinspection include:

1. Planning Reinspection - Based upon data provided by the LEA, Reinspection Form 1 is completed to identify the recorded locations within the building that have been determined to contain confirmed or assumed ACBM. The material category, asbestos content, and AHERA assessment category are recorded. Also, any response actions taken since the last reinspection are noted on this form.
2. Reinspection – Locations identified in item 1 above are visited by an accredited inspector and an assessment of the ACBM is conducted using Reinspection Form 2. Changes in the condition, quantity and friability of ACBM are noted. An assessment category is assigned and a determination of whether this assessment has been altered since the last reinspection is recorded.
3. Management Planner Recommendations - An AHERA accredited Management Planner reviews Form 1 and the portion of Form 2 completed by the inspector and makes recommendations for response actions. This recommendation is also recorded on Form 2 as well as a proposed schedule for any preventative measures, response actions and initial or additional cleanings.

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3.0 REINSPECTION AND ASSESSMENT

3.1 DISCUSSION

1. Each homogenous area number (HA#) that was assigned to an assumed suspect or confirmed material in the original AHERA report was reassigned to that material to avoid confusion.
2. Some of the information in the inspection report was provided by the LEA including changes in quantity or condition of the ACBM.
3. In homogeneous areas where no change has occurred from the original inspection or reinspection, the inspector has so noted. Changes in conditions of friability are also noted on Reinspection Form 1. This form contains the inspector's assessment of friable asbestos.
4. Also included within this section is information related to the inspector's accreditation.

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3.2 CHANGES IN CONDITION

The following changes in condition of ACBM were identified:

1. All remaining identified VAT (approximately 19,193 SF) was abated during the summer of 2005 and the summer of 2006.
2. Two pipe fitting covers in the fan room (2-106) were found to be damaged and should be repaired or removed.
3. There were no other changes in the condition of the confirmed and assumed ACBM located within this facility.

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3.3 AHERA REINSPECTION FORM 1

Homo sampling areas		material category	asbestos content	friability	AHERA assessment category	recorded locations of material	response actions taken renovations other comments
ID #	Descript.						
04	Pipe Fitting Insulation	*tsi* surf misc	assum *yes* no	f *nf* x	5	Throughout	Two pipe fitting coverings in the fan room (2-106) were found to be damaged and should be repaired or removed.
07, 08, 14-20	Floor Tiles	tsi surf *misc*	*assum* yes no	f *nf* x	5	Throughout	All identified VAT was abated Summer 2005 and Summer 2006.
10	Roofing Material	tsi surf *misc*	*assum* yes no	f *nf* x	5	Roof	None
11	Electrical Wiring	tsi surf *misc*	*assum* yes no	f *nf* x	5	Throughout	None
		tsi surf misc	assum yes no	f nf x			
		tsi surf misc	assum yes no	f nf x			
		tsi surf misc	assum yes no	f nf x			

Information abstracted by Lou Mira Date 7/01/07

Friability: F = friable; NF = nonfriable; X = not ACBM

AHERA assessment category: 1 = Damaged or significantly damaged TSI ACBM; 2 = Damaged friable surfacing ACBM; 3 = Significantly damaged friable surfacing ACBM; 4 = Damaged or significantly damaged friable miscellaneous ACBM; 5 = ACBM with potential for damage; 6 = ACBM with potential for significant damage; 7 = Any remaining friable ACBM or suspect ACBM; X = Not applicable; None = no assessment in original inspection

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3.4 AHERA INSPECTOR - ACCREDITATION AND CERTIFICATION

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AHERA REINSPECTION AND MANAGEMENT PLAN


Inspector: Lou Mira

Date: 7/09/07

I, Lou Mira, completed the reinspection of this facility, and assessed the suspect ACBM during April 2007.

04-16272
Accreditation #

New York
State


Signature

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4.0 MANAGEMENT PLAN

4.1 MANAGEMENT PLANNER RECOMMENDATIONS

This section summarizes the recommendations found on Reinspection Form 2. Refer to the forms for specific information.

1. It is our recommendation to repair or remove the 2 damaged pipe-fitting covers in the fan room (2-106).
2. It is our recommendation to avoid the disturbance of ACBM and to perform periodic surveillances to identify any changes in the condition of ACBM. If damage occurs, repair said damage in accordance with NY State and USEPA regulations.
3. After a review of the condition of the known asbestos materials located throughout the district it is recommended that all assumed and/or confirmed asbestos containing materials should be maintained in accordance with the original O & M program implemented in the original AHERA management plan. The surveillance and cleaning as recommended have helped to maintain the condition of the confirmed and assumed ACBM. It is also recommended that the original asbestos management plan be reviewed and updated as needed to include suspect materials that were not previously evaluated. Also, prior testing of NOB materials should be evaluated to ensure that the results are valid.

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4.2 AHERA REINSPECTION FORM 2

Reinspection Findings for ACBM						Management Planner Recommendations		
locations of ACBM by assessment category	quantity	friability	assessment category (1-7,X)	justification for assessment category	change in assessment	preventative measures, response actions and initial or additional cleanings	schedule	
							begin	complete
Throughout	181	F *NF*	5	Potential for Damage	YES *NO*	Repair or remove 2 damaged pipe fitting coverings in the Fan Room (2-106) Avoid Disturbance & Perform Periodic Surveillances	7/07	7/10
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
Were additional samples of this ACBM taken? Yes *No*						Date of Management Planner Review: <u>08/01/07</u>		
Inspector Name <u>Lou Mira</u> Accreditation #/State <u>04-16272/NY</u> Expiration Date <u>01/08</u>						Management Planner <u>Gregory J. Anderson</u> Accreditation #/State <u>04-08373/NY</u> Expiration Date <u>10/07</u>		

I, the LEA's Designated Person, have read and understood the recommendation made above: _____ Date: _____

Reinspection Findings for ACBM						Management Planner Recommendations		
locations of ACBM by assessment category	quantity	friability	assessment category (1-7,X)	justification for assessment category	change in assessment	preventative measures, response actions and initial or additional cleanings	schedule	
							begin	complete
Throughout	19,193 <u>-19,193</u> 0	F NF	X	Abated	*YES* NO	All remaining identified VAT was abated Summer 2005 and Summer 2006.	N/A	N/A
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
Were additional samples of this ACBM taken? Yes *No*						Date of Management Planner Review: <u>08/01/07</u>		
Inspector Name <u>Lou Mira</u> Accreditation #/State <u>04-16272/NY</u> Expiration Date <u>01/08</u>						Management Planner <u>Gregory J. Anderson</u> Accreditation #/State <u>04-08373/NY</u> Expiration Date <u>10/07</u>		

I, the LEA's Designated Person, have read and understood the recommendation made above: _____ Date: _____
ECG Project No. 2370 **ECG Engineering, LLC.**

Reinspection Form 2: Reinspection of ACBM: Findings and Management Planner Recommendations

School: Lindenhurst UFSD Building: Margaret A. McKenna Administration Building

Date(s) of Reinspection 7/09/07

Homogeneous Sampling Area: Material Description: Roofing Material

ID Number 10

Reinspection Findings for ACBM						Management Planner Recommendations		
locations of ACBM by assessment category	quantity	friability	assessment category (1-7,X)	justification for assessment category	change in assessment	preventative measures, response actions and initial or additional cleanings	schedule	
							begin	complete
Roof	N/A	F *NF*	5	Potential for Damage	YES *NO*	Avoid Disturbance & Perform Periodic Surveillances	7/07	7/10
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
Were additional samples of this ACBM taken? Yes *No*						Date of Management Planner Review: <u>08/01/07</u>		
Inspector Name <u>Lou Mira</u> Accreditation #/State <u>04-16272/NY</u> Expiration Date <u>01/08</u>						Management Planner <u>Gregory J. Anderson</u> Accreditation #/State <u>04-08373/NY</u> Expiration Date <u>10/07</u>		

I, the LEA's Designated Person, have read and understood the recommendation made above: _____ Date: _____

MARGARET A. MCKENNA ADMINISTRATION BUILDING

Reinspection Form 2: Reinspection of ACBM: Findings and Management Planner Recommendations
 School: Lindenhurst UFSD Building: Margaret A. McKenna Administration Building
7/09/07

Page 4 of 4
 Date(s) of Reinspection

Homogeneous Sampling Area: Material Description: Electrical Wiring

ID Number 11

Reinspection Findings for ACBM						Management Planner Recommendations		
locations of ACBM by assessment category	quantity	friability	assessment category (1-7,X)	justification for assessment category	change in assessment	preventative measures, response actions and initial or additional cleanings	schedule	
							begin	complete
Throughout	N/A	F *NF*	5	Potential for Damage	YES *NO*	Avoid Disturbance & Perform Periodic Surveillances	7/07	7/10
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
		F NF			YES NO			
Were additional samples of this ACBM taken? Yes *No*						Date of Management Planner Review: <u>08/01/07</u>		
Inspector Name <u>Lou Mira</u> Accreditation #/State <u>04-16272/NY</u> Expiration Date <u>01/08</u>						Management Planner <u>Gregory J. Anderson</u> Accreditation #/State <u>04-08373/NY</u> Expiration Date <u>10/07</u>		

I, the LEA's Designated Person, have read and understood the recommendation made above: _____ Date: _____

ECG Project No. 2370

ECG Engineering, LLC.

4.3 AHERA MANAGEMENT PLANNER - ACCREDITATION AND CERTIFICATION

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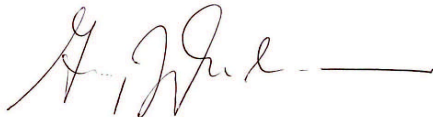
AHERA REINSPECTION AND MANAGEMENT PLAN

Management Planner: Gregory J. Anderson Date: 08/01/07

I, Gregory J. Anderson, prepared the management plan for this facility, determined the response actions, and estimated the resources required.

04-08373
Accreditation #

New York
State



Signature

MARGARET A. MCKENNA ADMINISTRATION BUILDING

5.0 PERIODIC SURVEILLANCE FORMS