Perry Medical Center

Perry, OK

Owner: City of Perry

Final Remediation Report

OKLAHOMA
Environmental
Quality

SITE CLEANUP ASSISTANCE PROGRAM

City performed sampling in May of 2024

- Asbestos containing material located in building
- A total of 4650 sq ft of floor tile removed
- A total of 220 pipe fittings removed
- Abatement completed in December of 2024

Table of Contents

Deeds and Legal Documents

Book 0824 Page(s) 0001-0003
I-2018-000513 03/09/2018 2:21 pm
Fee: $ 17.00 Doc: $ 0.00
Sandra Richardson - Noble County Clerk
State of Oklahoma TB

BOOK 0824 PAGE 0001

GENERAL WARRANTY DEED

KNOW ALL MEN BY THESE PRESENTS:

THIS DEED OF CONVEYANCE, made this 12th day of February 2018, by and between the Perry Memorial Hospital Authority, an Oklahoma public trust, with an address of 501 N. 14th Street, Perry, Oklahoma, 73077 (hereinafter the "Grantor"), and the City of Perry, Oklahoma, a municipal corporation, with an address of P. O. Drawer 798, Perry, Oklahoma 73077 (hereinafter the "Grantee").

WITNESSETH, that said Grantor, in consideration of the sum of One Dollar ($1.00) and other valuable consideration, the receipt whereof is acknowledged, by these presents does hereby grant, bargain, sell and convey unto Grantee, its successors and assigns, the following tracts situated in the City of Perry, Noble County, Oklahoma:

The North Eighty-seven and one-half feet (N.87 ½') of Lots One (1) and Two (2), in Block Seventy-two (72) in the Townsite of North and West Perry, situated in the City of Perry, County of Noble, State of Oklahoma, according to the recorded plat thereof, and

The East Thirty-Eight Feet (E.38') of Lot Eleven (11), in Block Seventy-one (71), in the Townsite of North and West Perry, situated in the City of Perry, County of Noble, State of Oklahoma, according to the recorded plat thereof, and

All of Lot Ten (10) and the West Twelve feet (W.12') of Lot Eleven (11), in Block Seventy-one (71), in the Townsite of North and West Perry, situated in the City of Perry, County of Noble, State of Oklahoma, according to the recorded plat thereof, and

Lots Eight (8) and Nine (9), in Block Seventy-one (71), in the Townsite of North and West Perry, situated in the City of Perry, County of Noble, State of Oklahoma, according to the recorded plat thereof, and

Lots Six (6) and Seven (7), in Block Seventy-five (75), in the Townsite of North and West Perry, situated in the City of Perry, County of Noble, State of Oklahoma, according to the recorded plat thereof,

to include any buildings, structures and improvements located thereof and the appurtenances belonging thereto.

TO HAVE AND TO HOLD THE SAME, together with all and singular the tenements, hereditaments and appurtenances thereto belonging or in any wise appertaining forever.

AND said Grantor, for its successors and assigns does hereby covenant, promise and agree to

and with said Grantee, at the delivery of these presents it is lawfully seized in its own right of an absolute and indefeasible estate of inheritance in fee simple of and in all and singular the above granted and described premises with the appurtenances; that the same are free, clear, and discharged and unencumbered of and from all former and other grants, titles, charges, estates, judgments, taxes, assessments and encumbrances, of whatever nature and kind, subject to any easements, rights-of-way, utility easements of record and any other instruments of record.

AND said Grantor will WARRANT AND FOREVER DEFEND the same unto the said Grantee, and unto its successors and assigns, against said Grantor, its successors and assigns and all and every person or persons whomsoever lawfully claiming or to claim the same, subject to any easements, rights-of-way or utility easements of record and other instruments of record.

IN WITNESS WHEREOF, the said party of the first part has executed and delivered this Warranty Deed on this 12th day of February 2018.

"Grantor"

Perry Memorial Hospital Authority,
an Oklahoma public trust

Johnny Fuller, Chairman

Attest Seal

By: Steve Seabolt, Vice Chairman

ACKNOWLEDGEMENT

STATE OF OKLAHOMA]
] SS:
COUNTY OF NOBLE]

Before me, the undersigned, a Notary Public, in and for said State, on this 12th day of February 2018, personally appeared Johnny Fuller, and Steve Seabolt, Chairman and Vice Chairman of the Perry Memorial Hospital Authority, known to me to be the identical persons named herein and acknowledged to me that they executed same as their free and voluntarily act and deed, and on behalf of Perry Memorial Hospital Authority, and such action was authorized by the Perry Memorial Hospital Authority, for uses and purposes therein set forth.

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

Kyla Golay
Notary Public

My Commission Expires: 11-16-21

KYLA GOLAY
Notary Public – State of Oklahoma
Commission Number 05010559
My Commission Expires Nov 16, 2021

NO DOCUMENTARY STAMPS REQUIRED: Transfer to the State of Oklahoma or any of its instrumentalities, agencies, or subdivisions. Exempt Documentary Stamp Tax – O.S. Title 68, Article 32, Sec. 3202.11.

This Intergovernmental Agreement (Agreement) between the Oklahoma Department of Environmental Quality (DEQ) and The City of Perry (City) is for environmental cleanup services provided by DEQ for the Property located at 501 N 14th St., Perry, OK, 73077, Noble 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 October 1st, 2024 or when executed by all parties whichever date occurs of the later and will continue through September 30th, 2025 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 Perry
622 Cedar St
Perry, OK 73077

Nathan Read

Authorized Representative Signature Date

Nathan Read, 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

Authorized Representative Name, Title

Exhibit “A”
Statement of Work

Environmental Access Permit

THIS PERMIT made and entered into by and between **City of Perry** 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 Noble County, Oklahoma, hereinafter referred to as the "Property":

501 N 14th St. Perry, OK, 73077

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 October 1, 2024, and ending September 30, 2025.

2. **USE OF PROPERTY**: PERMITTEE and its consults 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 consults 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: **City of Perry**
(Type or Print)

By: Nathan Reed
(Signature)

Nathan Reed City Manager
(Print Name and Title)

Date: 9/20/24

PERMITTEE: **Oklahoma Department of Environmental Quality**

By: _____
(Signature)

_____
(Print Name)
Director of Support Services, Administrative Services Division

Date: _____

Exhibit “A”
Property Location Map

Inspection Reports

Asbestos Inspection Report

501 N 14th Street
Perry, OK 73077

05/06/2024

Tec-An, Inc / 2517 S. Purdue, OKC, OK 73128 / Ph) 405-681-7076 / Fx) 405-681-7256 / info@tec-an.com / www.tec-an.com

Asbestos Inspection Report

The following is a report for the limited asbestos inspection performed for Nabholz Construction. The inspection was performed within the basement mechanical room, home health office and the 1st floor of the east wing of the hospital. Samples were collected by licensed inspector Grayson Cook (Oklahoma License #-159935) on 4/23/2024. The sampling methods used were based on the guidelines of OSHA 29 CFR 1926.1101. This report consists of the following sections; definitions, sampling results, sampled material description, analytical results, chain of custody and training certificates.

Definitions

1. **Asbestos Containing Building Material (ACBM) - Defined** as any building material that contains **more than 1%** asbestos fibers.
2. **Homogeneous Area -** An area of thermal systems insulation (TSI), surfacing material or miscellaneous material that is uniform in color, texture and date of application. If a building material tests positive for asbestos fibers, then the entire quantity of the homogeneous area is considered positive.
3. **Miscellaneous Material -** Any interior building material on structural components, structural members of fixtures, such as floor and ceiling tiles, and does not include surfacing material or thermal system insulation.
4. **Surfacing Material -** Any material in a building that is sprayed-on, troweled-on or otherwise applied to surfaces for acoustical, fireproofing or other purposes.
5. **Thermal System Insulation (TSI)-** Any building material applied to pipes, fittings, boilers, breeching, tanks, ducts, or other interior structural components to prevent heat loss/gain, or water condensation or for other purposes.

Sampling Results

Homogeneous Area/ Sample Numbers	Description	Material Type	Friable	Quantity
HA11 Sample #'s 27, 28	Top layer of floor tile found under carpet in Home Health	Miscellaneous	No	850 ft2
HA12 Sample #'s 29, 30	Bottom layer of floor tile found under carpet in Home Health	Miscellaneous	No	Included in HA11
HA14 Sample #'s 34, 35, 36	TSI fittings in crawl space and adjacent laundry room. Also found in debris piles in crawl space	TSI	Yes	220 fittings 7,800 ft of crawl space with debris
HA16 Sample #'s 39, 40, 42	Roof flashing and penetration caulking	Miscellaneous	No	1,100 linear feet

HA25 **Sample #'s 60, 61**	2nd layer of floor tile found throughout surgery wing	Miscellaneous	No	3,800 ft2
HA26 **Sample #'s 62, 63**	Multicolored 12x12 floor tile found within the surgery wing	Miscellaneous	No	Included in HA25
HA29 **Sample #'s 11, 12**	2nd layer of floor tile found throughout the surgery wing	Miscellaneous	No	Included in HA 25

Homogeneous Area/Sample Description

A total of 69 samples from 29 homogeneous areas were collected from the property during this inspection.

HA01/ Sample #'s 01, 02 - This Homogeneous Area represents the hot water pipe wrap found in the basement mechanical room. This material is classified as a non-friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The pipe wrap tested negative for asbestos fibers.

HA02/ Sample #'s 03, 04 - This Homogeneous Area represents the chill water pipe wrap found in the basement mechanical room. This material is classified as a non-friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The pipe wrap tested negative for asbestos fibers.

HA03/ Sample #'s 05, 06, 07 - This Homogeneous Area represents the hard packed heater pipe fitting insulation. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The pipe insulation tested negative for asbestos fibers.

HA04/ Sample #'s 08, 09, 10 - This Homogeneous Area represents the chiller water tank end caps found in the basement boiler room. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The tank end caps tested negative for asbestos fibers.

HA05/ Sample #'s 11, 12 - This Homogeneous Area represents the domestic pipe insulation wrapping. This material is classified as a non-friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The pipe wrap tested negative for asbestos fibers.

HA06/ Sample #'s 13, 14, 15- This Homogeneous Area represents the condensate return line fitting insulation. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The pipe insulation tested negative for asbestos fibers.

HA07/ Sample #'s 16, 17, 18 - This Homogeneous Area represents the generator flue insulation runs. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The flue insulation tested negative for asbestos fibers.

HA08/ Sample #'s 19, 20, 21 - This Homogeneous Area represents the generator flue insulation fittings. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The flue insulation tested negative for asbestos fibers.

HA09/ Sample #'s 22, 23, 24 - This Homogeneous Area represents the spray on fire proofing found on the ceiling on the structural components and decking. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The fire proofing tested negative for asbestos fibers.

HA10/ Sample #'s 25, 26 - This Homogeneous Area represents the 2x4 hole and fissure ceiling tiles found in the home health offices. This material is classified as a friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The ceiling tile tested negative for asbestos fibers.

HA11/ Sample #'s 27, 28 - This Homogeneous Area represents the top layer of floor tile found under the carpet in the home health office. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. **The floor tile tested positive for asbestos with 3% Chrysotile fibers.**

HA12/ Sample #'s 29, 30 - This Homogeneous Area represents the bottom layer of floor tile found under the carpet in the home health office. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. **The floor tile tested positive for asbestos with 2% Chrysotile fibers.**

HA13/ Sample #'s 31, 32, 33 - This Homogeneous Area represents old style pipe insulation runs found in the basement laundry and crawlspace. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. The pipe insulation runs tested negative for asbestos fibers.

HA14/ Sample #'s 34, 35, 36 - This Homogeneous Area represents old style pipe insulation fittings and hangers found in the basement laundry and crawlspace. This material is classified as a friable TSI material. Samples were collected and tested according to the Oklahoma asbestos regulations. **The pipe insulation fittings tested positive for asbestos with 10% Amosite and 2% Chrysotile fibers.**

HA15/ Sample #'s 37, 38 - This Homogeneous Area the flat roof sections of the east roof. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The flat roof section tested negative for asbestos fibers.

HA16/ Sample #'s 39, 40, 42 - This Homogeneous Area represents the roof flashing and mechanical roof penetration caulking. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. **The flashing and penetration caulking tested positive for asbestos with 10% Chrysotile fibers.**

HA17/ Sample #'s 41 - This Homogeneous Area represents the black roofing tar found on the flat sections of the roof. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The roofing tar tested negative for asbestos fibers.

HA18/ Sample #'s 43, 44, 45 - This Homogeneous Area represents the skim coat of the wallpapered walls of the surgery wing. This material is classified as a friable surfacing material. Samples were collected and tested according to the Oklahoma asbestos regulations. The skim coat tested negative for asbestos fibers.

HA19/ Sample #'s 46, 47- This Homogeneous Area represents the joint compound associated with the wallpapered walls of the surgery wing. This material is classified as a friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The joint compound tested negative for asbestos fibers.

HA20/ Sample #'s 48, 49, 50 - This Homogeneous Area represents the flat textured sheetrock walls of the surgery wing. This material is classified as a friable surfacing material. Samples were collected and tested according to the Oklahoma asbestos regulations. The flat texture tested negative for asbestos fibers.

HA21/ Sample #'s 51, 52 - This Homogeneous Area represents the joint compound associated with the flat textured walls. This material is classified as a friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The joint compound tested negative for asbestos fibers.

HA22/ Sample #'s 53, 54, 55 - This Homogeneous Area represents the rough wall texture found in the ER section of the hospital. This material is classified as a friable surfacing material. Samples were collected and tested according to the Oklahoma asbestos regulations. The wall texture tested negative for asbestos fibers.

HA23/ Sample #'s 56, 57 - This Homogeneous Area represents the joint compound associated with the rough textured walls of the ER. This material is classified as a friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The joint compound tested negative for asbestos fibers.

HA24/ Sample #'s 58, 59 - This Homogeneous Area represents the 2x2 hole pattern ceiling tile found in the upper level east wing. This material is classified as a friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The ceiling tile tested negative for asbestos fibers.

HA25/ Sample #'s 60, 61 - This Homogeneous Area represents the green and teal 12x12 floor tile found in the surgery wing. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The floor tile tested negative for asbestos fibers. **The red tile found under this tile tested positive at 8% Chrysotile**

HA26/ Sample #'s 62, 63 - This Homogeneous Area represents the tan and blue multicolored 12x12 floor tile found in the surgery wing of the hospital. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. **The floor tile tested positive for asbestos with 2% Chrysotile fibers.**

HA27/ Sample #'s 64, 65 - This Homogeneous Area represents the tan 12 x12 floor tile found in the closets of the surgery wing of the hospital. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The floor tile tested negative for asbestos fibers.

HA28/ Sample #'s 66, 67 - This Homogeneous Area represents the linoleum flooring found in the surgery rooms. This material is classified as a friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. The linoleum flooring tested negative for asbestos fibers.

HA29/ Sample #'s 68, 69- This Homogeneous Area represents the red floor tile found under the layers of flooring in the surgery wing of the hospital. This material is classified as a non-friable miscellaneous material. Samples were collected and tested according to the Oklahoma asbestos regulations. **The floor tile tested positive for asbestos with 8% Chrysotile fibers.**

Recommendations for Response

If the friable pipe insulation is to be disturbed by renovation of demolition activities, it must be removed by an Oklahoma licensed asbestos abatement contractor prior to construction activities. DOL and DEQ must be notified 10 work days prior to abatement. All applicable OSHA and DOL abatement regulations must be followed.

Due to the highly damaged asbestos pipe insulation found in the crawl space, it is recommended that no work be done within the crawl space until the contaminated debris is removed by a licensed contractor and the damaged insulation on the pipe is abated or encapsulated. **Access to the crawl space should be limited and proper PPE should be worn if further investigation is to occur within the crawl space.**

If the non-friable floor tile and roof flashing/penetration caulking is to be disturbed by renovation/demolition procedures, then it must be removed following the OSHA Class II Non-Friable Asbestos Removal Requirements prior to disturbance. It is noted that none of the black floor mastics tested positive for asbestos.

If suspect asbestos containing material is uncovered during renovation/demolition, stop work and have the material tested using PLM procedures.

The quantities in this report will need to be field verified for bidding purposes.

Respectfully,

Grayson Cook Tec-An, Inc. Oklahoma License # 159935
Report Date –05/05/2024

Analytical Results

QUANTEM LABORATORIES
2033 HERITAGE PARK DR, OKLAHOMA CITY, OK 73120 | 1.800.822.1650

Polarized Light Microscopy Asbestos Analysis Report

QuanTEM Lab No. 368388
Account Number: A363

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Date Received: 04/24/2024
Received By: Courtney Holman
Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
001	01	Layered	White Pipe Wrap	Asbestos Not Present	Cellulose 90	Paint
001a		Layered	Tan/Silver Pipe Wrap	Asbestos Not Present	Cellulose 50 Glass Fiber 10	Foil
001b		Layered	Cream Pipe Wrap	Asbestos Not Present	NA	Vinyl
001c		Layered	Yellow Adhesive	Asbestos Not Present	NA	Glue
001d		Layered	Blue Pipe Wrap	Asbestos Not Present	NA	Vinyl
002	02	Layered	White Pipe Wrap	Asbestos Not Present	Cellulose 100	
002a		Layered	White Mastic	Asbestos Not Present	NA	Binder CaCO3

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

QUANTEM LABORATORIES
2033 HERITAGE PARK DR, OKLAHOMA CITY, OK 73120 | 1.800.822.1650

Polarized Light Microscopy Asbestos Analysis Report

QuanTEM Lab No. 368388
Account Number: A363

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Date Received: 04/24/2024
Received By: Courtney Holman
Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)		Non Fibrous
002b		Layered	Silver Pipe Wrap	Asbestos Not Present	Cellulose Glass Fiber	50 10	Foil
002c		Layered	Yellow Insulation	Asbestos Not Present	Glass Fiber	100	
003	03	Layered	White Pipe Wrap	Asbestos Not Present	Cellulose	90	Paint
003a		Layered	White Mastic	Asbestos Not Present	Wollastonite	3	Binder
003b		Layered	Silver Pipe Wrap	Asbestos Not Present	Cellulose Glass Fiber	50 10	Foil
003c		Layered	Tan Insulation	Asbestos Not Present	Glass Fiber	100	

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

QUANTEM LABORATORIES
2033 HERITAGE PARK DR, OKLAHOMA CITY, OK 73120 | 1.800.822.1650

Polarized Light Microscopy Asbestos Analysis Report

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Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)		Non Fibrous
004	04	Layered	Silver Duct Tape	Asbestos Not Present	Synthetic	40	Vinyl Binder
004a		Layered	White Pipe Wrap	Asbestos Not Present	Cellulose	80	Paint
004b		Layered	Blue Pipe Wrap	Asbestos Not Present	NA		Vinyl
005	05	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
006	06	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
007	07	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
008	08	Layered	White Wrap	Asbestos Not Present	Cellulose	90	Paint

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

QUANTEM LABORATORIES
2033 HERITAGE PARK DR, OKLAHOMA CITY, OK 73120 | 1.800.822.1650

Polarized Light Microscopy Asbestos Analysis Report

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Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
008a		Layered	White Mastic	Asbestos Not Present	NA	Binder CaCO3
008b		Layered	Silver Wrap	Asbestos Not Present	Cellulose 50 Glass Fiber 10	Foil
008c		Layered	Yellow Insulation	Asbestos Not Present	Glass Fiber 100	
009	09	Layered	White Wrap	Asbestos Not Present	Cellulose 90	Paint
009a		Layered	Silver/Tan Wrap	Asbestos Not Present	Cellulose 50 Glass Fiber 10	Foil
010	10	Layered	White Wrap	Asbestos Not Present	Cellulose 90	Paint

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2033 Heritage Park Dr, Oklahoma City, OK 73120 | 1.800.822.1650

Polarized Light Microscopy Asbestos Analysis Report

QuanTEM Lab No. 368388
Account Number: A363

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Date Received: 04/24/2024
Received By: Courtney Holman
Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)		Non Fibrous
010a		Layered	Silver/Tan Wrap	Asbestos Not Present	Cellulose Glass Fiber	50 10	Foil
011	11	Layered	Tan Pipe Wrap	Asbestos Not Present	Cellulose	100	
011a		Layered	Blue Pipe Wrap	Asbestos Not Present	NA		Vinyl
012	12	Homogeneous	White Pipe Wrap	Asbestos Not Present	Cellulose	90	Binder
013	13	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
014	14	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
015	15	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3

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Polarized Light Microscopy Asbestos Analysis Report

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Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)		Non Fibrous
016	16	Layered	White Insulation	Asbestos Not Present	Cellulose	35	Gypsum CaCO3 Mica
016a		Layered	Brown Insulation	Asbestos Not Present	Cellulose	100	
017	17	Layered	White Insulation	Asbestos Not Present	Cellulose	35	Gypsum CaCO3 Mica
017a		Layered	Brown Insulation	Asbestos Not Present	Cellulose	100	
018	18	Layered	White Insulation	Asbestos Not Present	Cellulose	35	Gypsum CaCO3 Mica
018a		Layered	Brown Insulation	Asbestos Not Present	Cellulose	100	

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Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)		Non Fibrous
019	19	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
020	20	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
021	21	Homogeneous	Gray Insulation	Asbestos Not Present	Glass Fiber	15	CaCO3
022	22	Homogeneous	Gray Fireproofing	Asbestos Not Present	Glass Fiber	90	CaCO3
023	23	Homogeneous	Gray Fireproofing	Asbestos Not Present	Glass Fiber	90	CaCO3
024	24	Homogeneous	Gray Fireproofing	Asbestos Not Present	Glass Fiber	90	CaCO3
025	25	Homogeneous	White Ceiling Tile	Asbestos Not Present	Cellulose Glass Fiber	50 30	Perlite Paint

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NVLAP accreditation applies only to analysis performed utilizing EPA—40 CFR Appendix E to Subpart E of Part 763 and EPA/600/R-93/116 methods.
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QUANTEM LABORATORIES
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Polarized Light Microscopy Asbestos Analysis Report

QuanTEM Lab No. 368388
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Received By: Courtney Holman
Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
026	26	Homogeneous	White Ceiling Tile	Asbestos Not Present	Cellulose 50 Glass Fiber 30	Perlite Paint
027	27	Layered	Blue Mastic	Asbestos Not Present	NA	Glue CaCO3
027a		Layered	Gray Floor Tile	Asbestos Present Chrysotile 3	NA	CaCO3 Vinyl
027b		Layered	Orange Mastic	Asbestos Not Present	NA	Glue
028	28	Layered	White Mastic	Asbestos Not Present	NA	Glue CaCO3
028a		Layered	Gray Floor Tile	Asbestos Present Chrysotile 3	NA	CaCO3 Vinyl

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QUANTEM LABORATORIES
2033 HERITAGE PARK DR, OKLAHOMA CITY, OK 73120 | 1.800.822.1650

Polarized Light Microscopy Asbestos Analysis Report

QuanTEM Lab No. 368388
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Date Received: 04/24/2024
Received By: Courtney Holman
Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
028b		Layered	Orange Mastic	Asbestos Not Present	NA	Glue
029	29	Layered	Beige Floor Tile	Asbestos Present Chrysotile 2	NA	CaCO3 Vinyl
029a		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue
030	30	Layered	Beige Floor Tile	Asbestos Present Chrysotile 2	NA	CaCO3 Vinyl
030a		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue
031	31	Homogeneous	Brown/Gray Insulation	Asbestos Not Present	Cellulose 100	
032	32	Homogeneous	Brown/Gray Insulation	Asbestos Not Present	Cellulose 100	

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Polarized Light Microscopy Asbestos Analysis Report

QuanTEM Lab No. 368388
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Date Received: 04/24/2024
Received By: Courtney Holman
Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
033	33	Homogeneous	Brown/Gray Insulation	Asbestos Not Present	Cellulose 100	
034	34	Homogeneous	White Insulation	Asbestos Present Chrysotile 2 Amosite 10	NA	Gypsum
035	35	Homogeneous	White Insulation	Asbestos Present Chrysotile 2 Amosite 10	NA	Gypsum
036	36	Homogeneous	White Insulation	Asbestos Present Chrysotile 2 Amosite 10	NA	Gypsum
037	37	Layered	Brown Paper	Asbestos Not Present	Cellulose 100	
037a		Layered	Black Tar	Asbestos Not Present	NA	Tar

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Methodology: EPA/600/R-93/116

Client: Tec-An, Inc.
2517 Purdue Dr.
Oklahoma City, OK 73125

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
037b		Layered	Brown Roofing	Asbestos Not Present	Cellulose 100	
038	38	Homogeneous	Black Roofing	Asbestos Not Present	Cellulose 40	Tar Quartz
039	39	Homogeneous	Silver/Black Tar	Asbestos Present Chrysotile 10	NA	Tar Paint
040	40	Homogeneous	Silver/Black Tar	Asbestos Present Chrysotile 10	NA	Tar Paint
041	41	Homogeneous	Black Tar	Asbestos Not Present	NA	Tar
042	42	Homogeneous	Silver/Black Tar	Asbestos Present Chrysotile 10	NA	Tar Paint

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Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)		Non Fibrous
043	43	Layered	Beige/Blue Wall Paper	Asbestos Not Present	Cellulose	75	Paint Binder
043a		Layered	Tan Sheetrock	Asbestos Not Present	Cellulose Glass Fiber	10 2	Gypsum
044	44	Layered	Beige/Blue Wall Paper	Asbestos Not Present	Cellulose	75	Paint Binder
044a		Layered	Tan Sheetrock	Asbestos Not Present	Cellulose Glass Fiber	10 2	Gypsum
045	45	Layered	Beige/Blue Wall Paper	Asbestos Not Present	Cellulose	75	Paint Binder
045a		Layered	Tan Sheetrock	Asbestos Not Present	Cellulose Glass Fiber	10 2	Gypsum
046	46	Homogeneous	White Joint Compound	Asbestos Not Present	NA		CaCO3

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Received By: Courtney Holman
Date Analyzed: 04/25/2024
Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
047	47	Homogeneous	White Joint Compound	Asbestos Not Present	NA	CaCO3
048	48	Homogeneous	White Wall Texture	Asbestos Not Present	NA	Paint
049	49	Layered	White Wall Texture	Asbestos Not Present	NA	Paint
049a		Layered	Tan Sheetrock	Asbestos Not Present	Cellulose 10 Glass Fiber 2	Gypsum
050	50	Layered	White Wall Texture	Asbestos Not Present	NA	Paint
050a		Layered	Tan Sheetrock	Asbestos Not Present	Cellulose 10 Glass Fiber 2	Gypsum

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Analyzed By: Benjamin Hill
Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
051	51	Homogeneous	White Joint Compound	Asbestos Not Present	NA	CaCO3
052	52	Homogeneous	White Joint Compound	Asbestos Not Present	NA	CaCO3
053	53	Homogeneous	White Wall Texture	Asbestos Not Present	NA	CaCO3 Paint
054	54	Layered	White Wall Texture	Asbestos Not Present	NA	CaCO3 Paint
054a		Layered	White Sheetrock	Asbestos Not Present	Cellulose 10 Glass Fiber 2	Gypsum
055	55	Layered	White Wall Texture	Asbestos Not Present	NA	CaCO3 Paint
055a		Layered	White Sheetrock	Asbestos Not Present	Cellulose 10 Glass Fiber 2	Gypsum

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Methodology: EPA/600/R-93/116

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2517 Purdue Dr.
Oklahoma City, OK 73125

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)		Non Fibrous
056	56	Layered	White Joint Compound	Asbestos Not Present	NA		CaCO3
056a		Layered	Tan Sheetrock	Asbestos Not Present	Cellulose Glass Fiber	10 2	Gypsum
057	57	Layered	White Joint Compound	Asbestos Not Present	NA		CaCO3
057a		Layered	Tan Sheetrock	Asbestos Not Present	Cellulose Glass Fiber	10 2	Gypsum
058	58	Homogeneous	White Ceiling Tile	Asbestos Not Present	Cellulose Glass Fiber	50 30	Perlite Paint
059	59	Homogeneous	White Ceiling Tile	Asbestos Not Present	Cellulose Glass Fiber	50 30	Perlite Paint

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Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
060	60	Layered	Green/Teal Floor Tile	Asbestos Not Present	Cellulose 5	CaCO3 Vinyl
060a		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue
061	61	Layered	Green/Teal Floor Tile	Asbestos Not Present	Cellulose 5	CaCO3 Vinyl
061a		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue
061b		Layered	Red Floor Tile	Asbestos Present Chrysotile 8	NA	CaCO3 Vinyl
Remnant						
062	62	Layered	Tan Floor Tile	Asbestos Present Chrysotile 2	NA	CaCO3 Vinyl
062a		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue

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Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
063	63	Layered	Tan Floor Tile	Asbestos Present Chrysotile 2	NA	CaCO3 Vinyl
063a		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue
064	64	Layered	Gray Floor Tile	Asbestos Not Present	NA	CaCO3 Vinyl
064a		Layered	Black/Yellow Mastic	Asbestos Not Present	NA	Tar Glue
065	65	Layered	Blue Floor Tile	Asbestos Not Present	NA	CaCO3 Vinyl
065a		Layered	Black/Yellow Mastic	Asbestos Not Present	NA	Tar Glue

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Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
066	66	Layered	Beige/Tan Linoleum	Asbestos Not Present	NA	Vinyl
066a		Layered	Cream Mastic	Asbestos Not Present	NA	Glue
066b		Layered	Gray Leveling Compound	Asbestos Not Present	NA	CaCO3 Sand
066c		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue
066d		Layered	Gray Leveling Compound	Asbestos Not Present	NA	CaCO3 Sand
067	67	Layered	Beige/Tan Linoleum	Asbestos Not Present	NA	Vinyl
067a		Layered	Cream Mastic	Asbestos Not Present	NA	Glue

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Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
067b		Layered	Gray Leveling Compound	Asbestos Not Present	NA	CaCO3 Sand
067c		Layered	Yellow Mastic	Asbestos Not Present	NA	Glue
067d		Layered	Gray Leveling Compound	Asbestos Not Present	NA	CaCO3 Sand
068	68	Layered	Red Floor Tile	Asbestos Present Chrysotile 8	NA	CaCO3 Vinyl
068a		Layered	Black Mastic	Asbestos Not Present	NA	Tar
069	69	Layered	Red Floor Tile	Asbestos Present Chrysotile 8	NA	CaCO3 Vinyl

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Methodology: EPA/600/R-93/116

Project: Perry Medical Center
Project Location: Perry Medical Center
Project Number: N/A

QuanTEM Sample ID	Client Sample ID	Composition	Color / Description	Asbestos (%)	Non-Asbestos Fiber (%)	Non Fibrous
069a		Layered	Black Mastic	Asbestos Not Present	NA	Tar

Benjamin Hill

Benjamin Hill, Assistant Laboratory Manager

4/26/2024
Date of Report

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

Chain of Custody

QuanTEM LABORATORIES
www.QuanTEM.com

ASBESTOS CHAIN OF CUSTODY

2033 Heritage Park Drive, Oklahoma City, OK 73120-7502
(800) 822-1650 • (405) 755-7272 • Fax: (405) 755-2058

LEGAL DOCUMENT - PLEASE PRINT LEGIBLY

For Lab Use Only
Lab No. 368388
(Accept) Reject

Contact Information		Project Information	Report Results (☑ one box)
Company: Tec-An Inc.	Phone: (405) 681-7076	Project Name: Perry Medical Center	☐ QuanTEM Website
Contact: Grayson Cook	Cell Phone:	Project Location: Perry Medical Center	☑ Email grayson@tec-an.com
Account #:	E-mail: grayson@tec-an.com	Project ID:	☐ Other _____
SAMPLED BY: Name: Grayson Cook	Date: 4/23/2024	P.O. Number:	

RELINQUISHED BY	DATE & TIME	VIA	RECEIVED BY	DATE & TIME
Grayson Cook	4-24-2024	Drop off	Tommy M. Hall	4/24/24 @ 3:40

REQUESTED SERVICES (Please ☑ the Appropriate Boxes)

PLM	PLM	TEM	TEM	TURNAROUND TIME
☑ Bulk Analysis **	☐ Vermiculite Attic Insulation (EPA 600/R-04/004)	☐ Air- AHERA	☐ Bulk- Presence / Absence EPA600/R-93/116	☐ Rush
☐ 400 Point Count	☐ Other	☐ Air- NIOSH 7402	☐ Bulk- Quantitative [weight%]- Chatfield	☐ Same Day
☐ 1000 Point Count	PCM	☐ Air- ISO 10312	☐ Dust- Presence / Absence	☐ 24 - Hour
☐ Gravimetric Preparation	☐ NIOSH 7400	☐ Drinking Water- EPA 100.2	☐ Dust- Quantitative [fibers/sq.cm]- ASTM D5755	☑ 3 - Day
☐ Particle ID		☐ Waste Water- EPA 600/4-83-043	☐ Other	☐ 5 - Day

No.	Sample ID (10 Characters Max)	☑ To Be Analyzed	Color	Description	Volume / Area (as applicable)	Comments / Notes
1	01	☐		Hot water pipe wrap		
2	02	☐		Hot water pipe wrap		
3	03	☐		Chilled water pipe wrap		
4	04	☐		Chilled water pipe wrap		
5	05	☐		Hard Packed Heater Fitting		
6	06	☐		Hard Packed Heater Fitting		
7	07	☐		Hard Packed Heater Fitting		
8	08	☐		Chiller Water Tank End Caps		
9	09	☐		Chiller Water Tank End Caps		
10	10	☐		Chiller Water Tank End Caps		

SATURDAY FEDEX SAMPLE DELIVERY - CALL TO SCHEDULE • Use this address for Saturday Delivery only: 4220 N. Santa Fe Ave., Oklahoma City, OK 73105-8517 • Mark Package "Hold for Saturday Pickup" Please Note - UPS and USPS are NOT available for Saturday **PLM Bulk Analysis (EPA 40-CFR Appendix E to Subpart E of Part 763 and EPA 600/R-93/116 Methods)

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ASBESTOS CHAIN OF CUSTODY

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(800) 822-1650 • (405) 755-7272 • Fax: (405) 755-2058

LEGAL DOCUMENT - PLEASE PRINT LEGIBLY

For Lab Use Only
Lab No. 368388
Accept Reject

Project Information

Company: Tec-An Inc. | Project Name: Perry Medical Center | Project Location: Perry Medical Center

No.	Sample ID (10 Characters Max)	☑ To Be Analyzed	Color	Description	Volume / Area (as applicable)	Comments / Notes
11	11	☐		Domestic Pipe Wrap		Basement Mech Room
12	12	☐		Domestic Pipe Wrap		Basement Mech Room
13	13	☐		Condesate Return Fittings		Basement Mech Room
14	14	☐		Condesate Return Fittings		Basement Mech Room
15	15	☐		Condesate Return Fittings		Basement Mech Room
16	16	☐		Generator Flue Run		Basement Mech Room
17	17	☐		Generator Flue Run		Basement Mech Room
18	18	☐		Generator Flue Run		Basement Mech Room
19	19	☐		Generator Flue Fitting		Basement Mech Room
20	20	☐		Generator Flue Fitting		Basement Mech Room
21	21	☐		Generator Flue Fitting		Basement Mech Room
22	22	☐		Fire Proofing		Basement Mech Room
23	23	☐		Fire Proofing		Basement Mech Room
24	24	☐		Fire Proofing		Basement Mech Room
25	25	☐		2x4 Hole Fissure Ceiling Tile		Home Health
26	26	☐		2x4 Hole Fissure Ceiling Tile		Home Health
27	27	☐		Top Layer 12x12 Floor Tile		Home Health
28	28	☐		Top Layer 12x12 Floor Tile		Home Health
29	29	☐		2nd Layer 12x12 Floor Tile		Home Health
30	30	☐		2nd Layer 12x12 Floor Tile		Home Health

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ASBESTOS CHAIN OF CUSTODY

2033 Heritage Park Drive, Oklahoma City, OK 73120-7502
(800) 822-1650 • (405) 755-7272 • Fax: (405) 755-2058

LEGAL DOCUMENT - PLEASE PRINT LEGIBLY

For Lab Use Only
Lab No. 368388
Accept Reject

Project Information

Company: Tec-An Inc. | Project Name: Perry Medical Center | Project Location: Perry Medical Center

No.	Sample ID (10 Characters Max)	☑ To Be Analyzed	Color	Description	Volume / Area (as applicable)	Comments / Notes
31	31	☐		Domestic Run Insulation		Crawlspace
32	32	☐		Domestic Run Insulation		Crawlspace
33	33	☐		Domestic Run Insulation		Crawlspace
34	34	☐		Domestic Fitting Insulation		Crawlspace
35	35	☐		Domestic Fitting Insulation		Crawlspace
36	36	☐		Domestic Fitting Insulation		Crawlspace
37	37	☐		Roof Core		
38	38	☐		Roof Core		
39	39	☐		Penetration Tar		
40	40	☐		Penetration Tar		
41	41	☐		Flat Roof Tar		
42	42	☐		Flat Roof Tar		
43	43	☐		Texture Wallpapered Walls		Upper Level
44	44	☐		Texture Wallpapered Walls		Upper Level
45	45	☐		Texture Wallpapered Walls		Upper Level
46	46	☐		Joint Compound		Upper Level
47	47	☐		Joint Compound		Upper Level
48	48	☐		Flat Wall Texture		Upper Level
49	49	☐		Flat Wall Texture		Upper Level
50	50	☐		Flat Wall Texture		Upper Level

SATURDAY FEDEX SAMPLE DELIVERY - CALL TO SCHEDULE • Use this address for Saturday Delivery only: 4220 N. Santa Fe Ave., Oklahoma City, OK 73105-8517 • Mark Package "Hold for Saturday Pickup"
Please Note - UPS and USPS are NOT available for Saturday Delivery

QUANTEM LABORATORIES
www.QuanTEM.com

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Project Information

Company: Tec-An Inc. | Project Name: Perry Medical Center | Project Location: Perry Medical Center

No.	Sample ID (10 Characters Max)	☑ To Be Analyzed	Color	Description	Volume / Area (as applicable)	Comments / Notes
_1	51	☐		Joint Compound		Upper Level
_2	52	☐		Joint Compound		Upper Level
_3	53	☐		Rough Wall Texture		ER
_4	54	☐		Rough Wall Texture		ER
_5	55	☐		Rough Wall Texture		ER
_6	56	☐		Joint Compound		ER
_7	57	☐		Joint Compound		ER
_8	58	☐		2x2 Hole Pattern Ceiling Tile		Upper Level
_9	59	☐		2x2 Hole Pattern Ceiling Tile		Upper Level
_0	60	☐		Green/Teal 12x12 Floor Tile		Upper Level
_1	61	☐		Green/Teal 12x12 Floor Tile		Upper Level
_2	62	☐		Multi-Colored 12x12 Floor Tile		Upper Level
_3	63	☐		Multi-Colored 12x12 Floor Tile		Upper Level
_4	64	☐		Tan 12x12 Floor Tile		Upper Level
_5	65	☐		Tan 12x12 Floor Tile		Upper Level
_6	66	☐		Linoleum Flooring Surgery		Upper Level
_7	67	☐		Linoleum Flooring Surgery		Upper Level
_8	68	☐		2nd Layer Floor Tile Surgery		Upper Level
_9	69	☐		2nd Layer Floor Tile Surgery		Upper Level
_0		☐				

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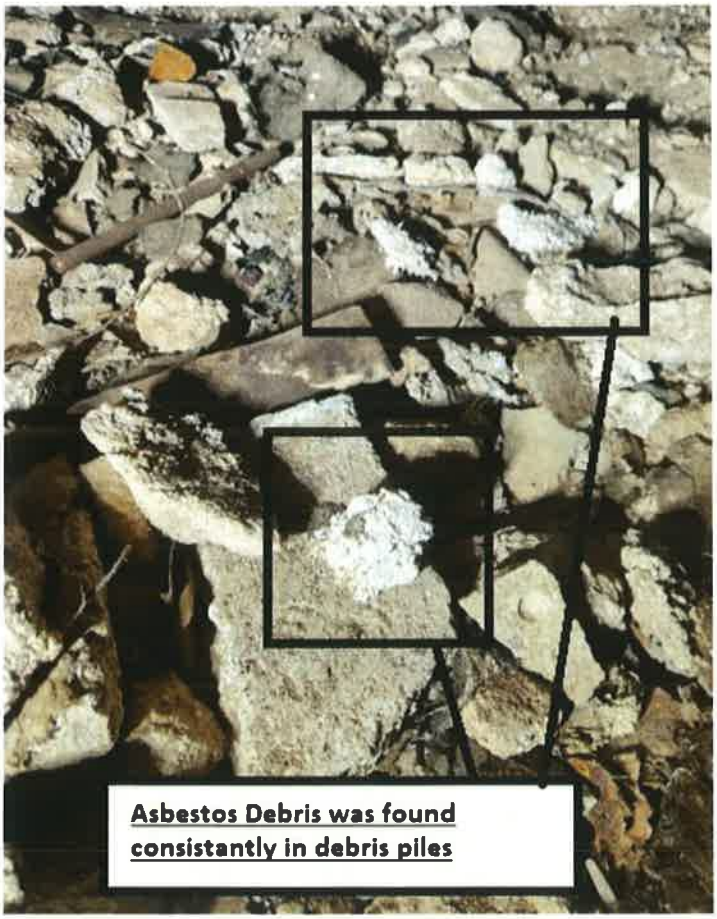
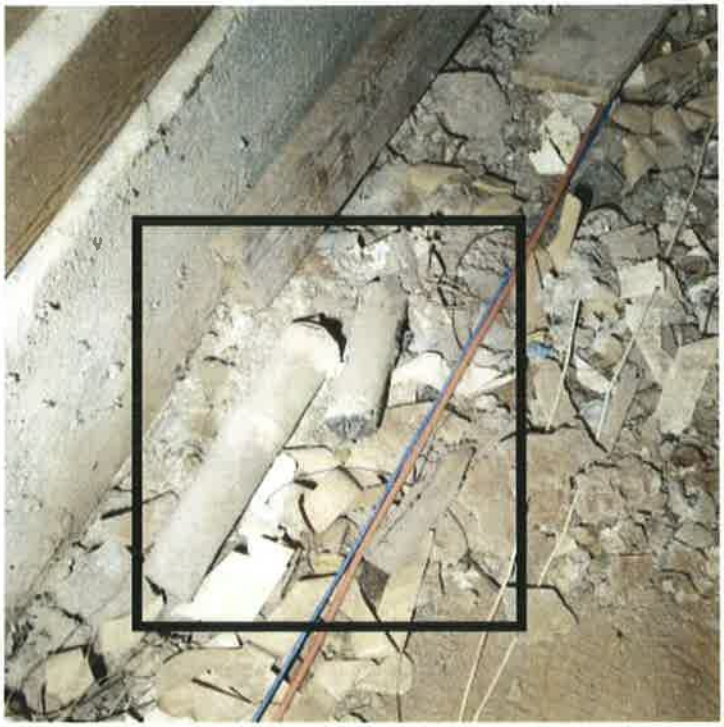
Pictures of the TSI & Contamination within the Crawl Space

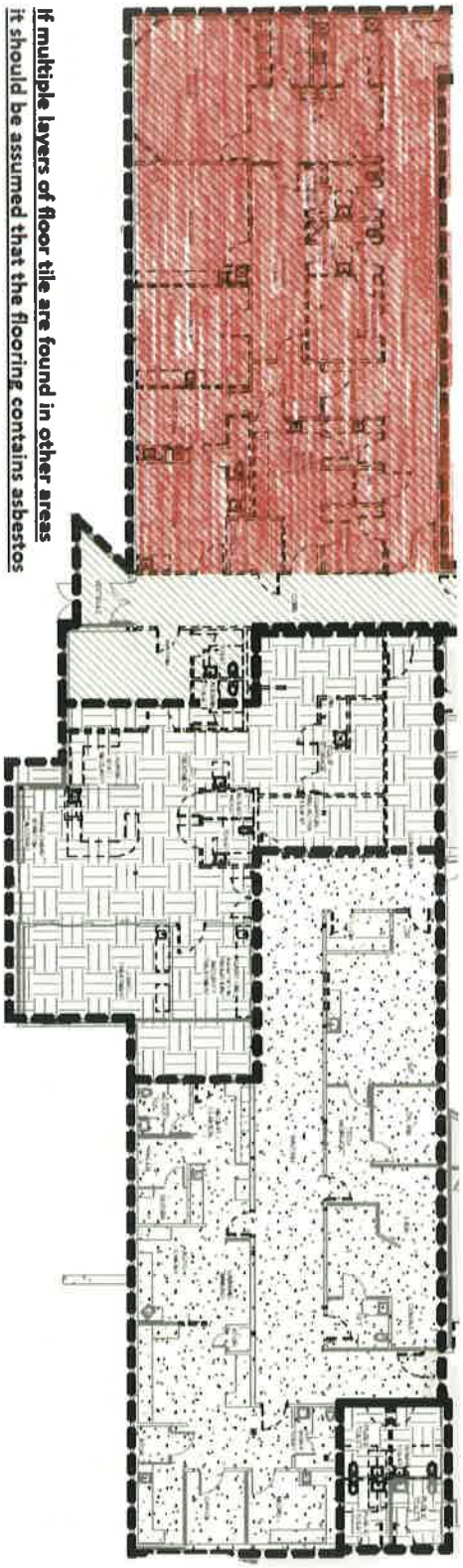

Asbestos Debris was found
consistantly in debris piles



Maps

Asbestos Floor Tile Map

Upper Level

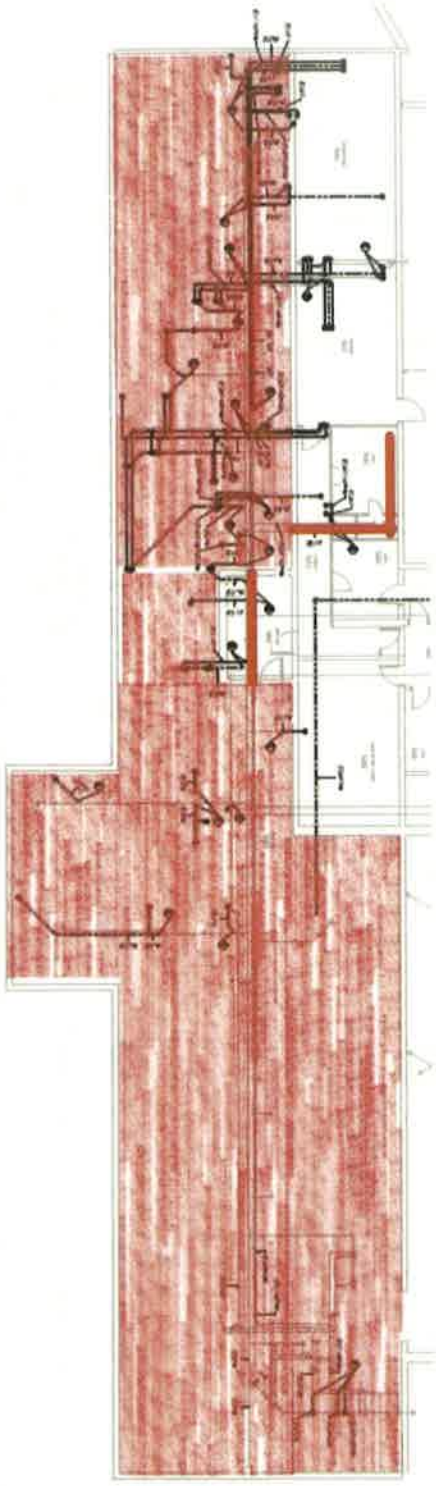


If multiple layers of floor tile are found in other areas it should be assumed that the flooring contains asbestos until proven otherwise

681-7256 / info@tec-an.com / www.tec-an.com

Asbestos TSI Fitting and Debris Map

Basement/Crawlspace



Due to the condition of the asbestos insulation in the crawl space access should be restricted and proper PPE should be worn wile within the crawlspace

Asbestos Floot Tile Map
Home Health Basement

Certificates

MOORE NORMAN TECHNOLOGY CENTER

This is to certify that

Grayson Cook

9766

has completed the requisite training for Asbestos accreditation under TSCA Title II and NESHAP for

EPA Approved Asbestos Inspector Refresher Course

Certificate # 804363

Brian K. Ruffner
Superintendent/Chief Executive Officer

Carla McKinley
Program Director

Karen Bassinger
Program Training Coordinator

MOORE NORMAN
TECHNOLOGY CENTER
Your Potential. Our Promise.

Cheryl Marcham, CIH, PHD
Instructor

October 18, 2023

October 18, 2023
Exam Date

October 18, 2024
Expiration Date

Scope of Work

STATEMENT OF WORK
For
Asbestos Abatement at the Perry Medical Center

The Oklahoma Department of Environmental Quality (DEQ) is requesting a work plan and cost estimate for remediation services at the Medical Center located in Perry, Oklahoma. This statement of work (SOW) describes the removal and proper disposal of asbestos-containing material (ACM). A mandatory pre-bid site visit and walk through will be held at the site.

The building is located at 501 N 14th Street, Perry, OK, 73077. The building will have available water and electricity to use during remediation. For more details see the attached Asbestos Inspection Report with floor plan map showing locations of ACM (**Attachment 1**).

SPECIAL PROVISIONS:

- Work Schedule: The contractor shall schedule all work to be completed within 90 calendar days after date of the written "Notice to Proceed." Coordination of work shall be scheduled with DEQ.
    - A pre-construction meeting shall be held at the site if deemed necessary after the Notice to Proceed date to review Statement of Work and answer any questions the contractor may have.
    - All on-site work shall be completed by the contractor five (5) days prior to the scheduled contract completion date, with the remaining five (5) days utilized for final inspection and correction of all deficiencies.
    - The work schedule shall be coordinated with staff as the building will remain occupied.

- 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 meeting and site walk through;
- Follow all appropriate OSHA requirements;

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;

ASBESTOS ABATEMENT INSTRUCTIONS:

- Friable ACM shall be removed as described in the attached Asbestos Inspection Report. An approved asbestos Project Design will be provided at a later date.
    - Remove and properly dispose of asbestos-containing pipe fittings located throughout the building.
        - A total of 220 fittings in 7,800 ft of crawl space with debris shall be removed.
- Non-friable asbestos shall be removed as described in the Asbestos Inspection Report.
    - Remove and properly dispose of asbestos-containing floor tile.
        - A total of 850 ft^2 located in the Home Health area shall be removed.
        - A total of 3,800 ft^2 located in the Surgery Wing area shall be removed.
- Once Asbestos Abatement is complete, DEQ shall be contacted for final inspection to confirm abatement has been appropriately performed and all asbestos has been removed.

FINAL REPORT:

Write final report and submit to DEQ;

- Final report shall include:
    - A detailed summary of work including any warranties and data;
    - Waste manifests (if any); and
    - Photo documentation of work
        - Photo documentation of work will have color digital 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
405-702-5108 (Office)
405-702-5101 (Fax)
Trenton.Wilhelm@deq.ok.gov

ATTACHMENT 1

Asbestos Inspection Report

Remediation Reports

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Attn: Mr. Trenton Wilhelm
Dept. of Environmental Quality
707 N. Robinson Ave.
Oklahoma City, OK 73102

December 6, 2024

Telephone: 405.702.5108
e-mail: trenton.wilhelm@deq.ok.gov

Re: Asbestos Services
Perry Medical Center
501 N 14th Street, Perry, Oklahoma 73077
ENERCON Project No: ODEQ-00038
ODEQ CAP 25-0050

Please find attached:

- Air reports (Asbestos)

Asbestos

The asbestos-containing building materials identified in the Project Design appear to have been properly removed in accordance with governing rules and regulations. The measured fiber concentrations present inside the building following abatement activities were below Oklahoma's permissible exposure limits for airborne asbestos[1].

The foregoing findings are based on the analytical results of sampling performed post-abatement, the visual final acceptance inspection of the areas abated, and the inspector's professional judgment. The information contained in this report represents conditions that exists at the time of this assessment. ENERCON does not warrant the services of regulatory agencies, laboratories, or other third parties supplying information that may have been used in the preparation of this report.

Enercon Services, Inc. (ENERCON) appreciates the opportunity to provide these services to the Oklahoma Department of Environmental Quality. If you have any questions or comments regarding this addendum, please feel free to call me at 405.722.7693 or 405.834.2490.

Sincerely,
ENERCON SERVICES, INC.

Ben Baggett
Industrial Hygiene/Safety Lead
bbaggett@enercon.com

Charles Calmbacher, PhD, CIH
ccalmbacher@enercon.com

[1] 0.01 fibers per cubic centimeter (f/cc)

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2302 S Prospect
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Phone: 405-722-7693
www.enercon.com

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

						T	Cass. Dia =	25 mm			PF =	100	Field of View =		0.00785	Pg.	1	OF	1
Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	Y P	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	1	11/7/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	2	11/7/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	3	11/7/24 -	1:03 PM 4:21 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	6.0	100	198	495.0	7.643	BDL	0.007	0.004	0.007
Gil02	4	11/7/24 -	1:03 PM 4:21 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	2.0	100	198	495.0	2.548	BDL	0.007	0.001	0.007
Gil03	5	11/7/24 -	1:05 PM 4:21 PM	- -	Neg air 2 Crawlspace	A		2.50	2.50	2.50	4.0	100	196	490.0	5.096	BDL	0.007	0.002	0.007
Gil04	6	11/7/24 -	1:05 PM 4:21 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	8.0	100	196	490.0	10.191	0.008	0.007	0.005	0.007
Gil05	7	11/7/24 -	1:07 PM 4:21 PM	- -	Brandon Cursey 401148 PAPR Crawlspace	P	<0.01	2.50	2.40	2.45	11.0	100	194	475.3	14.013	0.011	0.007	0.007	0.016
Gil06	8	11/7/24 -	1:07 PM 4:21 PM	- -	Brendan Fields 402889 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	14.0	100	194	485.0	17.834	0.014	0.007	0.009	0.020
Gil07	9	11/7/24 -	2:14 PM 4:21 PM	- -	Neg air 3 (decon) Crawlspace	A		2.50	2.50	2.50	3.0	100	127	317.5	3.822	0.005	0.011	0.003	0.011
Gil08	10	11/7/24 -	1:03 PM 4:21 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.40	2.45	3.0	100	198	485.1	3.822	0.003	0.007	0.002	0.007
				- -															
				- -															
				- -															
				- -															

ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
Justin Creek (ODOL) performed Pre-prep for crawlspace, Tec-An start in PAPR

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
	Cass. Dia = 25 mm										PF = 100		Field of View = 0.00785			Pg. 1 OF 1			
-	11	11/8/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	12	11/8/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	13	11/8/24 -	7:22 AM 11:24 AM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	3.0	100	242	605.0	3.822	BDL	0.006	0.002	0.006
Gil02	14	11/8/24 -	7:22 AM 11:24 AM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	2.0	100	242	605.0	2.548	BDL	0.006	0.001	0.006
Gil03	15	11/8/24 -	7:22 AM 11:24 AM	- -	Neg air 2 Crawlspace	A		2.50	2.50	2.50	2.0	100	242	605.0	2.548	BDL	0.006	0.001	0.006
Gil04	16	11/8/24 -	7:22 AM 11:24 AM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	5.0	100	242	605.0	6.369	BDL	0.006	0.003	0.006
Gil05	17	11/8/24 -	7:22 AM 11:24 AM	- -	Dandre Bowman 403463 PAPR Crawlspace	P	<0.01	2.50	2.40	2.45	11.0	100	242	592.9	14.013	0.009	0.006	0.006	0.013
Gil06	18	11/8/24 -	7:22 AM 11:24 AM	- -	Jayshawn Glande 403356 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	14.0	100	242	605.0	17.834	0.011	0.006	0.007	0.016
Gil07	19	11/8/24 -	7:22 AM 11:24 AM	- -	Neg air 3 (decon) Crawlspace	A		2.50	2.50	2.50	2.0	100	242	605.0	2.548	0.002	0.006	0.001	0.006
Gil08	20	11/8/24 -	7:22 AM 11:24 AM	- -	Inside crawlspace Crawlspace	A		2.50	2.40	2.45	8.0	100	242	592.9	10.191	0.007	0.006	0.004	0.006
				- -															
				- -															
				- -															
				- -															

ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
, Tec-An continue cleaning crawlspace in PAPR

`

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =	25 mm			PF =	100	Field of View =		0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	21	11/11/24 - -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	22	11/11/24 - -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	23	11/11/24 -	12:14 PM 5:20 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	3.0	100	306	765.0	3.822	BDL	0.004	0.001	0.004
Gil02	24	11/11/24 -	12:14 PM 5:20 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	2.0	100	306	765.0	2.548	BDL	0.004	0.001	0.004
Gil03	25	11/11/24 -	12:14 PM 5:20 PM	- -	Neg air 2 Crawlspace	A		2.50	2.50	2.50	1.0	100	306	765.0	1.274	BDL	0.004	0.000	0.004
Gil04	26	11/11/24 -	12:14 PM 5:20 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	8.0	100	306	765.0	10.191	0.005	0.004	0.003	0.004
Gil05	27	11/11/24 -	12:14 PM 5:20 PM	- -	Kenneth Nubine 400826 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	12.0	100	306	765.0	15.287	0.008	0.004	0.005	0.011
Gil06	28	11/11/24 -	12:14 PM 5:20 PM	- -	Antonio Hamilton 403534 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	23.0	100	306	765.0	29.299	0.015	0.004	0.009	0.020
Gil07	29	11/11/24 -	12:14 PM 5:20 PM	- -	Neg air 3 (decon) Crawlspace	A		2.50	2.50	2.50	2.0	100	306	765.0	2.548	0.001	0.004	0.001	0.004
Gil08	30	11/11/24 -	12:14 PM 5:20 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.40	2.45	13.0	100	306	749.7	16.561	0.009	0.005	0.005	0.012
				- -															
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NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
AM delay to get quantitative fit test; Tec-An continue cleaning crawlspace in PAPR; Loadout this afternoon

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =	25 mm			PF =	100	Field of View =	0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	31	11/12/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	32	11/12/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	33	11/12/24 -	7:26 AM 5:14 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	6.0	100	588	1470.0	7.643	BDL	0.002	0.001	0.002
Gil02	34	11/12/24 -	7:26 AM 5:14 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	1.0	100	588	1470.0	1.274	BDL	0.002	0.000	0.002
Gil03	35	11/12/24 -	7:26 AM 5:14 PM	- -	Neg air 2 Crawlspace	A		2.50	2.50	2.50	1.0	100	588	1470.0	1.274	BDL	0.002	0.000	0.002
Gil04	36	11/12/24 -	7:26 AM 5:14 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	15.0	100	588	1470.0	19.108	0.005	0.002	0.003	0.007
Gil05	37	11/12/24 -	7:26 AM 5:14 PM	- -	Brandon Cursey 401148 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	23.0	100	588	1470.0	29.299	0.008	0.002	0.005	0.011
Gil06	38	11/12/24 -	7:26 AM 5:14 PM	- -	Brendan Fields 402889 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	21.0	100	588	1470.0	26.752	0.007	0.002	0.004	0.010
Gil07	39	11/12/24 -	7:26 AM 5:14 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	34.0	100	588	1470.0	43.312	0.011	0.002	0.007	0.016
				- -															
				- -															
				- -															
				- -															
				- -															

ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
Tec-An continue cleaning crawlspace in PAPR, neg air #3 consolidated with neg air #2

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =	25 mm			PF =	100	Field of View =	0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	40	11/13/24 - -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	41	11/13/24 - -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	42	11/13/24 -	7:22 AM 5:30 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	2.0	100	608	1520.0	2.548	BDL	0.002	0.000	0.002
Gil02	43	11/13/24 -	7:22 AM 5:30 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	3.0	100	608	1520.0	3.822	BDL	0.002	0.001	0.002
Gil03	44	11/13/24 -	7:22 AM 5:30 PM	- -	Neg air 2 Crawlspace and loadout path	A		2.50	2.50	2.50	3.0	100	608	1520.0	3.822	BDL	0.002	0.001	0.002
Gil04	45	11/13/24 -	7:22 AM 5:30 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	13.0	100	608	1520.0	16.561	0.004	0.002	0.003	0.006
Gil05	46	11/13/24 -	7:22 AM 5:30 PM	- -	Dandre Bowman 403463 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	22.0	100	608	1520.0	28.025	0.007	0.002	0.004	0.010
Gil06	47	11/13/24 -	7:22 AM 5:30 PM	- -	Jayshawn Glande 403356 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	13.0	100	608	1520.0	16.561	0.004	0.002	0.003	0.006
Gil07	48	11/13/24 -	7:22 AM 5:30 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	28.0	100	608	1520.0	35.669	0.009	0.002	0.006	0.012
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ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
Tec-An continue cleaning crawlspace in PAPR; Loadout this afternoon

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =	25 mm			PF =	100	Field of View =	0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	49	11/14/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	50	11/14/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	51	11/14/24 -	7:32 AM 5:21 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	6.0	100	589	1472.5	7.643	BDL	0.002	0.001	0.002
Gil02	52	11/14/24 -	7:32 AM 5:21 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	2.0	100	589	1472.5	2.548	BDL	0.002	0.000	0.002
Gil03	53	11/14/24 -	7:32 AM 5:21 PM	- -	Neg air 2 Crawlspace	A		2.50	2.50	2.50	0.0	100	589	1472.5	0.000	BDL	0.002	0.000	0.002
Gil04	54	11/14/24 -	7:32 AM 5:21 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	9.0	100	589	1472.5	11.465	0.003	0.002	0.002	0.002
Gil05	55	11/14/24 -	7:32 AM 5:21 PM	- -	Brandon Cursey 401148 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	23.0	100	589	1472.5	29.299	0.008	0.002	0.005	0.011
Gil06	56	11/14/24 -	7:32 AM 5:21 PM	- -	Brendan Fields 402889 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	27.0	100	589	1472.5	34.395	0.009	0.002	0.006	0.012
Gil07	57	11/14/24 -	7:32 AM 5:21 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	23.0	100	589	1472.5	29.299	0.008	0.002	0.005	0.011
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ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
Tec-An continue cleaning crawlspace in PAPR

`

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

							Cass. Dia =	25 mm			PF =	100	Field of View =		0.00785	Pg.	1	OF	1
Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	T Y P	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	58	11/18/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	59	11/18/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	60	11/18/24 -	12:32 PM 5:02 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	5.0	100	270	675.0	6.369	BDL	0.005	0.002	0.005
Gil02	61	11/18/24 -	12:32 PM 5:02 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	0.0	100	270	675.0	0.000	BDL	0.005	0.000	0.005
Gil03	62	11/18/24 -	12:32 PM 5:02 PM	- -	Neg air 2 Crawlspace	A		2.50	2.50	2.50	1.0	100	270	675.0	1.274	BDL	0.005	0.000	0.005
Gil04	63	11/18/24 -	12:32 PM 5:02 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	9.0	100	270	675.0	11.465	0.007	0.005	0.004	0.005
Gil05	64	11/18/24 -	12:32 PM 5:02 PM	- -	Kenneth Nubine 400826 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	21.0	100	270	675.0	26.752	0.015	0.005	0.009	0.021
Gil06	65	11/18/24 -	12:32 PM 5:02 PM	- -	Antonio Hamilton 403534 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	17.0	100	270	675.0	21.656	0.012	0.005	0.008	0.017
Gil07	66	11/18/24 -	12:32 PM 5:02 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	22.0	100	270	675.0	28.025	0.016	0.005	0.010	0.022
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ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
, Late start to to inclement weather,Tec-An continue cleaning crawlspace in PAPR, begin hanging glovebags

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =	25 mm			PF =	100	Field of View =		0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	67	11/19/24 - -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	68	11/19/24 - -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	69	11/19/24 -	7:31 AM 5:44 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	5.0	100	613	1532.5	6.369	BDL	0.002	0.001	0.002
Gil02	70	11/19/24 -	7:31 AM 5:44 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	1.0	100	613	1532.5	1.274	BDL	0.002	0.000	0.002
Gil03	71	11/19/24 -	7:31 AM 5:44 PM	- -	Neg air 2 Crawlspace	A		2.50	2.50	2.50	3.0	100	613	1532.5	3.822	BDL	0.002	0.001	0.002
Gil04	72	11/19/24 -	7:31 AM 5:44 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	12.0	100	613	1532.5	15.287	0.004	0.002	0.002	0.005
Gil05	73	11/19/24 -	7:31 AM 5:44 PM	- -	Dandre Bowman 403463 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	18.0	100	613	1532.5	22.930	0.006	0.002	0.004	0.008
Gil06	74	11/19/24 -	7:31 AM 5:44 PM	- -	Jayshawn Glande 403356 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	13.0	100	613	1532.5	16.561	0.004	0.002	0.003	0.006
Gil07	75	11/19/24 -	7:31 AM 5:44 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	22.0	100	613	1532.5	28.025	0.007	0.002	0.004	0.010
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ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
, Poly crawlspace, hang glove bags

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =	25 mm			PF =	100	Field of View =	0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	76	11/20/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	77	11/20/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	78	11/20/24 -	8:31 AM 5:52 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	2.0	100	561	1402.5	2.548	BDL	0.002	0.000	0.002
Gil02	79	11/20/24 -	8:31 AM 5:52 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	4.0	100	561	1402.5	5.096	BDL	0.002	0.001	0.002
Gil03	80	11/20/24 -	8:31 AM 5:52 PM	- -	Neg air 2 Crawlspace and loadout path	A		2.50	2.50	2.50	5.0	100	561	1402.5	6.369	BDL	0.002	0.001	0.002
Gil04	81	11/20/24 -	8:31 AM 5:52 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	8.0	100	561	1402.5	10.191	0.003	0.002	0.002	0.002
Gil05	82	11/20/24 -	8:31 AM 5:52 PM	- -	Brandon Cursey 401148 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	13.0	100	561	1402.5	16.561	0.005	0.002	0.003	0.006
Gil06	83	11/20/24 -	8:31 AM 5:52 PM	- -	Brendan Fields 402889 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	10.0	100	561	1402.5	12.739	0.003	0.002	0.002	0.005
Gil07	84	11/20/24 -	8:31 AM 5:52 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	11.0	100	561	1402.5	14.013	0.004	0.002	0.002	0.005
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ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
, Quantitative fit tests this morning; load out

`

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =		25 mm			PF =	100	Field of View =		0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	85	11/21/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	86	11/21/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	87	11/21/24 -	11:20 AM 5:43 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	4.0	100	383	957.5	5.096	BDL	0.004	0.001	0.004
Gil02	88	11/21/24 -	11:20 AM 5:43 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	2.0	100	383	957.5	2.548	BDL	0.004	0.001	0.004
Gil03	89	11/21/24 -	11:20 AM 5:43 PM	- -	Neg air 2 Crawlspace and loadout path	A		2.50	2.50	2.50	2.0	100	383	957.5	2.548	BDL	0.004	0.001	0.004
Gil04	90	11/21/24 -	11:20 AM 5:43 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	11.0	100	383	957.5	14.013	0.006	0.004	0.004	0.008
Gil05	91	11/21/24 -	11:20 AM 5:43 PM	- -	Brandon Cursey 401148 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	20.0	100	383	957.5	25.478	0.010	0.004	0.006	0.014
Gil06	92	11/21/24 -	11:20 AM 5:43 PM	- -	Brendan Fields 402889 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	8.0	100	383	957.5	10.191	0.004	0.004	0.003	0.004
Gil07	93	11/21/24 -	11:20 AM 5:43 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	9.5	100	383	957.5	12.102	0.005	0.004	0.003	0.004
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ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
, Justin Creek (ODOL) performed Prep for crawlspace, Tec-An start in FFAPR

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

T	Cass. Dia =	25 mm			PF =	100	Field of View =	0.00785	Pg.	1	OF	1

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	TYP	Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	Fiber Count	Field Count	Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Fibers Per CC	Det. Limit	LCL	UCL
-	94	11/25/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	95	11/25/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	96	11/25/24 -	9:19 AM 5:03 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	3.0	100	464	1160.0	3.822	BDL	0.003	0.001	0.003
Gil02	97	11/25/24 -	9:19 AM 5:03 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	0.0	100	464	1160.0	0.000	BDL	0.003	0.000	0.003
Gil03	98	11/25/24 -	9:19 AM 5:03 PM	- -	Neg air 2 Crawlspace and loadout path	A		2.50	2.50	2.50	3.0	100	464	1160.0	3.822	BDL	0.003	0.001	0.003
Gil04	99	11/25/24 -	9:19 AM 5:03 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	11.0	100	464	1160.0	14.013	0.005	0.003	0.003	0.006
Gil05	100	11/25/24 -	9:19 AM 5:03 PM	- -	Brandon Cursey 401148 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	13.0	100	464	1160.0	16.561	0.005	0.003	0.003	0.008
Gil06	101	11/25/24 -	9:19 AM 5:03 PM	- -	Brendan Fields 402889 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	10.0	100	464	1160.0	12.739	0.004	0.003	0.003	0.006
Gil07	102	11/25/24 -	9:19 AM 5:03 PM	- -	Inside crawlspace Crawlspace	A		2.50	2.50	2.50	5.0	100	464	1160.0	6.369	BDL	0.003	0.001	0.003
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ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
Tec-An continue glove bag in FFAPR

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Project: Perry Medical, Perry, OK Crawlspace and Glovebag

Pump Number	Sample Number	Date Sampled	Time 1 On-Off	Time 2 On-Off	Collection Information	T Y P	Cass. Dia = 25 mm Pers Exp.	Flow Rate (L/M) Pre	Post	Avg.	PF = 100 Fiber Count	Field Count	Field of View = 0.00785 Ttl. Time (Min.)	Volume (Liters)	Fiber Density	Pg. 1 Fibers Per CC	Det. Limit	OF LCL	UCL
-	103	11/26/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
-	104	11/26/24 -	- -	- -	BLANK	B				0.00	0.0	100	0	0.0	0.000	NA	NA	NA	NA
Gil01	105	11/26/24 -	7:27 AM 2:50 PM	- -	Storage hallway/Loadout Crawlspace	A		2.50	2.50	2.50	5.0	100	443	1107.5	6.369	BDL	0.003	0.001	0.003
Gil02	106	11/26/24 -	7:27 AM 2:50 PM	- -	Neg air 1 Crawlspace	A		2.50	2.50	2.50	2.0	100	443	1107.5	2.548	BDL	0.003	0.001	0.003
Gil03	107	11/26/24 -	7:27 AM 2:50 PM	- -	Neg air 2 Crawlspace and loadout path	A		2.50	2.50	2.50	1.0	100	443	1107.5	1.274	BDL	0.003	0.000	0.003
Gil04	108	11/26/24 -	7:27 AM 2:50 PM	- -	Clean room Crawlspace	A		2.50	2.50	2.50	5.0	100	443	1107.5	6.369	BDL	0.003	0.001	0.003
Gil05	109	11/26/24 -	7:27 AM 2:50 PM	- -	Brandon Cursey 401148 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	10.0	100	443	1107.5	12.739	0.004	0.003	0.003	0.006
Gil06	110	11/26/24 -	7:27 AM 2:50 PM	- -	Brendan Fields 402889 PAPR Crawlspace	P	<0.01	2.50	2.50	2.50	8.0	100	443	1107.5	10.191	0.004	0.003	0.002	0.003
Gil07	111	11/26/24 -	7:27 AM 2:50 PM	- -	Inside crawlspace Crawlspace	A		10.00	10.00	10.00	3.0	100	443	4430.0	3.822	BDL	0.001	0.000	0.001
HV01	112	11/26/24 -	2:53 PM 4:55 PM	- -	CLEARANCE CRAWLSPACE AND GLOVEBAG	A		10.00	10.00	10.00	5.0	100	122	1220.0	6.369	BDL	0.003	0.001	0.003
HV02	113	11/26/24 -	2:53 PM 4:55 PM	- -	CLEARANCE CRAWLSPACE AND GLOVEBAG	A		10.00	10.00	10.00	6.0	100	122	1220.0	7.643	BDL	0.003	0.001	0.003
HV03	114	11/26/24 -	2:53 PM 4:55 PM	- -	CLEARANCE CRAWLSPACE AND GLOVEBAG	A		10.00	10.00	10.00	4.0	100	122	1220.0	5.096	BDL	0.003	0.001	0.003
HV04	115	11/26/24 -	2:53 PM 4:55 PM	- -	CLEARANCE CRAWLSPACE AND GLOVEBAG	A		10.00	10.00	10.00	4.0	100	122	1220.0	5.096	BDL	0.003	0.001	0.003
HV05	116	11/26/24 -	2:53 PM 4:55 PM	- -	CLEARANCE CRAWLSPACE AND GLOVEBAG	A		10.00	10.00	10.00	3.0	100	122	1220.0	3.822	BDL	0.003	0.001	0.003

ANALYST PARTICIPATING IN LAB AIHA-151368 NIOSH 7400 METHOD 7/1/2010
NC = Not Counted. Reasons: 1. Overload; 2. Damaged Filter; 3. Pump Failure; 4. Missing Filter REV 1
Rotometer Number: 999
Calibration Date: 10/1/24

I hereby certify that the above samples were collected and analyzed in compliance with applicable standards and regulations.

AM Technician: Ben Baggett
Location: Perry Medical, Perry, OK Crawlspace and Glovebag
Project Number: TBD
Contractor: Tec-An

Notes:
, Tec-An continue glove bag in FFAPR, loadout, run clearance

2-10-08

Oklahoma Department of Labor
www.ok.gov/odol/

3017 North Stiles, Suite 100
Oklahoma City, OK 73105
405-521-6464 • 888-269-5353
Fax: 405-521-6025

Abatement Preparation Inspection Form

Abatement Project: Alliance Medical - Perry Date: 11 07 2014 Time: 1100

Project No.: 14-0598 Phase: 1

Project Address/Location: 501 N. 14th Street City: Perry Zip: 73077

Contractor: Tec-Air Contact Person: Kenneth Nuleine

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.

Item	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 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	✓	☐	☐	☐
(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	☐	☐	✓	☐
(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: Contractor to wear PAPR's & do not start work until supervisor [illegible] fit tests. Contractor to establish ACD's & critical barriers in work area, install temp lighting in work area, bag glovebags and do [illegible] debris [illegible] to bag [illegible] clothes & [illegible] glovebags. The rest of the ACM debris clean up will take place during/after glovebag operations. When tasks are completed Contractor to call ODOL to set up Prep Inspection
Pre-Prep inspection Accepted.

Orders:

☐ Imminent Danger

Inspector's Signature Contractor's or Representative's Signature

Notice of Inspection

Oklahoma Department of Labor
www.labor.ok.gov

24108

Oklahoma City
409 NE 28th Street, 3rd Floor
Oklahoma City, OK 73105
405-521-6467
888-269-5353

1. INVESTIGATION IDENTIFICATION			2. TIME	3. COMPANY NAME
DATE	INSPECTOR NO.	DAILY SEQ NO.		
11-21-2024	22	#1	1035	Tec-Am Inc.
4. INSPECTOR ADDRESS				**5. COMPANY ADDRESS**
409 NE 28th Street, 3rd floor OKC, OK 73105				2517 S. Purdue Ave. OKC, OK 73128

REASON FOR INSPECTION

Under the authority of Section 11 of the Toxic Substances Control Act:

☐ For the purpose of inspecting (including taking samples, photographs, statements, and other inspection activities) an establishment, facility or other premises in which chemical substances or mixtures or articles containing same are manufactured, processed or stored, or held before or after their distribution in commerce (including records, files, papers, processes, controls, and facilities) and any conveyance being used to transport chemical substances, mixtures or articles containing same in connection with their distribution in commerce (including records, files, papers, processes, controls and facilities) bearing on whether the requirements of the Act applicable to the chemical substances, mixtures or articles within or associated with such premises or conveyance have been complied with.

☒ In addition, this inspection extends to (*check appropriate boxes*):

☐ A. Financial data

☒ D. Personnel data (40 CFR Part 763 Subpart E)

☐ B. Sales data

☐ E. Research data

☐ C. Pricing Data

The nature and extent of inspection of such data specified in A through E above is as follows:

Licensure check

CERTIFICATION

I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

INSPECTOR SIGNATURE		RECIPIENT SIGNATURE	
Justin Creek		Kenneth L Austin	
NAME		**NAME**	
Justin Creek		KENNETH AUSTIN	
TITLE	**DATE SIGNED**	**TITLE**	**DATE SIGNED**
Asbestos Inspector	11-21-2024	SUPERVISOR	11-21-2024

Oklahoma Department of Labor
www.ok.gov/odol

Oklahoma City
409 NE 28th Street, 3rd Floor
Oklahoma City, OK. 73105
405-521-6467
888-269-5353

Oklahoma Accreditation Plan (OAP) Inspection Form

Name of Facility: Stillwater Medical - Perry
Facility Address: 501 N. 14th Street
City: Perry Zip: 73077
DOL Project Numb, if applicable: 24-0598
Owner name: City of Perry
Owner address: 622 Cedar PO Drawer 798
Owner phone: 580-336-4109
Contact person: Nate Reed

Date: 11-21-2024 Time: 1055
Reason for Inspection: [X] Routine [ ] Citizen Complaint [ ] Response Action [ ] Other
Contractor: Tec-Am Inc.
Contractor address: 2517 South Purdue
City: OKC Zip: 73128
Contractor office phone: 405-681-7076
Contact person: Drayson Cook

Abatement Project Description (size of project, type of material, methods used, etc.)
Critical barriers, drop clothes for glove bag operations & ACM debris cleanup in crawl space area. TSI material containing (2% chrysotile, 10% amosite).

OPENING CONFERENCE

Personnel present and interviewed:
Name: Kenneth Nubine Title: Supervisor
Name: Ben Boggett Title: Air Tech
Name: Title:

ODOL inspector accompanied by other State or Federal employee(s)
Yes [ ] No [X]
Name: Title:
Name: Title:

Credentials presented to:
Name: Kenneth Nubine Title: Supervisor
Name: Ben Boggett Title: Air Tech

Notice of Inspection signed and a copy provided to official?
Yes [X] No [ ]

INSPECTION

Was the building initially inspected for asbestos?
Yes [X] No [ ]
Name of inspector: Drayson Cook
License #: 159935 Exp. Date: 10-09-2025
Date of Inspection: 05-06-2024

AIR MONITORING DATA

Name of Laboratory: Emerson
Address: 2302 E. Prospect
City: OKC Zip: 73129
License #: 143990 Exp. Date: 08-16-2025
On-Site air tech contract: B. Boggett Phone: 405-834-2490
Type of analysis: TEM [ ] PCM [X]

ACCREDITATION OF CONTRACTORS & WORKERS

Contractors/Supervisors:

Name	Issue date	License #	Exp. Date
Kenneth Nubine	02-27-2024	400826	02-15-2025

ACCREDITATION OF CONTRACTORS & WORKERS, cont.

Workers:

Name	Issue date	License #	Exp. Date
Jayshawn Slander	07-31-2024	403356	06-11-2025
Antonio Hamilton	07-26-2024	403534	07-25-2025
Brendan Fields	05-20-2024	402889	05-14-2025
Brandon Coursey	08-20-2024	401148	07-25-2025
Lionel Wahpekeche	11-18-2024	273095	11-05-2025
Cornelius Cheves	03-01-2024	402558	02-19-2025
Dondre Bowman	02-29-2024	403463	02-19-2025
Rogelio Alvarez	01-19-2024	403030	01-18-2025

Definition of Public and Commercial Building:

The interior space of any building, excluding residential apartment buildings of fewer than four (4) units or detached single-family homes. The term includes, but is not limited to industrial and office buildings, residential apartment buildings and condominiums of four (4) or more dwelling units, government-owned buildings, colleges, school buildings, museums, airports, hospitals, churches, preschools, stores, warehouse, and factories. Interior space includes interior hallways connecting buildings, porticos, and mechanical systems used to condition interior space.

Recommendations & Remarks

Orders

Inspector: [signature] Contractor or Representative: [signature]

Oklahoma Department of Labor

2410-08

409 NE 28th Street, 3rd Floor
Oklahoma City, OK 73105
(405-521-6464) FAX (405-521-6025)

Asbestos Division

Visual/Final Inspection Form

DOL Project #:	24-0598	11	27	2024	1205
Facility:	Stillwater Medical-Perry	Month	Day	Year	Time
Contractor #:	110157	County #:	52	FY #:	2025
Address/Location:	501 N. 14th Street	Address City:	Perry		
Owner/Occupant:	City of Perry	Contractor:	Tec-Am Inc.		
Contact Name:	Nate Reed	Contractor's Rep.:	Kenneth Nulaine		
Facility Phone #:	580-336-4109	Contractor's Phone #:	405-795-9512		

1. Description of Area: Crawl space requiring glovebag operations and ACM debris clean up.

2. Areas requiring further cleaning: None.

3. Air Counts (PCM/TEM) On-Site?: yes. All clearance samples Acceptable.

4. DOL Recommendations: Remove all poly & tape and dispose of as ACM.

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

6. Notes: Visual & Final inspection Accepted.
(This project is Complete)

7. Note any violations cited: 380:50-

8. Contractor's Comments:

Justin Call
Inspector's Signature

Kenneth L Nulaine
Contractor's Signature

Revised 10/2023 *White Copy: DOL* *Yellow Copy: Consultant* *Pink Copy: Contractor/Owner*

SITE
SOUTHEAST LANDFILL 405-672-7379
7001 S. Bryant 7001 S. Bryant OKC, OK 73149

CUSTOMER
333446
PREMIER WASTE LLC
JUSTIN MULLINAX
OKLAHOMA CITY, OK 73189

Contract:4061248678
Generator:Premier Waste LLC

SITE	TICKET #	CELL
01	1720667	

WEIGHMASTER Marketta D.

DATE/TIME IN	DATE/TIME OUT
VEHICLE ~~11/15/24 9:15 am~~ PREMIER WASTE	CONTAINER ~~11/15/24 9:28 a~~

REFERENCE 308
BILL OF LADING

SCALE IN GROSS WEIGHT 50,520 NET TONS 7.09
SCALE OUT TARE WEIGHT 36,340 NET WEIGHT 14,180

INBOUND
INVOICE

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
0.00	YD	Tracking QTY				
7.09	tn	SW-ASBESTOS-FRIABLE Origin:NON OKC 100%				
		STATE FEE			Tax Total	

Signature

I/WE CERTIFY THAT THE WASTE DELIVERED IS NON-HAZARDOUS." I UNDERSTAND THAT FALSIFICATION OF A WASTE MANIFEST IS A CRIMINAL OFFENSE. I AFFIRM THAT THE INFO IN THIS MANIFEST IS FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE"
IS THE LOAD FROM OKC LIMITS?
____ YES ____NO

Payment(s)

NET AMOUN
TENDERED
CHANGE
CHECK#

The undersigned individual signing this document on behalf of Customer acknowledges that he or she has read and understands the terms and conditions on the reverse side and that he or she has the authority to sign this document on behalf of the customer.

RS-F042UPR (04/19)

SIGNATURE _____

SITE
SOUTHEAST LANDFILL 405-672-7379
7001 S. Bryant 7001 S. Bryant-OKC, OK 73149

CUSTOMER 333446
PREMIER WASTE LLC
JUSTIN MULLINAX
OKLAHOMA CITY, OK 73189

Contract:4061248678
Generator:Premier Waste LLC

SITE 01 | TICKET # 1720667 | CELL
WEIGHMASTER Marketta D.
DATE/TIME IN 11/15/24 9:15 am | DATE/TIME OUT 11/15/24 9:28 am
VEHICLE PREMIER WASTE | CONTAINER
REFERENCE 308
BILL OF LADING

SCALE IN GROSS WEIGHT 50,520 NET TONS 7.09
SCALE OUT TARE WEIGHT 36,340 NET WEIGHT 14,180

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INVOICE

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
0.00	YD	Tracking QTY				
7.09	tn	SW-ASBESTOS-FRIABLE Origin:NON OKC 100%				
		STATE FEE			Tax Total	

30 yd³

Signature _____

I/WE CERTIFY THAT THE WASTE DELIVERED IS NON-HAZARDOUS." I UNDERSTAND THAT FALSIFICATION OF A WASTE MANIFEST IS A CRIMINAL OFFENSE. I AFFIRM THAT THE INFO IN THIS MANIFEST IS FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE"
IS THE LOAD FROM OKC LIMITS?
____ YES ____NO

Payment(s)

TENDERED
CHECK#

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RS-F042UPR (04/19)

SIGNATURE _____

REPUBLIC SERVICES, INC.

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

2710-08

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

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number	b. Manifest Document Number	c. Page 1 of 1

d. Generator's Name and Location:	e. Generator's Mailing Address:
Stillwater Medical Center 501 N 14th St. Perry, OK 73077 f. Phone:580-336-3541	Premier Waste LLC PO Box 891702 OKC, OK 73189 g. Phone:405.378.2039
If owner of the generating facility differs from the generator, provide: h. Owner's Name:	i. Owner's Phone No.:

j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
4061248678	6/11/27	Friable Asbestos				

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

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
Justin		11-15-24

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address:
Premier Waste
P.O. Box 891702
Okc Ok 73189

7.09
1722607

b. Phone: 405 - 378 - 2039

c. Driver Name (Print)	d. Signature	e. Date
Sergio Hall		11-15-24

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
Southeast OKC Landfill 7001 S. Bryant Ave. OKC, OK 73149 b. Phone: 405.672.7379		

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

e. Name of Authorized Agent (Print)	f. Signature	g. Date
Marietta Davis	Marietta Davis	11-15-24

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:
Tec-An, Inc. 2517 South Purdue Oklahoma City, OK 73218 b. Phone: 405-681-7076	Stillwater Medical Center 501 N 14th St. Perry, OK 73077 d. Phone:580-336-3541
e. Special Handling Instructions and Additional Information:	

f. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable % Non-Friable

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

g. Operator's Name and Title (Print)	h. Signature	i. Date

*Operator 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

SITE
SOUTHEAST LANDFILL 405-672-7379
7001 S. Bryant 7001 S. Bryant OKC, OK 73149

CUSTOMER
333446
PREMIER WASTE LLC
JUSTIN MULLINAX
OKLAHOMA CITY, OK 73189

Contract:4061248678
Generator:Premier Waste LLC

SITE	TICKET #	CELL
01	1723221	

WEIGHMASTER

DATE/TIME IN	Marketta D.	DATE/TIME OUT
VEHICLE	11/27/24 8:55 am	CONTAINER 11/27/24 9:13 am
REFERENCE	PREMIER WASTE	
BILL OF LADING	308	

SCALE IN GROSS WEIGHT 45,180 NET TONS 4.66 INBOUND
SCALE OUT TARE WEIGHT 35,860 NET WEIGHT 9,320 INVOICE

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
0.00	YD	Tracking QTY				
4.66	tn	SW-ASBESTOS-FRIABLE Origin:NON OKC 100%				
			STATE FEE		Tax Total	

Signature

I/WE CERTIFY THAT THE WASTE DELIVERED IS NON-HAZARDOUS. "I UNDERSTAND THAT FALSIFICATION OF A WASTE MANIFEST IS A CRIMINAL OFFENSE. I AFFIRM THAT THE INFO IN THIS MANIFEST IS FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE"
IS THE LOAD FROM OKC LIMITS?
____ YES ____ NO

Payment(s)

NET AMOUNT
TENDERED
CHANGE
CHECK#

The undersigned individual signing this document on behalf of Customer acknowledges that he or she has read and understands the terms and conditions on the reverse side and that he or she has the authority to sign this document on behalf of the customer.

RS-F042UPR (04/19)

SIGNATURE

SITE
SOUTHEAST LANDFILL 405-672-7379
7001 S. Bryant 7001 S. Bryant-OKC, OK 73149

CUSTOMER 333446
PREMIER WASTE LLC
JUSTIN MULLINAX
OKLAHOMA CITY, OK 73189

Contract:4061248678
Generator:Premier Waste LLC

SITE 01 | TICKET # 1723221 | CELL
WEIGHMASTER Marketta D.
DATE/TIME IN 11/27/24 8:55 am | DATE/TIME OUT 11/27/24 9:13 am
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BILL OF LADING

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			STATE FEE		Tax Total	

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IS THE LOAD FROM OKC LIMITS?
____ YES ____ NO

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RS-F042UPR (04/19)

15 yd³

Payment(s)

TENDERED
CHANGE
CHECK#

SIGNATURE

REPUBLIC SERVICES, INC.

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

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

2410-08

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number	b. Manifest Document Number	c. Page 1 of 1

d. Generator's Name and Location:	e. Generator's Mailing Address:
Stillwater Medical Center 501 N 14th St. Perry, OK 73077 f. Phone:580-336-3541	Premier Waste LLC PO Box 891702 OKC, OK 73189 g. Phone:405.378.2039
If owner of the generating facility differs from the generator, provide:	
h. Owner's Name:	I. Owner's Phone No.:

j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
4061248678	6/11/27	Friable Asbestos				

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

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
Phillip Kyle		11-27-24

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address:
Premier Waste
P.O. Box 891702
Okc Ok 73189

4.004
17.23221

b. Phone: 405 - 378 - 2039

c. Driver Name (Print)	d. Signature	e. Date
Sergio Hays		11-27-24

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
Southeast OKC Landfill 7001 S. Bryant Ave. OKC, OK 73149 b. Phone: 405.672.7379		

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

e. Name of Authorized Agent (Print)	f. Signature	g. Date
		11-27-24

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:
Tec-An, Inc. 2517 South Purdue Oklahoma City, OK 73218 b. Phone: 405-681-7076	Stillwater Medical Center 501 N 14th St. Perry, OK 73077 d. Phone:580-336-3541

e. Special Handling Instructions and Additional Information:

f. ☒ Friable ☐ Non-Friable ☐ Both 100 % Friable % Non-Friable

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

g. Operator's Name and Title (Print)	h. Signature	i. Date
Phillip Kyle		11-27-24

*Operator 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

2410-08

SITE
SOUTHEAST LANDFILL 405-672-7379
7001 S. Bryant 7001 S. Bryant OKC, OK 73149

CUSTOMER
333446
PREMIER WASTE LLC
JUSTIN MULLINAX
OKLAHOMA CITY, OK 73189

Contract:4061248678
Generator:Premier Waste LLC

SITE	TICKET #	CELL
01	1722970	

WEIGHMASTER Marketta D.

DATE/TIME IN 11/26/24 10:43 am | DATE/TIME OUT 11/26/24 11:04 a

VEHICLE PREMIER WASTE | CONTAINER

REFERENCE 308

BILL OF LADING

SCALE IN GROSS WEIGHT 47,480 NET TONS 5.99
SCALE OUT TARE WEIGHT 35,500 NET WEIGHT 11,980

INBOUND
INVOICE

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
0.00	YD	Tracking QTY				
5.99	tn	SW-ASBESTOS-FRIABLE Origin:NON OKC 100%				
			STATE FEE		Tax Total	

Signature

I/WE CERTIFY THAT THE WASTE DELIVERED IS NON-HAZARDOUS. "I UNDERSTAND THAT FALSIFICATION OF A WASTE MANIFEST IS A CRIMINAL OFFENSE. I AFFIRM THAT THE INFO IN THIS MANIFEST IS FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE"
IS THE LOAD FROM OKC LIMITS?
___ YES ___ NO

Payment(s)

NET AMOUNT
TENDERED
CHANGE
CHECK#

The undersigned individual signing this document on behalf of Customer acknowledges that he or she has read and understands the terms and conditions on the reverse side and that he or she has the authority to sign this document on behalf of the customer.

RS-F042UPR (04/19)

SIGNATURE

SITE
SOUTHEAST LANDFILL 405-672-7379
7001 S. Bryant 7001 S. Bryant-OKC, OK 73149

CUSTOMER 333446
PREMIER WASTE LLC
JUSTIN MULLINAX
OKLAHOMA CITY, OK 73189

Contract:4061248678
Generator:Premier Waste LLC

SITE 01 | TICKET # 1722970 | CELL

WEIGHMASTER Marketta D.

DATE/TIME IN 11/26/24 10:43 am | DATE/TIME OUT 11/26/24 11:04 am

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INBOUND
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QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
0.00	YD	Tracking QTY				
5.99	tn	SW-ASBESTOS-FRIABLE Origin:NON OKC 100%				
			STATE FEE		Tax Total	

28yd3

Signature

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IS THE LOAD FROM OKC LIMITS?
___ YES ___ NO

Payment(s)

TENDERED
CHANGE
CHECK#

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RS-F042UPR (04/19)

SIGNATURE

REPUBLIC SERVICES, INC.

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number	b. Manifest Document Number	c. Page 1 of 1

d. Generator's Name and Location:	e. Generator's Mailing Address:
Stillwater Medical Center 501 N 14th St. Perry, OK 73077 f. Phone:580-336-3541	Premier Waste LLC PO Box 891702 OKC, OK 73189 g. Phone:405.378.2039
If owner of the generating facility differs from the generator, provide: h. Owner's Name:	i. Owner's Phone No.:

j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
4061248678	6/11/27	Friable Asbestos				

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p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
Brandon Courey		11/26/24

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address:
Premier Waste
P.O. Box 891702
Okc Ok 73189

5.99
1722970

b. Phone: 405 - 378 - 2039

c. Driver Name (Print)	d. Signature	e. Date
Sergio Hays		11-26-24

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
Southeast OKC Landfill 7001 S. Bryant Ave. OKC, OK 73149 b. Phone: 405.672.7379		

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

e. Name of Authorized Agent (Print)	f. Signature	g. Date
Paulette Davis	Paulette Davis	11-26-24

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:
Tec-An, Inc. 2517 South Purdue Oklahoma City, OK 73218 b. Phone: 405-681-7076	Stillwater Medical Center 501 N 14th St. Perry, OK 73077 d. Phone:580-336-3541

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g. Operator's Name and Title (Print)	h. Signature	i. Date
Brandon Courey		11/26/24

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