

# **Former Mt. Zion Church**

**Atoka, OK**

**Owner: City of Atoka**

## **Final Remediation Report**



**OKLAHOMA**  
**Environmental**  
**Quality**

# SITE CLEANUP ASSISTANCE PROGRAM

---

## City performed sampling May of 2021

- Lead-based paint, lead dust, and asbestos located
- building deteriorating and collapsing
- Wet Demolition performed to abate
- Abatement completed in October of 2021
- Plan to create park





# Table of Contents

Deeds and Legal Documents

Inspection Reports

Scope of Work

Remediation Reports

# Deeds and Legal Documents





## QUIT CLAIM DEED

THIS INDENTURE, Made this 15<sup>th</sup> day of June, 2021 between **African Baptist Church a/k/a Mt. Zion Baptist Church**, of the first part, and **The City of Atoka, PO Box 900, Atoka OK 74525**, of the second part. WITNESSETH, that party of the first part, in consideration of the sum of One and no/100 DOLLARS and other valuable considerations, to them in hand paid, the receipt of which is hereby acknowledged, do hereby quit claim, grant, bargain, sell and convey unto the said parties of the second part all their right, title, interest, estate and every claim and demand, both at law and in equity, in and to all the following described property situated in Atoka County, State of Oklahoma, to-wit:

Lot 4 Block 45, City of Atoka

TO HAVE AND TO HOLD the above described premises unto the said party of the second part its heirs and assigns forever.

IN WITNESS WHEREOF, the said parties of the first part have hereunto set his hands the day and year first above written.

**African Baptist Church a/ka Mt. Zion Baptist Church**

Elisabeth Frasier  
Elisabeth Frasier, Trustee/Officer

Clifford Brown  
Clifford Brown, Trustee/Officer

Ethel Fisher  
Ethel Fisher, Trustee/Officer

STATE OF Oklahoma )  
SS.

COUNTY OF Atoka )

Before me, the undersigned, a Notary Public in and for said County and State, on this 15<sup>th</sup> day of June, 2021, personally appeared Elisabeth Frasier, Clifford Brown, and Ethel Fisher to me known to be identical person who executed the within and foregoing instrument and acknowledged to me that they executed the same as their free and voluntary act and deed for the uses and purposes therein set forth.

Given under my hand and seal the day and year last above written.



[Signature]  
Notary Public



## Intergovernmental Agreement

This Intergovernmental Agreement (Agreement) between the Oklahoma Department of Environmental Quality (DEQ) and Atoka (City) is for environmental cleanup services provided by DEQ for the Property located at 604 E 7<sup>th</sup> Street, Atoka, OK, 74525, Atoka County. The areas of responsibility and relationships presented herein provide the conceptual framework under which the project will be executed.

- I. **STATUTORY AUTHORITY AND EFFECTIVE DATE:** This Agreement is authorized pursuant to and in accordance with the provisions of Title 27A Okla. Stat. (O.S.) § 2-3-201, 27A O.S. § 2-3-202, 74 O.S. § 581, and 74 O.S. § 1008. This Agreement shall begin on September 1<sup>st</sup>, 2021 or when executed by all parties whichever date occurs of the later and will continue through August 31<sup>st</sup>, 2022 or until completion of project or through an amendment whichever occurs first.
- II. **ENVIRONMENTAL CLEANUP SERVICES:** The City has requested environmental cleanup assistance from DEQ. DEQ agrees to provide the environmental cleanup services outlined in the attached Statement of Work (**Exhibit "A"**) and the City agrees to these services.
- III. **RESPONSIBILITIES OF ALL PARTIES:** The City and DEQ mutually agree that the responsibilities shall be as stated below:
  - 1) City's Responsibilities: The City shall be responsible for the duties listed below and shall not hold DEQ responsible for any of the duties. Those duties shall include:
    - a) Appoint a representative to serve as the central point of contact on matters relating to this Agreement and submit said representatives name and contact information to DEQ within ten (10) days of the effective date of this Agreement;
    - b) Restrict occupant's use/presence in the facility during remediation, as requested. This could include but is not limited to removing equipment, vehicles and other items that may be in the way of cleanup activities;
    - c) Attend routine update calls with DEQ during the remediation process; and
    - d) Perform any continued operations and maintenance required to keep remedy protective. An Operations and Maintenance Plan will be provided by DEQ if necessary.
  - 2) DEQ's Responsibilities: DEQ shall be responsible for the duties listed below and shall not hold the City responsible for any of the duties. Those duties shall include:
    - a) Appoint a representative to serve as the central point of contact on matters relating to this Agreement and submit said representatives name and contact information to the City within ten (10) days of the effective date of this Agreement;
    - b) Provide regular verbal progress reports via calls with the City;
    - c) Manage work and cover costs associated with the environmental cleanup work outlined in the attached Statement of Work (**Exhibit "A"**);
    - d) Supply the City with a final report of all DEQ activities within 90 days of completion of work.



- IV. **ACCESS TO PROPERTY:** All access to property shall be enforced by the executed Environmental Access Permit that shall accompany this Agreement upon execution.
- V. **PUBLIC INFORMATION:** The City is generally responsible for all public information. The City shall acknowledge the DEQ cleanup services outlined in this Agreement when making public statements regarding this building. The City will allow DEQ to place signs on the property during the environmental cleanup work. DEQ may make public announcements and respond to all inquiries relating to the environmental cleanup work in this Agreement. DEQ reserves the right to approve all press releases and publications where the agency is mentioned or included before publication. The agency shall provide a contact for publicity approval within ten (10) days of execution of the Agreement. The City shall have the agency's approval before using the DEQ logo or moving any DEQ signs the agency has placed. The City and DEQ shall give the other party advance notice before making any public statement regarding work contemplated, undertaken, or completed pursuant to this Agreement.
- VI. **TERMINATION:** This Agreement is expressly contingent upon funding and shall terminate without penalty either in whole or in part if funds are not made available to DEQ. Either party may terminate this Agreement by giving written notice at least sixty (60) days prior to the desired date of cancellation.
- VII. **ACCEPTANCE OF AGREEMENT:** The parties acknowledge and agree that they have read the Agreement and that they accept the responsibilities with which they are charged. The City agrees to comply with the building use restrictions during cleanup and understands that failure to comply with said restrictions or failure to adhere to the responsibilities enumerated in this Agreement may result in delayed remediation. This Agreement shall not affect any pre-existing or independent relationships or obligations between the parties. The City's Acceptance of this Agreement from DEQ constitutes acceptance of all current DEQ Purchasing terms and conditions. Terms and conditions are subject to change and may be found at <https://www.deq.ok.gov/wp-content/uploads/deqmainresources/DEQ-Terms-and-Conditions.pdf>
- VIII. **UNAUTHORIZED OBLIGATION:** At no time during the performance of this Agreement shall the City have the authority to obligate DEQ for payment of any goods or services.

In witness whereof, this Agreement, consisting of four (4) pages has been executed and delivered effective as of the date first above written.

City of Atoka  
P.O. Box 900  
Atoka, OK, 74525

Danny Delay 9-28-2021  
Authorized Representative Signature Date

Danny Delay, City Manager  
Authorized Representative Name, Title

Oklahoma Department of Environmental Quality  
707 N. Robinson, P.O. Box 1677,  
Oklahoma City, Oklahoma 73101-1677

\_\_\_\_\_  
Authorized Representative Signature Date

Catherine Sharp, Director, Administrative Services  
\_\_\_\_\_  
Authorized Representative Name, Title



Exhibit “A”  
Statement of Work



## Environmental Access Permit

**THIS PERMIT** made and entered into by and between **City of Atoka**, hereinafter called the PERMITOR, and the **DEPARTMENT OF ENVIRONMENTAL QUALITY**, hereinafter called the PERMITTEE.

**WITNESSETH**, PERMITTEE is hereby granted permission and authority to enter upon the following described property, situated in Okfuskee County, Oklahoma, hereinafter referred to as the "Property":

604 E 7<sup>th</sup> Street, Atoka, OK, 74525, Atoka County


**Attached and incorporated by reference as Exhibit "A": Property Location Map**

### **TERMS AND CONDITIONS OF PERMIT:**

1. **TERM**: This Permit shall be for a period of 1 year beginning July 1, 2021, and ending June 30, 2022.
2. **USE OF PROPERTY**: PERMITTEE and its consultants or contractors may enter upon said property for the performance of remedial activities, install, erect, operate, maintain, remove, and perform all work associated with said remedial activities. PERMITTEE and its consultants and contractors shall have the right of ingress and egress, to and from said site across adjoining lands of the PERMITOR. PERMITOR and PERMITTEE acknowledge that all equipment and improvements of PERMITTEE to support the said operations shall be deemed personal property of PERMITTEE.
3. **MAINTENANCE**: PERMITTEE agrees that no other changes shall be made to the Property without prior written permission of the PERMITOR other than what is necessary for the purpose of the Permit.
4. **INDEMNIFICATION**: PERMITOR agrees on its behalf and that of any successors or assigns to hold harmless, defend and indemnify the PERMITTEE, its officers, agents, employees, representatives, successors, and assigns, from and against any and all losses, liabilities, expenses, claims, demands, injuries, damages, fines, penalties, costs or judgments, including, without limitation, attorney's fees and costs of any kind. Without waiving any defense or immunity, and subject to the Oklahoma Governmental Tort Claims Act, such indemnification shall exclude any such liability to the extent caused by the negligence or willful misconduct of the PERMITTEE, its officers, agents, employees, representatives, successors, and assigns while acting within the scope of their employment.
5. **NO WARRANTIES**: The PERMITTEE makes no representations or warranties of any kind in connection with this Permit. This Permit is subject to all existing conditions, restrictions, reservations, easements, servitudes and right of ways of record.
6. **ASSIGNMENT**: This Permit cannot be assigned in whole or in part without the written approval of the PERMITTEE.
7. **TERMINATION**: Either party may terminate this Permit, or any renewals of this Permit, by giving written notice at least sixty (60) days prior to the desired date of cancellation.
8. **APPLICABLE LAW**: This Permit shall supersede any and all previous agreements whether oral or written and shall be governed by the laws of the State of Oklahoma.
9. **NON-WAIVER**: Failure of either the PERMITOR or PERMITTEE to exercise any right given hereunder or to insist upon strict compliance with regard to any term, condition or covenant specified herein, shall not constitute a waiver of the PERMITOR or PERMITTEE'S right to exercise such right or to demand strict compliance with any term, condition or covenant under this Agreement.



10. **ENTIRE AGREEMENT:** This Permit constitutes the sole and entire agreement of the parties and is binding upon the PERMITOR and the PERMITTEE, their heirs successors, legal representatives and assigns.






PERMITOR:	<b>City of Atoka</b>	PERMITTEE:	<b>Oklahoma Department of Environmental Quality</b>
	(Type or Print)		
By:		By:	
	(Signature)		(Signature)
	<b>DANNY Delay, City Manager</b>		<b>Catherine Sharp</b>
	(Print Name and Title)		(Print Name) <b>Director of Support Services, Administrative Services Division</b>
Date:	<b>7-8-2021</b>	Date:	<b>7/22/2021</b>




Map data ©2021 , Map data ©2021 20 ft



604 7th St

-  Directions
-  Save
-  Nearby
-  Send to your phone
-  Share

 604 7th St, Atoka, OK 74525

Photos

# Inspection Reports



2033 HERITAGE PARK DR, OKLAHOMA CITY, OK 73120 1.800.822.1650

### Polarized Light Microscopy Asbestos Analysis Report

Quantem Lab No. 334512

Account Number: C285

Date Received: 05/06/2021

Received By: Cyonne Harrod

Date Analyzed: 05/12/2021

Analyzed By: Benjamin Hill

Methodology: EPA/600/R-93/116

Client: City of Atoka  
Phyllis Bates  
PO Box 900  
Atoka, OK 74525

Project: Mt. Zion

Project Location: 604 E 7th

Project Number: 050421

Quantem Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
001	001	Homogeneous	White Sheetrock	Asbestos Not Present	Cellulose 15	Gypsum Paint
002	002	Layered	White Texture	Asbestos Not Present	NA	CaCO3 Paint
002a		Layered	White Tape	Asbestos Not Present	Cellulose 100	
002b		Layered	Tan Joint Compound	Asbestos Present Chrysotile 3	NA	CaCO3
003	003	Layered	Tan Joint Compound	Asbestos Present Chrysotile 3	NA	CaCO3
003a		Layered	White Sheetrock	Asbestos Not Present	Cellulose 10	Gypsum
004	004	Layered	White Texture	Asbestos Not Present	NA	CaCO3 Paint

Unless otherwise noted, upon receipt the condition of the sample was acceptable for analysis.

Quantem is a NVLAP accredited PLM laboratory (Lab Code: 101959-0). This report relates only to the specific items tested. NVLAP accreditation applies only to analysis performed utilizing EPA/600/M4-82-020 and EPA/600/R-93/116 methods. This report may not be used to claim product endorsement by NVLAP or any agency of the US Government. This report may not be reproduced except in full, without the written approval of the laboratory.





2033 HERITAGE PARK DR, OKLAHOMA CITY, OK 73120

1.800.822.1650

### Polarized Light Microscopy Asbestos Analysis Report

Quantem Lab No. 334512

Account Number: C285

Date Received: 05/06/2021

Received By: Cyonne Harrod

Date Analyzed: 05/12/2021

Analyzed By: Benjamin Hill

Methodology: EPA/600/R-93/116

Client: City of Atoka

Phyllis Bates

PO Box 900

Atoka, OK 74525

Project: Mt. Zion

Project Location: 604 E 7th

Project Number: 050421

Quantem Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
004a		Layered	White Tape	Asbestos Not Present	Cellulose 100	
004b		Layered	White Joint Compound	Asbestos Not Present	NA	CaCO3
005	005	Homogeneous	White Sheetrock	Asbestos Not Present	Cellulose 15	Gypsum
006	006	Homogeneous	White/Brown Ceiling Tile	Asbestos Not Present	Cellulose 90	Paint

*Benjamin Hill*

Benjamin Hill, Laboratory Analyst

5/12/2021

Date of Report

Unless otherwise noted, upon receipt the condition of the sample was acceptable for analysis. Quantem is a NVLAP accredited PLM laboratory (Lab Code: 101959-0). This report relates only to the specific items tested. NVLAP accreditation applies only to analysis performed utilizing EPA/600/M4-82-020 and EPA/600/R-93/116 methods. This report may not be used to claim product endorsement by NVLAP or any agency of the US Government. This report may not be reproduced except in full, without the written approval of the laboratory.

## ***MT. ZION CHURCH***

***604 E 7<sup>TH</sup> STREET***

***ATOKA, OK 74525***

*JULY 22, 2021*

*ASBESTOS-ABATEMENT PROJECT DESIGN*

***PREPARED FOR:***

*Oklahoma Department of Environmental Quality, Land Protection Division*

*Attention: Trenton Wilhelm*

*707 N Robinson Avenue*

*Oklahoma City, OK 73102*

*405.702.5108 | [Trenton.wilhelm.ok.gov](mailto:Trenton.wilhelm.ok.gov)*

***PREPARED BY:***

*Marshall Environmental Management, Incorporated*

*Attention: Jamie Marshall, Asbestos Abatement Project Designer*

*1301 N Martin Luther King Avenue*

*Oklahoma City, OK 73117*

*(405) 616-0401 | [mem@marshallenvironmental.com](mailto:mem@marshallenvironmental.com)*

TABLE OF CONTENTS

SCOPE-OF-WORK.....3

RESPONSIBLE PARTIES & CONSULTANTS .....3

    LICENSED ASBESTOS-ABATEMENT CONTRACTOR: ..... 3

    LICENSED ASBESTOS-ABATEMENT PROJECT DESIGNER: ..... 3

    OWNER REPRESENTATIVE INFORMATION: ..... 3

AGENCY STATEMENT.....4

SEQUENCING OF WORK (QUANTITY, TYPE & PERCENTAGE OF ASBESTOS) .....4

EGRESS, EMERGENCY ESCAPE ROUTES & FIRE EXTINGUISHER PLACEMENT .....4

DETAILS OF ASBESTOS-ABATEMENT PROJECT.....5

    WET DEMOLITION, OAC 380:50-17-4..... 5

AIR MONITORING REQUIREMENTS.....6

    PREPARATION AIR MONITORING ..... 6

    ASBESTOS-ABATEMENT AIR MONITORING ..... 6

        PERSONAL AIR MONITORING ..... 6

        AREA AIR MONITORING ..... 6

        CLEARANCE AIR MONITORING ..... 6

GENERAL REQUIREMENTS.....7

    CODES & REGULATIONS ..... 7

SOIL SAMPLING .....7

REQUEST FOR VARIANCES.....7

APPENDIX.....8

    EXAMPLE CONTAINMENT DIAGRAM..... 8

    CERTIFICATION | LICENSURE ..... 8

# ***MT. ZION CHURCH***

## ***ASBESTOS-ABATEMENT PROJECT DESIGN***

### ***SCOPE-OF-WORK***

This Asbestos-Abatement Project Design has been prepared to allow for the safe and economical demolition removal 4,500 square feet (ft<sup>2</sup>) residence with asbestos-containing joint compound located at 604 E 7<sup>th</sup> Street in Atoka, Oklahoma. Asbestos-abatement activities will be conducted in accordance with Oklahoma Asbestos Control (OAC) Act 380:50-17-14, demolition procedures.

### ***RESPONSIBLE PARTIES & CONSULTANTS***

#### ***LICENSED ASBESTOS-ABATEMENT CONTRACTOR:***

*To Be Determined*

#### ***LICENSED ASBESTOS-ABATEMENT PROJECT DESIGNER:***



July 22, 2021

---

***Jamie Marshall, MS, CIH*** | Asbestos-Abatement Project Designer  
ODOL AHERA Project Designer Certification: OK-PD400478  
1301 North Martin Luther King Avenue  
Oklahoma City, Oklahoma 73117  
405.616.0401 | [mem@marshallenvironmental.com](mailto:mem@marshallenvironmental.com)

***Report Date***

#### ***OWNER REPRESENTATIVE INFORMATION:***

Oklahoma Department of Environmental Quality, Land Protection Division  
Attention: Trenton Wilhelm  
707 N Robinson Avenue  
Oklahoma City, OK 73102  
405.702.5108 | [Trenton.wilhelm@deq.ok.gov](mailto:Trenton.wilhelm@deq.ok.gov)

### ***AGENCY STATEMENT***

For the duration of this abatement project all local, state, and federal regulations will apply. The regulations include, but are not limited to, the OAC Act, Abatement of Friable Asbestos Materials Rules 380:50-1-1 through 380:50-29-1.

### ***SEQUENCING OF WORK (QUANTITY, TYPE & PERCENTAGE OF ASBESTOS)***

The abatement project will consist of one work area. The Licensed Asbestos-Abatement Contractor shall file the notification of the intended start date based upon the schedule to be determined by the Owner. The abatement project duration is estimated to take approximately one (1) week to complete. Listed below is the location of the Regulated Asbestos-Containing Materials (RACM) to be abated; including total quantity and type of material assumed to be asbestos containing. The sequencing of the abatement will be at the discretion of the abatement contractor, with approval from the owner and project design representative:

#### **1) OAC 380:50-17-14, DEMOLITION PROCEDURES**

- Wet demolition of approximately 4,500 square feet (ft<sup>2</sup>) dilapidated residence with asbestos-containing joint compound throughout (3% Chrysotile)

### ***EGRESS, EMERGENCY ESCAPE ROUTES & FIRE EXTINGUISHER PLACEMENT***

The abatement work area will be clearly illuminated by droplights, light stands or equivalent lighting. Emergency lights will be in place where necessary, in all areas that are not properly illuminated to assist in the identification of the exit locations. Power to the area is to be supplied by the ground-fault circuit interrupter (GFCI) power source. All work will be performed using a buddy system. Exit routes from the work area will be clearly marked with signs and highly visible arrows designating the exit path, when applicable.

Fire extinguishers shall meet the requirements of the OAC Act 380:50-15-14. A minimum of 1 A:B:C fire extinguisher shall be provided for each 3,000-ft<sup>2</sup> of the work area, or major fraction thereof travel distance from any point of the work area to the nearest fire. A minimum of two (2) fire extinguishers will be inside the work area. Additionally, a minimum of 1 fire extinguisher shall be placed in the clean room of the decontamination facility.

Prior to beginning the prep and abatement work, all licensed asbestos workers will be given a briefing on the emergency egress procedures by the asbestos supervisor.



***DETAILS OF ASBESTOS-ABATEMENT PROJECT***

Asbestos removal will be conducted in accordance with OAC Act 380:50-17-3, demolition procedures. Oklahoma Department of Labor (ODOL) notices and State of Oklahoma Department of Environmental Quality (ODEQ) National Emission Standards for Hazardous Air Pollutants (NESHAP) notices must be filed with the appropriate agencies for this Asbestos Project Design. Copies of the notifications are to be provided to the Project Designer and Owner Representative. The Licensed Asbestos Abatement Contractor will mobilize to begin prep work based upon the notice to proceed and after coordination is confirmed with the Owner Representative. Following the completion of the project, all required project documents and waste manifests must be submitted to the ODOL provided to the Project Design Representative.

The initial job site setup shall include the establishment of GFCIs for use with all portable electric equipment, lighting and the power used by the decontamination unit equipment, high efficiency particulate air (HEPA) vacuums and negative air machines. Electrical within the containment or work areas will be locked out and tagged out prior to any workers coming within arm's reach of any energized electric or systems prior to the commencement of prep work. There will be a ***centralized detached decontamination unit with an externally vented negative pressure machine*** that will be utilized and constructed in accordance with Subchapter 15 of the Oklahoma Asbestos Control Act 380:50-15-7, 15-8 and 15-12 and will be set up as soon as feasible.

***WET DEMOLITION, OAC 380:50-17-4***

- 1) During prep, the contractor will prep all asbestos waste dumpsters with two layers of reinforced poly in a manner that it can be burrito wrapped in accordance with section 380:50-17-9 of the OAC Act.
- 2) For the removal, there will be one work area to be surrounded by a temporary fence and asbestos hazard communication warning tape.
- 3) When prep is completed, scheduling of an ODOL Prep Inspection will occur.
- 4) Once the Prep Inspection is approved, the contractor may begin wet demolition. Only asbestos workers wearing the appropriate PPE will be allowed within the asbestos barrier tape.
- 5) The abatement contractor must use at a minimum of 2-inch hose to wet the building during demolition. During the abatement process, asbestos containing materials will be continuously wetted down until asbestos removal is complete.
- 6) A licensed asbestos worker must be present in the truck during the hauling of the asbestos waste to the waste facility.
- 7) Conduct a final inspection to verify the completion of the Scope of Work with the Project Design Representative and schedule an ODOL Final Inspection.
- 8) Tear down any prep work and demobilize after approval by the ODOL and Project Design Representative.
- 9) Submit all required project documents and waste manifests to the ODOL and provide the Project Design Representative copies of all required project completion documents.

### ***AIR MONITORING REQUIREMENTS***

Air monitoring samples will be collected and analyzed by a technician that is NIOSH 582e trained. The air monitoring samples will be collected in accordance with NIOSH 7400 method for the duration of the workday. Air monitoring samples will be analyzed by Phase Contrast Microscopy (PCM), in conjunction with a laboratory currently proficient with the American Industrial Hygiene Association's (AIHA's) Proficiency in Analytical Testing (PAT) Program.

### ***PREPARATION AIR MONITORING***

No pre-abatement air monitoring will be required on this project unless RACM debris is being cleaned up or disturbed.

### ***ASBESTOS-ABATEMENT AIR MONITORING***

#### ***PERSONAL AIR MONITORING***

- A minimum of two or 25% (whichever is greater) of the workers will be monitored during the abatement activities. Personal monitoring is required during abatement to assure adequate respirator protection factors are applied in respirator selection.

#### ***AREA AIR MONITORING***

In accordance with OAC:50-11-1-3, inside and outside air monitoring will be conducted during the asbestos abatement. Area air samples will be collected and analyzed as specified in the Air Monitoring Requirements section above. Listed below are the locations of the area samples to be collected during the asbestos abatement.

- Inside the cab of the demolition equipment
- Outside Area at the barrier, Upwind and Downwind
- Inside the loadout area/truck (during load-out activities)
- Outside the Clean Room
- Dirty Room Neg Air

#### ***CLEARANCE AIR MONITORING***

Due to the full demolition of the structure, clearance air monitoring will not be required on this project.

## ***GENERAL REQUIREMENTS***

### ***CODES & REGULATIONS***

Wherever conflicts arise within the Project Design General Requirements or Procedures and/or among the applicable Rules and Regulations, the most stringent rules shall apply. This is subject to approval by ODOL or other authorities having jurisdiction (e.g. DEQ). If allowed by the authority with jurisdiction, a request for a variance can be submitted, provided it is acceptable to the Project Designer and Project Manager.

The Asbestos Abatement Contractor shall abide by this Project Design and the requirements, which govern friable asbestos removal in OAC Act 380:50, and require notification, worker training, and applicable transportation and disposal requirements for asbestos waste materials to include, but not limited to, the following:

- 29 CFR 1910, OSHA General Industry Standards
- 29 CFR 1926, OSHA Construction Industry Standard
- 29 CFR 1926, 1101 OSHA Asbestos Construction Standard
- 40 CFR 61, Subpart M (NESHAP) enforced by ODEQ
- ANSI Z88.2 latest edition (Respiratory Protection)
- Oklahoma Asbestos Control Act Title 40 Sections 450-456
- OAC 380:50 (All-inclusive), Oklahoma Rules for Abatement of Friable Asbestos Materials
- The Asbestos Hazard Emergency Response Act (AHERA) of 9186 PL (99-519) and rules and regulations adopted by EPA for its implementation, latest edition.
- 49 CFR (USDOT) Hazardous Material Transportation Regulations
- OAC 252:100-40, Air Pollution Control Rules, Control of Emission of Friable Asbestos during Demolition and Renovation Operations (replaces OAC 252:100-41-16)
- OAC 252:515-19, Management of Solid Wastes (DEQ Asbestos Land Protection Division Asbestos Disposal Requirements)
- All Applicable State Statutes, County and City Codes/Ordinances

### ***SOIL SAMPLING***

This project does not require the removal of any soils contaminated with RACM.








### ***REQUEST FOR VARIANCES***

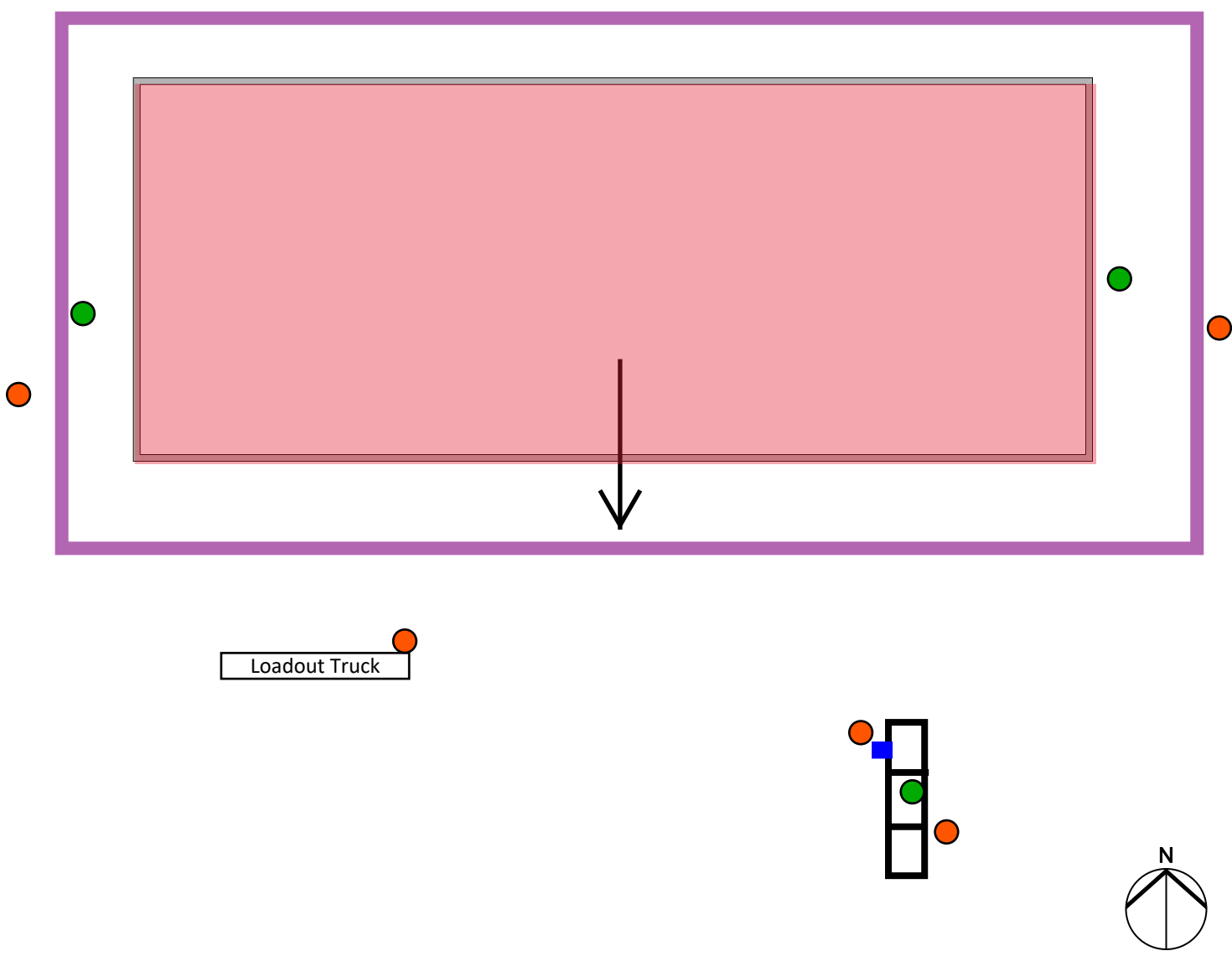
Requesting a variance to conduct wet demolition of the structure due to the dilapidated state. The structure's roof is caving and prevents the removal of ACM prior to demolition, so a wet demolition is required.

## *APPENDIX*

*EXAMPLE CONTAINMENT DIAGRAM*

*CERTIFICATION / LICENSURE*

-  Wet Demolition Area
-  Asbestos Work Area Boundary
-  Escape Route
-  Negative Pressure Machines
-  Fire Extinguishers
-  Area Samples
-  Pop-Ups



NOT TO SCALE

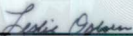


# Oklahoma Department of Labor

## Asbestos License

This certifies that **Jamie Marshall**  
has successfully met the certification requirements under  
the Oklahoma Asbestos Control Act 40 O.S. § 450, et seq.  
Abatement of Friable Asbestos Materials Rules OAC  
380:50 in the following:

**Project Designer**



Leslie Osborn  
Labor Commissioner



License # : 400478

Expires : 03/12/2022

Issued : 03/18/2021

Not intended for identification purposes

Approved: \_ X \_

3017 N. Stiles, Oklahoma City, OK 73105

Project Designer: Jamie Marshall

Disapproved: \_\_\_\_\_

Phone – (405)521-6464

Fax – (405)521-6025

	ITEM	ACCEPTED	REJECTED	COMMENTS
1.	A statement that DOL <u>Abatement of Friable Materials Rules</u> apply.	X		Agency Statement
2.	Sequencing and phasing of work.	X		One phase
3.	Identification of means of egress and a fire protection plan and a diagram for emergency escape routes, and fire extinguisher placements.	X		Emergency exits identified with a minimum of three 10:ABC fire extinguishers.
4.	The quantity, type, percentage with bulk analysis unless presumed and a diagramed location of asbestos materials to be abated.	X		4,500 square feet of drywall joint compound containing 3% chrysotile.
5.	Abatement methods, and techniques, and numbers of containments, glove bags or mini-containments.	X		OAC 380:50-17-14, wet demo
6.	Details of personal and area air monitoring samples.	X		Six area monitors, 25% with a minimum of two personals.
7.	Numbers and locations of Clean Test samples and type of analysis to be employed.	X		No clearance monitoring required.
8.	Numbers, capacities, a diagram to identify locations, and discharge points, if any, of negative air machines.	X		One negative air machine will be attached to the equipment room of the decontamination unit, externally vented and monitored.
9.	Details of project containment(s), glove bag or mini-containments, including drawings. Details shall include all applicable subchapters, including but not limited to scaffolding and live electric isolation.	X		Work area will be established with a temporary fence and caution tape. Waste containers will be prepped with two layers of reinforced poly to be burrito wrapped.
10.	Details of decontamination system(s).	X		Three stage, central, decontamination unit.
11.	The extent to which asbestos-contaminated soils, if any, must be removed and the sampling methods of determining the efficacy of such removal.	X		None.
12.	Special materials or methods required to protect objects in the work area should be detailed, (plywood over carpeting or hardwood floors to prevent damage from scaffolds and/or falling materials.	X		None.
13.	Any variances from the <u>Abatement of Friable Asbestos Materials Rules</u> .	X		Variance for wet demo will be accepted during prep inspection if it is obvious the structure is not safe for removal.

The Department of Labor reserves the right to require additional engineering or environmental controls consistent with the Abatement of Friable Asbestos Materials Rules which may be necessary because of discrepancies between this Project Design and field conditions or from unanticipated changes in field conditions.

REVIEWED BY: \_\_\_\_\_



DATE: 7/27/21

REVIEWED BY: \_\_\_\_\_



DATE: 7.27.2021

# Scope of Work

# **STATEMENT OF WORK**

## **For**

### **Wet Demolition of the Atoka Mt. Zion Church**

The Department of Environmental Quality (DEQ) is requesting a work plan and cost estimate for the asbestos abatement by wet demolition of the former Mt. Zion Church located at 604 E 7<sup>th</sup> St, Atoka, Oklahoma, 74525. This Scope of Work (SOW) describes the demolition, removal, and proper disposal of asbestos-containing material. This work must be performed to safely demolish the structure which is unsafe for use. All work shall be completed according to the Oklahoma Department of Labor (ODOL) approved Project Design in **Attachment A**. A mandatory site visit and walk through will be held at the site to give a better understanding of the project. The building will not have electricity or water during the demolition.

#### **SPECIAL PROVISIONS:**

- Work Schedule: The Contractor shall schedule all work to be completed within 60 calendar days after the written "Notice to Proceed". Coordination of work shall be scheduled with DEQ.
  - A pre-construction meeting shall be held at the site after the Notice to Proceed date to review the SOW and answer any questions the contractor may have.
  - All on-site demolition work shall be completed within 30 days. The remaining 30 days will be for DOL prep work, NESHAP notification, DOL final inspections, and to correct any deficiencies.
- Conditions of Work: The following conditions of work will apply in accomplishment of this contract:
  - All work shall be performed in accordance with all applicable State and Federal regulations.
  - All work shall be performed in such a manner that it does not put workers' health and safety at risk.
  - Disposal of Removed Materials: All materials removed by the Contractor under this contract shall be disposed of in accordance with State and Federal regulations.

#### **CONTRACTOR SHALL:**

- Attend mandatory pre-bid site meeting and walk through
- Follow all appropriate OSHA requirements
- Hire 3<sup>rd</sup> party Consultant to conduct air monitoring

#### **Submit with Bid:**

- Copy of ODOL Asbestos Abatement Contractor License;
- Three references with name, type of project, phone number, and location of similar work in the last three years;

#### **Submit after Notice to Proceed:**

A Work Plan with planned activities and schedule to DEQ for approval;

## BACKGROUND/ADDITIONAL INFORMATION

This building consists of an approximate 4,500 square foot masonry building formerly used as a church. The building has been abandoned for an indeterminate amount of time. The roof is partially collapsed. The intent of this project is proper removal and disposal of building materials including office rubbish via wet demolition. Building materials and contents are considered contaminated with asbestos.

## REGULATORY COMPLIANCE

The specific governing regulations affecting this work include but are not limited to: 29 CFR 1926.1101 (OSHA Construction Industry Asbestos Standard), 29 CFR 1910.134 (OSHA Respiratory Protection), 40 CFR 61, Subpart M (Asbestos NESHAP), and OAC 380:50 with approved variances. Waste transport and disposal is to be performed by an Oklahoma-licensed asbestos waste transporter with a waste disposal manifest/chain of custody signed by the receiving landfill. DOT Class 9 placards are to be displayed during transportation of asbestos waste.

## WORK SEQUENCING/SCHEDULING

The removal of asbestos-containing materials (ACM) in the building is to be accomplished within a single contiguous phase. **The tentative start date is yet to be determined.** The work is to be scheduled by the abatement Contractor in coordination with the oversight consultant, City of Atoka, and DEQ. Work is planned for normal work hours.

## EGRESS AND FIRE PROTECTION

Workers will be briefed on emergency procedures and the assembly point at the beginning of the work shift. In the event of an emergency evacuation, workers will immediately proceed to the assembly point.

### Fire Protection

The abatement Contractor will provide a minimum of one 10 lb. ABC dry-charged fire extinguisher within the immediate vicinity of the work area and outside the decon area during abatement. The fire extinguisher will have a valid inspection tag and be decontaminated upon removal from the work area.

## MATERIALS TO BE ABATED

The following table provides the approximate quantity of ACM and contaminated waste to be removed and disposed.

Description	Percent/ Type Asbestos	NESHAP Classification	Condition	Estimated Quantity
Interior building materials	Assumed	ACM	Significantly Damaged	4,500 SF

Office Rubbish	Assumed contaminated	-	-	-
----------------	----------------------	---	---	---

## METHOD OF ABATEMENT

No ACM debris will be intentionally disturbed until a remote decontamination unit is established and operation of the air filtration device(s) initiated. Sufficient water supply to maintain the ACM and contaminated waste in an adequately wetted state and transfer of the waste into a disposal container will be required on site. Demolition of the building will be limited to times with wind speeds forecasted at 15 miles per hours or less. Please refer to the DOL approved Project Design in **Attachment A** for more information.

Removal of ACM debris will be performed in accordance with **380:50-17-4 (Demolition Procedures)** The proposed sequence is as follows:

### Proposed Sequence of Demolition

1. Contractor mobilize, establish remote decontamination, decontamination negative air flow/filtration;
2. Contractor prep waste container 2 layers 6 mil reinforced, burrito wrap;
3. ODOL prep inspection;
4. Contractor begins demolition of building;
5. Contractor maintains stand-by crew during demolition;
6. Contractor maintains waste materials in adequately wet state;
7. Contractor's consultant monitors perimeter at nominal 25' radius where feasible;
8. ODOL visual inspection;
9. Contractor final clean/re-clean grounds;
10. ODOL final inspection.

*Notes: The ODOL may opt to waive or combine inspections at their discretion.*

## AIR MONITORING AND RESPIRATORY PROTECTION

A minimum of 1 area air monitor will be located:

- Upwind, downwind, crosswind each outside the containment during demolition;
- In the clean room area;
- In the area of the ACM waste container;
- At the exhaust point of the clean room air filtration device (AFD);
- Personal air monitor samples will be collected on equipment operator(s) and
- Minimum of 2 personnel abatement workers.

## AIR FILTRATION

AFDs will be utilized for the clean room only.

## CONTAINMENT METHODS

Preparation of asbestos abatement work area will be per **380:50-17-4 (Demolition Procedures)** with emphasis on maintaining ACM wastes adequately wet during demolition. Care will be taken to minimize the generation of contaminated wastewater.

## **DECONTAMINATION SYSTEM**

A remote decontamination facility (decon) under negative pressure is planned for this work. The decon unit will be established per **380:50-15-7 (Clean room requirements)** and **380:50-15-12 (decontamination facility preparation)** consisting of three chambers; a clean room, a shower and a dirty room. The airlocks for the decon unit will consist of triple 6 mil polyethylene overlapping flaps. The decon shower shall be equipped with a 5-micron wastewater filter, liquid cleaning agent, non-porous shower grates and a functioning in-line water heater with capacity for 5 gallons per worker. Disposal of wastewater will be into the sanitary sewer. The temperature of the clean room and decon will be maintained above 50 degrees F during abatement activities. Decon procedures will be per **380:50-15-8 (Decontamination Procedures)**.

## **SOIL CONTAMINATION CLEANUP AND BACKFILL**

One (1) nine grid system sample of the potentially contaminated soil will be collected following demolition and analyzed (EPA600/R-93-116). Any 'grid' found to contain 1% or more asbestos will be excavated 3-6 inches and disposed as ACM and grids resampled.

Once sampling is complete, the work area will be graded to ground level and for proper drainage at the completion of cleanup activities.

## **SPECIAL MATERIALS OR METHODS**

### **Pre-construction prep work**

Prior to commencement of building demolition, a thorough walkthrough and evaluation of the building will be conducted to confirm that all appropriate measures have been completed to ensure that the area is ready for commencement of demolition activities.

### **Security and perimeter fencing of construction site**

To prevent the general public from entering the construction work zone, a 6-foot temporary fence with black privacy fence screen will be constructed around the perimeter of the construction site. Fencing should be locked at all times when construction personnel are not present. Signs posted on the fencing perimeter will be present to warn intruders of the safety risk at that location and the legal ramifications of trespassing.

### **Demolition and storm water diversion/containment**

Demolition of the facilities and other soil disturbances will expose the site to storm water runoff. The Contractor will use Best Management Practices in installing and maintaining storm water controls during site work to prevent erosion. Regular inspections will be conducted and corrective actions taken to limit runoff.



The use of good construction management techniques will be used to control storm water from carrying soils or vegetation into nearby creeks or waterways. It is the intent to contain all run-off water that comes in contact with building debris, waste stockpiles or potentially contaminated material.

In addition to controls put in place to maintain run-off to the work area, if ground area outside the building footprint has the potential to be disturbed, rip-rap, diversion ditches, silt fences, and/or straw bales will be used to interrupt the down-gradient flow of storm water, reducing or eliminating the deposition of silt in waterways. Regular inspections, particularly prior to and after significant storm events, will be made and repairs initiated as needed. Additional considerations will be investigated for sheet flow runoff and seasonal deposits of suspended water.

Any significant pooling of water remaining inside the work will be extracted after demolition. Extraction of water will be accomplished using a pump equipped with a 5-micron wastewater filter. Pooled water will be sampled and discharged into the sanitary sewer.

### **Hauling and disposal of asbestos containing waste material**

Waste transport and disposal is to be performed by an Oklahoma-licensed asbestos waste transporter with a waste disposal manifest/chain of custody signed by the receiving landfill. DOT Class 9 placards are to be displayed during transportation of asbestos waste.

### **Types of equipment needed for demolition, material wetting and waste hauling**

The following major equipment for the building demolition project is anticipated to include:

- Excavator 200
- Mini Excavator
- Skid Steer Loader
- Haul/Dump Truck
- Box Blade
- Pickup Trucks
- Decontamination Trailer
- Water Truck

### **Post construction site cleanup**

During demolition, all assumed ACM debris/waste will be removed from the project site. The assumed ACM debris/waste will be sent to the appropriate landfill. After all wastes have been removed, Contractor will remove all temporary facilities/structures, and shall dismantle and properly dispose of erosion and sediment controls. Equipment/supplies that entered the work area will be decontaminated, as necessary.

### **Other permitting requirements or regulations related to the wet demolition**

Prior to and at the completion of demolition of the building, the Contractor will submit the required permits and documentation to the appropriate institutions. The following items will be submitted:

- NESHAP Notification
- Contractor Checklist
- Air Monitoring Results
- Waste Manifests

**Electrical**

Electric service may not be available at the time of abatement. The procurement of electrical service for this SOW is the sole responsibility of the Contractor. Lockout/tagout procedures will be used on all electrical circuits which penetrate the work area.

**Water**

The procurement of potable and non-potable water for this SOW is the sole responsibility of the Contractor.

**Heat Stress**

The Contractor should monitor heat stress in general accordance with OSHA Technical Manual Section III, Chapter 4.

**SEE ATTACHMENT A FOR PROJECT DESIGN****FINAL REPORT:**

- Write a final report and submit to DEQ;
- Final report shall include:
  - A detailed summary of work;
  - Waste manifests; and
  - Photo documentation of work
    - Photo documentation of work will have digital color photos with captions describing photo;
- Final report will be submitted electronically.

**DEQ CONTACT:**

Trenton Wilhelm  
Oklahoma Dept of Environmental Quality  
Land Protection Division  
707 N. Robinson  
P.O. Box 1677  
Oklahoma City, OK 73101-1677

Phone Numbers:  
405-702-5108 (Office)  
405-702-5101 (Fax)  
[Trenton.Wilhelm@deq.ok.gov](mailto:Trenton.Wilhelm@deq.ok.gov)

# **ATTACHMENT 1**

## **Asbestos Project Design**

# Remediation Reports

# MARSHALL ENVIRONMENTAL MANAGEMENT, INC.

---

ESTABLISHED IN 1987

*Certified Industrial Hygiene  
Asbestos & Lead-Based Paint  
Environmental Science  
Indoor Air Quality  
Occupational Health & Safety  
Research & Consultation  
Training & Education*

November 1, 2021

Oklahoma Department of Environmental Quality  
Land Protection Division  
Attention: Trenton Wilhelm, Environmental Programs Specialist  
707 N Robinson Avenue  
Oklahoma City, OK 73102

**RE: MT. ZION CHURCH – ASBESTOS ABATEMENT OVERSIGHT AND VERIFICATION**

Mr. Wilhelm:

Marshall Environmental Management, Incorporated (MEM) has completed the oversight of the wet demolition of the Mt. Zion Church located at 604 East 7<sup>th</sup> Street in Atoka, Oklahoma. As part of the wet demolition, MEM was onsite for the entirety of the project and also conducted a visual inspection following the demolition of the structure. As part of the regulated ACM (i.e., the abatement is regulated by the Oklahoma Department of Labor) abatement of the friable joint compound, Marshall Environmental Management provided an asbestos abatement project design for the abatement contractor, Environmental Action.

MEM was onsite from October 18<sup>th</sup> through October 20<sup>th</sup>, 2021, and conducted the final walkthrough on October 20<sup>th</sup> 2021, of the entire property following abatement activities. Based on the visual inspection, the wet demolition of the structure was completed and was considered satisfactory. In conclusion, the determination of compliance was carried out in accordance with Good Industrial Hygiene Practices by Jamie Marshall, Certified Industrial Hygienist (CIH) and President of MEM. Once you have had a chance to review, feel free to call or email with any questions. Thank you for allowing MEM the opportunity to be of service.

Sincerely,

Marshall Environmental Management, Incorporated



Jamie Marshall, MS, CIH

President

ABIH Comprehensive Practice Certificate #10595CP



Location 604 E 7th street Atoka, OK 74525 Date 10/18/2021

Type of Work Activity Wet Demo

---

Industrial Hygienist's Signature

Date/Time

[illegible]



# Marshall Environmental Management Inc.

## Asbestos Air Monitoring Daily Log

Client Name \_\_\_\_\_

Job ID Number 0175-AB-071621

Location 604 E 7<sup>th</sup> Street Atoka, OK 74505

DATE 10/19/2021

Asbestos Contractor EAI

Type of Work Activity Wet Demo

Comments and Pump Condition	
7:00	Lined up the dumpsters
7:30	Started abatement
8:00	Kody Clark went to the dump with the driver
9:30	Mike went with the driver
10:00	Took pictures of the dumpsters
10:30	Walked around the work area
11:00	Took pictures of the dumpster lined up
11:30	Took picture of the dumpster before being
12:00	taken to the dump
12:30	Lunch
13:00	Walked around the work area
13:30	
14:00	Took pictures of dump truck
14:30	
15:00	Walked around the work area
15:30	
16:00	Took last truck load, rest will be picked
16:30	up by hand.
17:00	Finish with the day
17:30	
18:00	
18:30	

Supervisor Name	License Number
Paul Iness	#261524
Worker Name	License Number
Kody Clark	#402833
Rafael Custodio	#402558
Alfredo Ramirez Gomez	#273915
Mike Iness	#271006

Industrial Hygienist's Signature \_\_\_\_\_

Date/Time \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

Date/Time \_\_\_\_\_



# Marshall Environmental Management Inc.

## Asbestos Air Monitoring Daily Log

Client Name \_\_\_\_\_

Job ID Number 0175-AB-071621

Location 604 E 7<sup>th</sup> Street Atoka, OK 74505

DATE 10/20/2021

Asbestos Contractor EAT

Type of Work Activity Wet Demo

Comments and Pump Condition	
7:00	Arrived at jobsite
7:30	Started abatement
8:00	Walked around the jobsite
8:30	Took pictures
9:00	Walked around the jobsite
10:30	Picked up debris from the ground
11:00	
11:30	
12:00	
12:30	
13:00	
13:30	
14:00	
14:30	
15:00	
15:30	
16:00	
16:30	
17:00	
17:30	
18:00	
18:30	

Supervisor Name	License Number
Paul Iness	# 261524
Worker Name	License Number
Kody Clark	# 402833
Rafael Custodio	# 402588
Alfredo Ramirez Gomez	# 273115
Michael Iness	# 271006

Industrial Hygienist's Signature \_\_\_\_\_

Date/Time \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

Date/Time \_\_\_\_\_



















# ENVIRONMENTAL ACTION INC.

November 8, 2021

Oklahoma Department of Labor  
3017 N. Stiles, Suite 100  
Oklahoma City, OK 73105

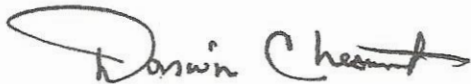
RE: Former Mt Zion Church Closeout Documents

The following documents are enclosed for your records:

- Air monitoring results
- Waste disposal manifest

Please call if you need any additional information in order to complete your file.

Sincerely,  
ENVIRONMENTAL ACTION, INC.

A handwritten signature in dark ink, appearing to read "Darwin Chesnut". The signature is fluid and cursive, with a large loop at the beginning and a trailing flourish at the end.

Darwin Chesnut  
President

ENCLOSURES

**Tulsa Office: P.O. Box 1029 • Jenks, OK 74037 • (918) 298-4080**

OKC Office: 1644 NW 5<sup>th</sup> Street • Oklahoma City, OK 73106 • (405) 684-8900

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section, I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

No. 1887

## Section I

### GENERATOR ( Generator completes all of Section I)

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Par. Mt. Zion Chur  
d. Address: 604 E. 7th St.  
Atoka, OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, Asbestos, 9, NA2212, PGI II

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Juan Prieto

Generator Authorized Agent Name

Signature

Containers  
k. Quantity Units No. Type  

1	0	1	8	2	1
---	---	---	---	---	---

Shipment Date

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmental Action, Inc.  
b. Address: P.O. Box 1029,  
Jenks, OK 74037  
c. Driver Name/Title: Juan Prieto  
d. Phone No.: 918-298-4080 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

g. Juan Prieto

1	0	1	8	2	1
---	---	---	---	---	---

  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 10200 N. I-35 Svc. Rd.  
OKC, OK 73151  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

n. Juan Prieto

1	0	1	8	2	1
---	---	---	---	---	---

  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 Hwy. 271 S.  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3885  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Elton S. Searles

1	0	1	8	2	1
---	---	---	---	---	---

 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action, Inc. b. Shipper's Phone No.: 918-298-4080  
c. Shipper's Address: P.O. Box 1029, Jenks, OK 74307  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: Juan Prieto, Super. b. Shipper's Phone No.: 580-298-3729

1	0	1	8	2	1
---	---	---	---	---	---

  
Name of Responsible Agency: ODEQ, 707 N. Robinson, OKC, OK 73101 Date

f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☒ Friable ☐ Non-Friable ☐ Both \_\_\_\_\_ % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section, I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

No. 1888

## Section I

### GENERATOR ( Generator completes all of Section I)

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Mr. Mt. Zion Ch.  
d. Address: 604 E. 7th St  
Atoka, OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, Asbestos, 9, NA2212, PGIII

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Juan Prieto

Generator Authorized Agent Name

Signature

Containers  
k. Quantity Units No. Type  

1	0	0	3	1	T
---	---	---	---	---	---

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

101821

Shipment Date

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmetnal Action, Inc.  
b. Address: P.O. Box 1029  
Jenks, OK 74037  
c. Driver Name/Title: 198-298-4080  
d. Phone No.: Juan Prieto e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. Acknowledgement of Receipt of Materials: 101821  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 0200 N. 1-35 Svc. Rd.  
OKC, OK 73131  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. Acknowledgement of Receipt of Materials: 101821  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 Hwy. 271 S.  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3835  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above nemed material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Everett Mann 101821 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action, Inc.  
P.O. Box 1029, Jenks, OK 74037  
c. Shipper's Address: \_\_\_\_\_  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

b. Shipper's Phone No.: 918-298-4080

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: Jaun Prieto, Super. b. Shipper's Phone No.: 101821  
ODEQ, 707 N. Robinson, OKC, OK 73101 Date

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☒ Friable ☐ Non-Friable ☐ Both \_\_\_\_\_ % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section, I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

No. 1889

## Section I

### GENERATOR ( Generator completes all of Section I)

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Emr. Mt. Zion Ch.  
d. Address: 604 E. 7th St.  
Atoka, OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, Asbestos, 9, NA2212, PGIII

k. Quantity  
Containers  
Units No. Type  

			60						
--	--	--	----	--	--	--	--	--	--

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Juan Prieto

Generator Authorized Agent Name

Signature

10/18/21

Shipment Date

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmetnal Action, Inc.  
b. Address: P.O. Box 1029  
Jenks, OK 74037  
c. Driver Name/Title: Juan Prieto  
d. Phone No.: 580-918-2984  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

g. [Signature] 10/18/21  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Medwest Wrecking  
i. Address: 10200 N. I-35 Svc. Rd.  
OKC, OK 73131  
j. Driver Name/Title: Tommie Noble  
k. Phone No.: 405-834-2599 l. Truck No.: 212  
m. Vehicle License No./State: 701-150 OK

Acknowledgement of Receipt of Materials:

n. [Signature] 10/18/21  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton DLews Const. Landfill  
194069 Hwy. 271 S.  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3885  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above nemed material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 10/18/21 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental action, Inc.  
c. Shipper's Address: P. O. Box 1029, Jenks, OK 74037  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

b. Shipper's Phone No.: 918-298-4080

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: Juan Prieto, Super. b. Shipper's Phone No.: \_\_\_\_\_

f. Name and Address of Responsible Agency: ODEC, 707 N. Robinsn, OKC, OK 73101

g. ☒ Friable ☐ Non-Friable ☐ Both \_\_\_\_\_ % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

**No. 1890**

## Section I

### GENERATOR ( Generator completes all of Section I)

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Emr. Mt. Zion Ch.  
d. Address: 604 E. 7th St.  
Atoka, OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, Asbestos, 9, NA2212, PGIII

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

Containers  
k. Quantity Units No. Type  
60 3 1 1

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

101921

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmental Action Inc.  
b. Address: P.O. Box 1029,  
Jenks, OK 74037  
c. Driver Name/Title: Paul Iverson  
d. Phone No.: 918-298-4080 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

g. Paul Iverson 101921  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 10200 N. I-35 Sve. Rd.  
OKC, OK 73131  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

n. 101921  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 Hwy. 271 S.  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3885  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Secrett Mann 101921 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental action, Inc. b. Shipper's Phone No.: 918-298-4080  
c. Shipper's Address: P. O. Box 1029, Jenks, OK 74037  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: Paul Iverson Supervisor f. Shipper's Phone No.: 4056423151 101921  
g. 10 % Friable 10 % Non-Friable  
Name and Address of Responsible Agency: 707 N. Robinson, OKC, OK 73101  
Date

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section, I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

No. 1891

## Section I

### GENERATOR (Generator completes all of Section I)

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Bar. Mt. Zion Ch.  
d. Address: 604 E. 7th St.  
Atoka, OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, ASbestos, 9, NA2212, PGIII

Containers  
k. Quantity Units No. Type  
1 60 3 1 T

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

101821

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmental Action, Inc.  
b. Address: P.O. Box 1029,  
Jenks, OK 74037  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 918-298-4080 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials: \_\_\_\_\_  
g. [Signature] 101821  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 10200 N. I-35 Svc. Rd.  
OKC, OK 73131  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials: \_\_\_\_\_  
n. [Signature] 101821  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 S. Hwy. 271,  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3885  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Everett Harris 101821 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action, Inc.  
P. O. Box 1029, Jenks, OK 74037  
c. Shipper's Address: \_\_\_\_\_  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

b. Shipper's Phone No.: 918-298-4080

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: [Signature] b. Shipper's Phone No.: 1056423151 101821  
Date

f. Name and Address of Responsible Agency: 701 N. Robinson, OKC, OK 73101

g. ☒ Friable ☐ Non-Friable ☐ Both \_\_\_\_\_ % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

**No. 1892**

## Section I

### GENERATOR ( Generator completes all of Section I )

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Mr. Mt. Zion Ch.  
d. Address: 604 E. 7th St.  
Atoka, OK 74525

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, Asbestos, 9, NA2212, PGIII

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

PAUL INESS  
Generator Authorized Agent Name

[Signature]  
Signature

101921  
Shipment Date

#### Containers

k. Quantity	Units	No.	Type
<u>60</u>	<u>3</u>	<u>1</u>	<u>T</u>

#### TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

#### UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmetnal Action, Inc.  
b. Address: P.O. Box 1029  
Jenks, OK 748027  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 918-298-4080 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

g. [Signature] 101921  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 10200 N. I-35 Svc. Rd.  
OKC, OK 73131  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

n. [Signature] 101921  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 S. Hwy. 271  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3885  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above nemed material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 101921 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action, Inc. b. Shipper's Phone No.: 918-298-4080  
c. Shipper's Address: P. O. Box 1029, Jenks, OK 74037  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: PAUL INESS SUPERVISOR b. Shipper's Phone No.: 101921

f. Name and Address of Responsible Agency: Q. 707 N. Robinson, OKC, OK 731010

g. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section, I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

**No. 1893**

## Section I

### GENERATOR ( Generator completes all of Section I )

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Far. Mt. Zion Ch.  
d. Address: 604 E. 7th St.  
Atoka, OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, Asbestos, 9, NA2212, PGIII

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

#### Containers

k. Quantity Units No. Type  
60 3 1 T

#### TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

#### UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

11011921

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmental Action, Inc.  
b. Address: P.O. Box 1029  
Jenks, OK 74037  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 918-298-4080 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

g. [Signature] 11011921  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 10200 N. I-35 Svc. Rd.  
OKC, OK 73131  
j. Driver Name/Title: Tommie Noble  
k. Phone No.: 405-334-2599 l. Truck No.: 212  
m. Vehicle License No./State: 701-1500K

Acknowledgement of Receipt of Materials:

n. [Signature] 11011921  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 S. Hwy. 271  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-37299  
580-298-3885  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action, Inc.  
P.O. Box 1029, Jenks, OK 74037  
c. Shipper's Address: \_\_\_\_\_  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

b. Shipper's Phone No.: 918-298-4080

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: [Signature] b. Shipper's Phone No.: 405-642-3151 11011921  
f. Name and Address of Responsible Agency: ODEQ, 707 N. Robinson, OKC, OK 73101 Date

g. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

No. 1895

## Section I

### GENERATOR ( Generator completes all of Section I)

a. Generator Name: City of Atoka  
c. Address: 353 S. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Emr. Mt. Zion Ch.  
d. Address: 604 E. 7th St.  
Atoka, OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ, Asbestos, 9, NA2212, PGI II

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

10/19/21

Containers  
k. Quantity Units No. Type  
6 9 1 1

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

#### TRANSPORTER I

a. Name: Environmental Action, Inc.  
b. Address: P. O. Box 1029  
Jenks, OK 74037  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 918-298-4080 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

g. Paul L. Ness 10/19/21  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 10200 N. I-35 Svc. Rd.  
OKC, OK 73101  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

n. Paul L. Ness 10/19/21  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 S. Hwy. 271  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3882  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Everett Mann 10/19/21 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action, Inc.  
c. Shipper's Address: P. O. Box 1029, Jenks, OK 74037  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

b. Shipper's Phone No: 918-298-4080

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title Paul L. Ness Supervisor b. Shipper's Phone No 580-642-3151 10/19/21

f. Name and Address of Responsible Agency: ODEQ, 707 N. Robinson, OKC, OK 73101

g. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section, I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

No. 1896

## Section I GENERATOR ( Generator completes all of Section I)

a. Generator Name: City of Atoka  
c. Address: 353 E. A St.  
Atoka, OK 74525  
e. Phone No.: 580-889-3341

b. Generating Location: Mr. Mt. Zion Ch.  
d. Address: 604 E. 7th St.  
Atoka, OK 74525

If Owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_  
RQ, Asbestos, 9, NA222, PGIII

Containers  
k. Quantity Units No. Type  
60 31 1 T

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC  
BAG OR WRAP  
T - TRUCK  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

### TRANSPORTER I

a. Name: Enviornmental Action, Inc.  
b. Address: P. O. Box 1092  
Jenks, OK 74037  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 918-298-4080  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

g. Paul Inness 10/19/21  
Driver Signature Shipment Date

### TRANSPORTER II

h. Name: Midwest Wrecking  
i. Address: 10200 N. I-35 Svc. Rd.  
OKC, OK 73131  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:

n. James B. Lip 10/19/21  
Driver Signature Shipment Date

## Section III DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Const. Landfill  
194069 S. Hwy. 271  
b. Physical Address: Antlers, OK 74523

c. Phone No.: 580-298-3729  
580-298-3885  
d. Fax No.: \_\_\_\_\_

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above nemed material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Evan Gaudin 10/19/21 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action, Inc.  
P. O. Box 1029, Jenks, OK 74037  
b. Shipper's Phone No.: 918-298-4000  
c. Shipper's Address: \_\_\_\_\_  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: Paul Inness Supervisor b. Shipper's Phone No.: 105642-3151 10/19/21  
ODEO, 707 N. Robinson, OKC, OK 73101 Date  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section, I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

No. 1920

## Section I

GENERATOR ( Generator completes all of Section I )

a. Generator Name: CITY OF ATOKIA  
c. Address: 353 EAST  
ATOKIA OK 74525  
e. Phone No.: 580 8889-3341

b. Generating Location: Former Mt Zion Church  
d. Address: 604 E 7th St  
Atoka OK 74525  
f. Phone No.: \_\_\_\_\_

If Owner of the generating facility differs from the generator, provide:

q. Owner's Name: \_\_\_\_\_

#### h. Owner's Phone No:

j. Description of Waste:

k. Quantity	Containers		
	Units	No.	Type

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL PLASTIC BAG OR WRAP
T	- TRUCK
Q	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M <sup>3</sup>	- CUBIC METERS
Y <sup>3</sup>	- CUBIC YARDS
O	- OTHER

RQ Asbestos 9 NA 2212 PG 111

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: ENVIRONMENTAL ACTION INC

b. Address: PO Box 1029  
JENKS OK 74354

c. Driver Name/Title: DAVID L. WEST


d. Phone No.: 918 298 4080 e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_

## TRANSPORTER II

h. Name: midwest wrecking  
i. Address: 10200 N I-35 Service Rd  
j. Driver Name/Title: Tommie Noble  
k. Phone No.: 402 834 2344 l. Truck No. 312  
m. Vehicle License No./State: 701-750 078

Acknowledgement of Receipt of Materials:

g.  Driver Signature      10/17/21 Shipment Date

Acknowledgement of Receipt of Materials:

n. Samuel N. N. N. 10/19/21  
Driver Signature Shipment Date

### Section III

DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Charles David Combs Landfill  
b. Physical Address: 194669 US Hwy 374  
Amfloss, OK. 74523

c. Phone No.: (580) 398-3787

e. Discrepancy Indication Space:

I hereby certify that the above nemed material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Elton G. Smalley \_\_\_\_\_  
Name of Authorized Agent Signature

1	0	1	8	2	1
---	---	---	---	---	---

02/

Receipt Date

## Section IV

ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: Environmental Action

c. Shipper's Address: PO Box 1029 Joplin MO

b. Shipper's Phone No.: 4037

d. Shipper's Special Handling Instructions and Additional Information:

**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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title Paul Iness Supervisor

b. Shipper's Phone No.: 105 642 3151 101921

f. Name and Address of Responsible Agency: DDFB 707 N

Q. <input checked="" type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both	% Friable	% Non-Friable
100		

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

**No. 1922**

## Section I GENERATOR ( Generator completes all of Section I )

a. Generator Name: City of Atoka  
c. Address: 3531 E A ST  
ATOKA OKLA 74525  
e. Phone No.: 580 889 3341  
If Owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_

b. Generating Location: FMR Mt Zion Church  
d. Address: 604 E 7th ST  
ATOKA OKLA 74525  
f. Phone No.: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_

j. Description of Waste: \_\_\_\_\_

RQ Asbestos 9 NAZZ12 PG111

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

PAUL INESS \_\_\_\_\_  
Generator Authorized Agent Name Signature

Containers

k. Quantity Units No. Type  
60 93 1 T

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

101921

Shipment Date

## Section II TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I  
a. Name: ENVIRONMENTAL ACTION  
b. Address: PO Bx 1029  
JANKS OK 74037  
c. Driver Name/Title: PAUL INESS  
d. Phone No.: 918 298 4080  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials: \_\_\_\_\_  
g. Paul Iness 101921  
Driver Signature Shipment Date

TRANSPORTER II  
h. Name: MIDWEST WRECKING  
i. Address: 10200 N I-75 SW. Rd  
OKC OK 73131  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ I. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials: \_\_\_\_\_  
n. Mike V 101921  
Driver Signature Shipment Date

## Section III DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis Corp Landfill  
b. Physical Address: 19410th 115 Hwy 371  
Clinton, OK. 74523

c. Phone No.: 580 298 3731  
d. Fax No.: 580 298 3885

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Everett Harris 101921 02/  
Name of Authorized Agent Signature Receipt Date

## Section IV ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: ENVIRONMENTAL ACTION b. Shipper's Phone No.: 918 298 4080  
c. Shipper's Address: PO Bx 1029 JANKS OK 74037  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: PAUL INESS SUPERVISOR b. Shipper's Phone No.: 405 642 3151 101921  
f. Name and Address of Responsible Agency: ODEQ 707 N Robinson OKC OKLA 73101 Date  
g. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Section I, II, III, and IV  
If waste is NOT asbestos waste, complete only Section I, II, and III

**No. 1933**

## Section I

### GENERATOR (Generator completes all of Section I)

a. Generator Name: CITY OF ATOKA  
c. Address: 353 E 1<sup>st</sup> ST  
ATOKA OKLA 74525  
e. Phone No.: 580 889 3341  
If Owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_

b. Generating Location: AMR. Mt. Zion Church  
d. Address: 604 E 7th St  
ATOKA OKLA  
f. Phone No.: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_

j. Description of Waste: Asbestos 9 NM 2212 PB 11  
k. Quantity: 60 Units 431 No. TP Type

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40CFR. Part 261 or any applicable state laws, has been properly described, classified and packaged, and in proper condition for transportation according to applicable regulations; **AND if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restriction, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Paul Inness  
Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_

101921  
Shipment Date

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC BAG OR WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II

### TRANSPORTER (Generator completes a-d; Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I  
a. Name: ENVIRONMENTAL ACTION  
b. Address: PO BOX 1029  
JENKS OKLA 74037  
c. Driver Name/Title: PAUL INNESS  
d. Phone No.: 918-298-4080 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_

TRANSPORTER II  
h. Name: MIDWEST WRECKING  
i. Address: 10200 N I-35 SRV: Rd  
OKC OKLA 73131  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials:  
g. Paul Inness  
Driver Signature \_\_\_\_\_ Shipment Date 101921

Acknowledgement of Receipt of Materials:  
n. Paul Inness  
Driver Signature \_\_\_\_\_ Shipment Date 101921

## Section III

### DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: Clinton Lewis (mpt) Landfill  
b. Physical Address: 19416 115th Ave NW  
Andover, OK. 74523

c. Phone No.: (580) 298-3724  
d. Fax No.: (580) 298-3825

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material had been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Elon Standridge  
Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_

101921 02/  
Receipt Date

## Section IV

### ASBESTOS (Generator completes a-d; f, g, Shipper completes e)

a. Shipper's Name: ENVIRONMENTAL ACTION  
c. Shipper's Address: PO BOX 1029 JENKS OKLA 74037  
d. Shipper's Special Handling Instructions and Additional Information: \_\_\_\_\_

b. Shipper's Phone No.: 918-298-4080

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/placard, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

e. Shipper's Name & Title: PAUL INNESS SUPERVISOR

b. Shipper's Phone No.: 101921  
Date

f. Name and Address of Responsible Agency: ODEP 707 N ROBINSON OKC OK 73100

g. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable \_\_\_\_\_ % Non-Friable

\*Shipper refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation, operation, or both.



Collection Date: 10-18-21		Client: EAI	
Activities: WET DEMO		Contact Name: DARWIN CHESNUT	
Project Number:		Contract Info.: 405-631-2351	
Project Name: CHURCH		Contractor: EAI	
Address: P.O. Box 771 Blanchard, OK. 73010 405.618.7660		Supervisor: PAUL JNESS	

Sample ID	Sampling Location	Start Time	End Time	Total Minutes	Start Flow	End Flow	Average Flow	Total Volume	Filter Count	Fields	F/Inn	F/Out	L.C.L.	U.C.L.	Detection Limit
01	KODY CLARK 402833	14:30	16:42	132.00	2.50	2.40	2.45	323.4	6.0	100	7.6433	B.D.L.	0.006	0.013	0.0152
02	RAFAEL CUSTODIO 402588	14:34	16:42	128.00	2.50	2.40	2.45	313.6	5.5	100	7.0064	B.D.L.	0.005	0.012	0.0156
03	WORK AREA	14:15	16:43	148.00	2.50	2.50	2.50	370	4.5	100	5.7325	B.D.L.	0.004	0.008	0.0133
04	OPERATOR CAB	14:17	16:40	143.00	2.50	2.30	2.40	343.2	2.0	100	2.5478	B.D.L.	0.002	0.004	0.0143
05	UP WIND	14:19	16:46	147.00	2.50	2.50	2.50	367.5	2.0	100	2.5478	B.D.L.	0.002	0.004	0.0133
06	DOWN WIND	14:22	16:44	142.00	2.50	2.50	2.50	355	4.0	100	5.0955	B.D.L.	0.003	0.008	0.0138
07	DECON	14:04	16:48	164.00	2.50	2.2	2.50	410	3.5	100	4.4586	B.D.L.	0.003	0.006	0.0120
08	DECON NEG. AIR	14:05	16:48	163.00	2.50	2.50	2.50	407.5	1.0	100	1.2739	B.D.L.	0.001	0.002	0.0120
09	BLANK									100					
10	BLANK									100					

Personal Protective Equipment	Analytical Method: NIOSH 7400	Field Technician: TEDDY JENKINS
Tyvek	ALHA PAT ID#: 212734	Analyst (Print): TEDDY JENKINS
Full Face APR	Microscope: 100	Analyst Signature: <i>Teddy Jenkins</i>
	Filter Area: 385	Date: 10-18-21
	Field Area: 0.01	



Collection Date: 10-20-21		Client: EAI	
Activities: WET DEMO		Contact Name: DARWIN CHESNUT	
Project Number:		Contact Info.: 405-631-2351	
Project Name: CHURCH		Contractor: EAI	
Address: P. O. Box 771 Blanchard, OK. 73010 405 618 7660		Supervisor: PAUL JNESS	

Sample ID	Sampling Location	Start Time	End Time	Total Minutes	Start Flow	End Flow	Average Flow	Total Volume	Fiber Count	Fibers /mm <sup>3</sup>	F/ce	L.C.L.	U.C.L.	Detection Limit	
01	KOBY CLARK 402833	07:30	10:12	162.00	2.50	2.40	2.45	396.9	5.0	100	6.3694	B.D.L.	0.004	0.009	0.0124
02	RAFAEL CUSTODIO 402588	07:34	10:15	161.00	2.50	2.40	2.45	394.45	4.0	100	5.0955	B.D.L.	0.003	0.007	0.0124
03	WORK AREA	07:13	10:20	187.00	2.50	2.50	2.50	467.5	6.0	100	7.6433	B.D.L.	0.004	0.009	0.0105
04	OPERATOR CAB	07:17	10:28	191.00	2.50	2.40	2.45	467.95	3.5	100	4.4586	B.D.L.	0.002	0.005	0.0105
05	UP WIND	07:21	10:24	183.00	2.50	2.50	2.50	457.5	3.0	100	3.8217	B.D.L.	0.002	0.004	0.0107
06	DOWN WIND	07:22	10:26	184.00	2.50	2.50	2.50	460	4.0	100	5.0955	B.D.L.	0.003	0.006	0.0107
07	DECON	07:15	10:30	195.00	2.50	2.2	2.50	487.5	1.0	100	1.2739	B.D.L.	0.001	0.001	0.0101
08	DECON NEG. AIR	07:24	10:36	192.00	2.50	2.50	2.50	480	2.0	100	2.5478	B.D.L.	0.001	0.003	0.0102
09	BLANK									100					
10	BLANK									100					

Personal Protective Equipment	Analytical Method: NIOSH 7400	Field Technician: TEDDY JENKINS
Tyvek	ATMA PAT ID#: 212734	Analyst (Print): TEDDY JENKINS
Full Face APR	Microscope: 100	Analyst Signature: <i>Teddy Jenkins</i>
	Filter Area: 385	Date: 10-20-21
	Field Area: 0.01	





### Abatement Preparation Inspection Form

Abatement Project: Mt. Zion Church Date: 10-18-21 Time: 1130  
Project No.: \_\_\_\_\_ Phase: Wet Demo  
Project Address/Location: 604 E. 7th City: Atoka Zip: \_\_\_\_\_  
Contractor: EAI Contact Person: Juan Prieto

A = Acceptable  
D = Denied; must be correct and re-inspected before asbestos removal is begun  
N/A = Not applicable to this project

X = Deficiencies which must be corrected before asbestos removal begins. If the only deficiencies are the "X" type, after correction, asbestos abatement may begin.  
\*\*Beginning asbestos removal before the deficiencies are correct shall constitute a Serious Violation.

- A D N/A X
- (1) Work site barriers and warning signs.....☐ ☐ ☐ ☒
  - (2) Toilet facilities provided.....☐ ☐ ☐ ☐
  - (3) Worker licenses.....☒ ☐ ☐ ☐
  - (4) Emergency telephone #s.....☒ ☐ ☐ ☐
  - (5) OSHA forms, poster (min. wage, workers comp, equal opportunity).....☒ ☐ ☐ ☐
  - (6) Air mon., results from prior phases, if applicable.....☐ ☐ ☒ ☐
  - (7) Respirator program and project design on-site.....☒ ☐ ☐ ☐
  - (8) Current Fit Test.....☒ ☐ ☐ ☐
  - (9) NIOSH approved respirators, clean, parts in working order.....☒ ☐ ☐ ☐
  - (10) Electrical panel outside work area.....☒ ☐ ☐ ☐
  - (11) Electrical system in abatement area locked out/ tagged out.....☒ ☐ ☐ ☐
  - (12) Temporary wiring installed by licensed electrician.....☐ ☐ ☒ ☐
  - LIC #: \_\_\_\_\_
  - (13) Temporary panel boards properly grounded.....☒ ☐ ☐ ☐
  - (14) Ground fault interruption provided from outside work area.....☒ ☐ ☐ ☐
  - (15) Live electrical requirement met.....☐ ☐ ☒ ☐
  - (16) Extension cords in acceptable condition.....☒ ☐ ☐ ☐
  - (17) Equipment properly grounded.....☒ ☐ ☐ ☐
  - (18) De-con firmly constructed, opaque, with triple flaps.....☐ ☐ ☒ ☐

- A D N/A X
- (19) Storage lockers for workers and ODOL inspectors' street clothes.....☒ ☐ ☐ ☐
  - (20) Shower with hot water supply, stable nonskid surface, lights.....☒ ☐ ☐ ☐
  - (21) Shower drains, filter, proper water disposal.....☒ ☐ ☐ ☐
  - (22) Soap from dispenser, and towels provided.....☒ ☐ ☐ ☐
  - (23) Hearing protection provided if required.....☐ ☐ ☒ ☐
  - (24) Hard hats provided, if required.....☒ ☐ ☐ ☐
  - (25) Appropriate footwear/safety shoes provided, if required.....☒ ☐ ☐ ☐
  - (26) Ventilation serving or passing through the abatement area deactivated.....☐ ☐ ☒ ☐
  - (27) Critical barriers in place.....☒ ☐ ☐ ☐
  - (28) Neg. air quantity and pressure drop, confirmed on-site with recording manometer.....☒ ☐ ☐ ☐
  - (29) Neg. air machine(s) have properly installed filters, clean pre-filters.....☒ ☐ ☐ ☐
  - (30) Prep. work secure with negative air on.....☐ ☐ ☒ ☐
  - (31) Make-up air sources provide adequate circulation and air cleaning.....☐ ☐ ☒ ☐
  - (32) Access controlled.....☐ ☐ ☒ ☐
  - (33) Scaffolding over 10' high has 42" side rails and 4" toe boards.....☐ ☐ ☒ ☐
  - (34) Scaffolding from 4' to 10' high, but less than 42" wide, has side rails.....☐ ☐ ☒ ☐

- A D N/A X
- (35) Scaffolding with people working under has mesh or solid barrier on platform.....☐ ☐ ☒ ☐
  - (36) Scaffolding floorboards in good condition and secured.....☐ ☐ ☒ ☐
  - (37) Aerial lifts have full-body harness with shock lanyards.....☐ ☐ ☒ ☐
  - (38) Ladders are non-conducting and stable.....☒ ☐ ☐ ☐
  - (39) Heat stress monitors in place.....☐ ☐ ☒ ☐
  - (40) HEPA vacuum is clean with filters properly installed.....☐ ☐ ☒ ☐
  - (41) Temporary lighting is adequate and properly wired and grounded.....☐ ☐ ☒ ☐
  - (42) 10 # ABC fire extinguishers inspected.....☒ ☐ ☐ ☐
  - (43) Adequate escape routes are properly marked and illuminated with emergency lighting and battery back-up.....☐ ☐ ☒ ☐
  - (44) Acceptable amended water sprayers and chemicals provided.....☒ ☐ ☐ ☐
  - (45) Load-out sealed unless needed for make-up air.....☐ ☐ ☒ ☐
  - (46) Disposal bags and/or barrels provided and properly labelled.....☒ ☐ ☐ ☐
  - (47) Disposal vehicle properly lined.....☒ ☐ ☐ ☐
  - (48) Area monitoring locations identified.....☒ ☐ ☐ ☐
  - (49) Other.....☐ ☐ ☐ ☐

# OF GLOVEBAGS

# OF FULL CONTAINMENTS

# OF MINI CONTAINMENTS

Recommendations & Remarks: (1) (32) Contractor must have fencing in place for security prior to leaving the site. Orange construction fence is not intructed for security. Chainlink will be used per conversation with supervisor.

Prep Accepted

Orders:

☐ Imminent Danger

Inspector's Signature

Contractor's or Representative's Signature



# Oklahoma Department of Labor

3017 North Stiles, Suite 100  
Oklahoma City, OK 73105  
(405-521-6464) FAX (405-521-6025)

## Asbestos Division



### Visual/Final Inspection Form

DOL Project #: \_\_\_\_\_  
Facility: Mt. Zion Church  
Contractor #: 110170  
Address/Location: 604 E. 7th  
Owner/Occupant: City of Atoka  
Contact Name: \_\_\_\_\_  
Facility Phone #: (580) 889-3341

Month 10 Day 20 Year 21 Time 1130  
County #: \_\_\_\_\_ FY #: 21  
Address City: Atoka  
Contractor: EAI  
Contractor's Rep.: Paul Iness  
Contractor's Phone #: (405) 642-3151

1. Description of Area: West Demolition of structure

2. Areas requiring further cleaning: None

3. Air Counts (PCM/TEM) On-Site?: last shift Accepted

4. DOL Recommendations: None

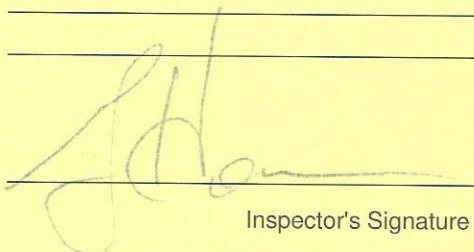
5. Will a FINAL inspection be required?: This is final

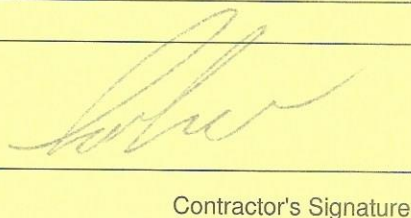
6. Notes: Visual & Final Accepted.

\* Project is complete.

7. Note any violations cited: 380:50-

8. Contractor's Comments: \_\_\_\_\_

  
Inspector's Signature

  
Contractor's Signature



## Asbestos Project Checklist

☒ Initial Notification

☐ Revised Notification

☐ Emergency Notification

	NAME	ADDRESS	CITY	PHONE
Job Site:	Former Mt Zion Church	604 E 7th Street	Atoka, OK 74525	None
Contractor:	Environmental Action, Inc.	PO Box 1029	Jenks, OK 74037	918 298-4080
Site Owner:	City of Atoka	353 E A Street	Atoka, OK 74525	580 889-3341
Gen. Contractor:	N/A			
Project Designer:	Jamie Marshall	1301 N Martin Luther King Ave	OKC, OK 73117	405 616-0401
Air Monitoring Firm:	ASTECH	PO Box 771	Blanchard, OK 73010	405 618-7660
Air Monitoring Firm:				
Landfill:	Waste Connections Oklahoma City Landfill	7600 SW 15th Street, OKC, OK		405 745-3091
Hauler:	Environmental Action, Inc.	P.O. Box 1029	Jenks, OK 74037	918 298-4080

MOBILIZATION DATE: 10/15/2021 SCHEDULED DATE OF ASBESTOS REMOVAL: 10/18/2021  
PROJECT COMPLETION DATE: 10/30/2021 RENOVATION: ☐ DEMOLITION: ☒ EMERGENCY: ☐  
TYPE AND PERCENTAGE ASBESTOS (ATTACH LAB REPORTS): Asbestos Containing Drywall Joint Compound Materials - Assumed

AMOUNT OF ASBESTOS TO BE ABATED: 4500 SF Building Structure

ABATEMENT TECHNIQUES: Wet Demo

SUBMITTALS NECESSARY BEFORE ABATEMENT MAY BEGIN. CHECK OFF ONLY THOSE ATTACHED TO THIS CHECKLIST OR WHICH ARE ON FILE AT THE OKLAHOMA DEPARTMENT OF LABOR.

☒ NESHAPS Notification (Copy)

☒ Project Specifications

☐ Bonds and/or Insurance Certificates

☒ Plans for Decontamination Facilities

☐ Respirator Program

☐ Employee Physicals

☐ Permission from owner for all rented vehicles/trailers used to haul asbestos-containing material.

### Variances

A variance is requested on the 10 day notice. The ACM was recently discovered and is delaying renovation.

### FEES

\* \$1000.00 per containment

\* \$350.00 per project not part of a definite containment

\* \$350.00 per project with multiple glovebags or mini-containments, plus \$10.00 per such glovebag or mini-containment

         # of Mini-containments

         # of Glovebags

1 # of Containments

         # of Phases

Comments: \_\_\_\_\_

Darwin Chesnut

Digitally signed by Darwin Chesnut  
Date: 2018.06.15 14:28:04 -0500

Contractor/Responsible Party Signature

9/28/2021

Date



# EPA NOTIFICATION OF DEMOLITION OR RENOVATION

OFFICE USE ONLY: DATE RECEIVED: \_\_\_\_\_ JOB / PERMIT / ID NUMBER \_\_\_\_\_  
\*\*\*\*\*

## I. FACILITY INFORMATION:

OWNER: City of Atoka PHONE: 580 889-3341  
STREET ADDRESS: 353 E A Street CITY: Atoka STATE: OK ZIP: 74525  
FACILITY REPRESENTATIVE: \_\_\_\_\_ PHONE: 580 889-3341

ASBESTOS ABATEMENT CONTRACTOR: Environmental Action, Inc.  
STREET ADDRESS: P.O. Box 1029 CITY: Jenks STATE: OK ZIP: 74037  
REPRESENTATIVE: Don Jolley PHONE: (918) 298-4080  
PAGER: None CELL PHONE: (918) 645-8157

## AIR MONITORING FIRM OR OTHER OPERATOR ASTECH

STREET ADDRESS: PO Box 771 CITY: Blanchard STATE: OK ZIP: 73010  
REPRESENTATIVE: Rodney Hill PHONE: 405 618-7660

II. TYPE OF NOTIFICATION: (O=ORIGINAL) OR (R=REVISED) R

III. TYPE OF OPERATION: (D=DEMOLITION) (R=RENOVATION) (ER=EMERGENCY RENOVATION) D

IV. IS ASBESTOS CONTAINING MATERIAL (ACM) PRESENT? YES XXXXX NO \_\_\_\_\_

## V. FACILITY / BUILDING DESCRIPTION (BE SPECIFIC AND DETAILED AS TO NAME, # FLOORS, EXACT ACM LOCATION, ROOM NUMBERS, ETC.)

FACILITY: Former Mt Zion Church ADDRESS: 604 E 7th Street  
CITY: Atoka STATE: OK ZIP CODE: 74525 COUNTY: Atoka

WHERE IS ACM LOCATED? Drywall Joint Coumpound

BUILDING SIZE: SQ. FEET: 4,500 AGE: 50+ YEARS # OF FLOORS: 1

PRESENT USE: Vacant PREVIOUS USE: Offices & Storage

## VI. PROCEDURES USED TO DETERMINE PRESENCE OF ACM INCLUDING ANALYTICAL METHODS:

Visual inspection of the building -- suspect materials were collected -- analysis by polarized light microscopy

NAME OF EPA ACCREDITED INSPECTOR WHO PERFORMED INSPECTION AND SAMPLING INCLUDING AFFILIATION AND OKLAHOMA DOL LICENSE NUMBER:

Jamie Marshall - Marshall Environmental Management - 400478

## EPA NOTIFICATION OF DEMOLITION OR RENOVATION CONTINUED

**VII. AMOUNTS OF REGULATED ASBESTOS CONTAINING MATERIAL (RACM) TO BE REMOVED; ALSO AMOUNTS OF CATEGORY I OR II MATERIALS WHICH WILL / WILL NOT BE REMOVED (circle one)**

PIPES --LINEAR FT: 0 SURFACING AREA --- SQUARE FEET: 4500 OFF FACILITY COMPONENT:

CUBIC FEET: \_\_\_\_\_ CATEGORY I - SQ FT: 8165 CATEGORY II - SQ. / LN. FT. \_\_\_\_\_

**VIII. SCHEDULED DATES OF ASBESTOS REMOVAL:** START: 10/18/2021 FINISH: 10/30/2021

**IX. SCHEDULED DATES OF DEMO / RENO:** START: N/A FINISH: \_\_\_\_\_

**X. DESCRIPTION OF THE PLANNED ASBESTOS REMOVAL TECHNIQUES TO BE EMPLOYED:**

(e.g. gross removal, glove bagging, manual scrape, etc.)

Wet demolition

**XI. DESCRIPTION OF THE CONTROLS AND WORK PRACTICES TO BE USED TO PREVENT ASBESTOS FIBER EMISSIONS** (e.g. full containment with negative pressure, adequate wetting):

Wet demolition adequate wetting

**XII. LICENSED ASBESTOS WASTE TRANSPORTER:** Environmental Action, Inc.

ADDRESS: PO Box 1029 CITY: Jenks STATE: OK ZIP: 74037

REPRESENTATIVE: Darwin Chesnut PHONE: 405 631-2351

**XIII. STATE PERMITTED ASBESTOS WASTE DISPOSAL SITE:** Waste Connections OKC Landfill

ADDRESS: 7600 SW 15th CITY: OKC STATE: OK ZIP: 73128

REPRESENTATIVE: \_\_\_\_\_ PHONE: (405) 745-3091

**XIV. IS DEMOLITION ORDERED BY A GOVERNMENT AGENCY?** YES: \_\_\_\_\_ NO: XXXX

NAME OF AGENCY: N/A REPRESENTATIVE: \_\_\_\_\_

DATE OF ORDER: \_\_\_\_\_ DATE DEMOLITION IS TO START: \_\_\_\_\_

**XV. IS THIS RENOVATION REQUIRED DUE TO AN EMERGENCY** YES: \_\_\_\_\_ NO: XXXX

DATE OF EMERGENCY: \_\_\_\_\_ HOUR OF DAY EMERGENCY OCCURRED: \_\_\_\_\_

DESCRIPTION OF THE SUDDEN, UNEXPECTED EVENT CAUSING THE EMERGENCY: \_\_\_\_\_

EXPLANATION OF HOW THIS CAUSED 1) UNSAFE CONDITIONS; 2) SERIOUS DISRUPTION OF NORMAL BUILDING OPERATIONS; AND/OR 3) IMPOSES AN UNREASONABLE FINANCIAL BURDEN? (be specific & detailed)



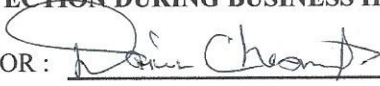
## **EPA NOTIFICATION OF DEMOLITION OR RENOVATION CONTINUED**

**XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NON-FRIABLE ASBESTOS BECOMES FRIABLE** (crumbled, pulverized, abraided, or reduced to powder, etc.):

Stop work, wet the materials, collect and bag loose materials, notify DEQ

\*\*\*\*\*

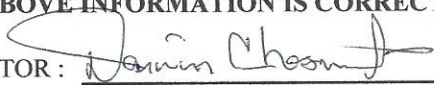
**XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR, PART 61, SUBPART M - NESHP) WILL BE ON SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE OF HIS/HER TRAINING AND CERTIFICATION / LICENSING WILL BE AVAILABLE (OR BE POSTED) FOR INSPECTION DURING BUSINESS HOURS:**

SIGNATURE OF OWNER / OPERATOR :  DATE: 9/28/2021

PRINTED NAME: Darwin Chesnut

\*\*\*\*\*

**XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE:**

SIGNATURE OF OWNER / OPERATOR :  DATE: 9/28/2021

PRINTED NAME: Darwin Chesnut

\*\*\*\*\*

**DEFINITION: OWNER OR OPERATOR** Any person who owns, leases, operates, controls or supervises the facility being demolished or renovated or any person who owns, leases, operates, controls or supervises the demolition or renovation, or both.

\*\*\*\*\*

ADDITIONAL COMMENTS: \_\_\_\_\_

### **EPA NESHP AUTHORITY:**

**OKLAHOMA DEPARTMENT OF ENVIRONMENTAL QUALITY**  
Air Quality Division, 707 N. Robinson, P.O. Box 1677  
OKC, OK 73101-1677 or  
Tulsa Regional Office, 3105 East Skelly Drive, Suite 200  
Tulsa, OK 74105

**NOTE:** Please submit your Notification to the DEQ office closer to your job site.