

**INVITATION TO BID (ITB)**

**DEMOLITION AND SITE STABILIZATION OF FLOOD-DAMAGED  
RESIDENTIAL PROPERTY**

**TOWN OF PITTSFIELD, VERMONT**

**113 PARK PLACE  
&  
2335 VT ROUTE 100  
PITTSFIELD, VT 05762**

## 1. SUMMARY AND BACKGROUND

The Town of Pittsfield is participating in the Hazard Mitigation Grant Program which provides funding to towns to purchase and demolish properties damaged by Tropical Storm Irene. This is a federally funded program administered by the State of Vermont Department of Public Safety. In addition, this activity is funded by a Community Development Block Grant--Disaster Relief grant that provides the 25% match required for these buyouts. The property included in this ITB has been purchased by the Town of Pittsfield. The funding for this project is provided by these grants to the Town of Pittsfield. The Town is an equal opportunity employer.

Contractors will provide their competitive bid to demolish and/or remove all improvements, including but not limited to, septic systems, water wells, buildings, foundations, electrical and phone lines, pavement, parking, fuel tanks, debris, and household hazardous materials. All asbestos-containing material shall be abated by a firm licensed to do such work in Vermont in accordance with Vermont rules prior to demolition.

Contractors are responsible for returning the project site to a smooth, graded, stabilized, and vegetated condition that is in accordance with all applicable federal, state, and local statutes, policies, plans, and regulations.

## 2. BID GUIDELINES AND FORMAT

**Contractors must submit the following three items with their bid, broken out for each building separately:**

1. Bid Form (one for each property).
2. Contractor's proof of insurance
3. References from three previous clients

A pre-bid conference will be held at the Pittsfield Town Offices, 40 Village Green, Pittsfield, Vermont at 9:30 A.M., Thursday, December 15, 2016. A site visit to the properties will occur following a brief overview of the project. **It is required that contractors be in attendance to bid on the project.**

The Town of Pittsfield is requesting lump sum bids. Contractors shall provide a cost for the project using the Bid Form included in this document.

Section 4 of this ITB shows options that can be used for certain aspects of the demolition and site work (to indicate, for example, if septic tanks will be removed or punctured and left in place). This has been filled out by the Town of Pittsfield.

Two bid packages (one for each property) must be received by the Town of Pittsfield by **6:00 P.M., Tuesday, January 17, 2017** and can be either delivered to the Pittsfield Town Office, mailed to the Pittsfield Town office, or emailed to Patricia Haskins, Pittsfield Town Clerk, at the following email address: [townofpittsfield@myfairpoint.net](mailto:townofpittsfield@myfairpoint.net). The winning bidder will be selected by the sole judgment of the Town of Pittsfield's Selectboard based on technical expertise and experience, cost, project schedule, and completeness of proposal. The Town of Pittsfield reserves the right at its sole discretion to reject any and all bids, wholly or in part, to waive any informalities or any irregularities therein, to accept any bid even though it may not be the lowest bid, to call for rebids, to negotiate with any bidder, and to make an award which in its sole and absolute judgment will best serve the Town's interest. The selectboard reserves the right to investigate the financial responsibility of any bidder to determine his or her ability to assure service throughout the term of the contract.

The selected contractor will work for the Town of Pittsfield's Selectboard and will be responsible to the Town for satisfactory completion of the project. Payment for services rendered in accordance with the contract will be made within 30 days of successful completion of the final inspection of the property.

All contractors and subcontractors must have the following, and provide proof thereof, prior to executing a contract with the Town of Pittsfield:

- a) License or certification for any work to be provided, as required.
- b) Insurance coverage as noted in this document.
- c) Technical capability, education, or expertise with regards to the skills and knowledge required to perform residential demolition projects.
- d) Contract information for three recent and unduplicated clients for similar projects, which need to include name, contact person, date of work, address and phone number.
- e) Debarment certification.
- f) Registration at SAM.gov.

### **3. PROJECT SPECIFICATIONS**

1. This project consists of demolition, disposal, and required site work for the following properties:  
**113 Park Place Pittsfield, Vermont**  
**2335 VT Route 100 Pittsfield, Vermont**
2. The locations and other particulars are identified in attachment(s) for each property that

include the following:

- Photographs of the building;
- Tax parcel map with the subject property marked;
- Legal description of the property, and if already on file, a copy of a survey plot by a licensed surveyor;
- Asbestos Testing Report.

3. All work on the project as a whole must be completed by June 1, 2017.

## 4. REQUIREMENTS

### **Required Professional Services**

Contractor Services are to be provided by an insured contractor, including subcontractors, in good-standing with the State of Vermont, holding any required certifications for the proposed work to be completed. A license or certification is required for the following professional services in Vermont: asbestos abatement, lead abatement, electrical, plumbing, and some aspects of septic system, water supply work. Services will be procured by competitive bid, and must be consistent with the Town of Pittsfield's bidding policy and are subject to the regulations in 24 CFR 85.36 as it pertains to procurement services. All contractors who wish to bid on the advertised project must meet all the minimum qualifications established by the Town of Pittsfield's Select Board.

### **Project Requirements**

1. All waste generated by the project shall be lawfully disposed of and the contractor shall provide manifests of such transport and disposal by firms licensed to operate and transport in Vermont. All costs of disposal are included in the bid.

All buildings, structures shall be demolished and removed unless noted below:

None

\_\_\_\_\_

2. Septic tanks must be pumped, and filled in place with clean fill, crushed in place, or removed and properly disposed of in accordance with the most recent adoption of Chapter 1 of the Vermont Environmental Protection Rules: Wastewater System and Potable Water Supply Rules.

Septic tanks shall be:

- Removed or
- Punctured and filled with sand and left on site.

3. Septic lines and distribution boxes shall be:

- Removed or
- Left in place.

4. If public sewer or water is provided to the site, it shall be disconnected using the Town's standard procedure.

5. Unless otherwise noted, wells must be properly abandoned in accordance with the most recent adoption of Chapter 21 of the Vermont Environmental Protection Rules: Water Supply Rule and sealed no less than 1 foot below finished grade. Springs shall be filled.

6. No demolition or site work shall take place within the town or state road right of way unless as directed below:

- None



7. Concrete or stone foundations shall be:

- Removed and recycled or landfilled;
  - Broken up and buried in the foundation hole on site so long as they have had any floor broken up so as not to retain water and are removed to at least one foot below grade;
  - Foundation stones shall be left on site as follows;
- 

8. Contractors are responsible for all access permits and sufficient access to the site, including traffic control and temporary bridges/culverts, if needed.

9. Erosion control shall be provided using Best Management Practices as outlined at <https://www.epa.gov/npdes/national-menu-best-management-practices-bmps-stormwater#edu> or State of Vermont standards for construction if stricter.

10. Existing trees and vegetation outside of the needed project area shall be protected with snow fencing or stakes and flagging.
11. If demolition results in excavation, holes, or unusual contours, then finish grading and/or fill may be required to return the site to a “natural” state, including vegetation. Woody debris on site shall be left in place unless otherwise directed by River Engineer. Standard conservation seeding of the graded site is included in the bid. In cases where the flood has scoured away topsoil, sufficient topsoil shall be brought in as needed to reestablish vegetation. Any off-site fill used on site must be clean and free of invasive plants. If gravel material is required to be removed from the site by the River Engineer, it shall not be placed in any flood zone off site.
12. On the 113 Park Place property, the existing stone retaining wall that abuts the stream shall be removed and restored to its natural slope (see attached pictures). Large boulders shall be placed at the top of the bank.
13. Site work will be coordinated with the town so as to not hinder subsequent reuse. Live trees and shrubs shall be preserved, unless not feasible due to demolition.
14. Specific site work may be required by permits and such work is included in this bid, therefore potential contractors are encouraged to obtain an understanding of such requirements as change orders due to permit conditions will not be allowed. Possible requirements may include dates of work, removal of material, grading, bank alterations, temporary erosion control, berm removal, etc.
15. Contractors are responsible for coordinating with the Town on any and all permits, notices and certifications, and shall provide a copy of all to the town. Any work within locally regulated flood zones will require a town permit prior to beginning work. In addition, any work within the “top of bank” will require either an individual or general stream alteration permit from the State River Engineer, or a letter stating that no permit is needed, prior to the beginning of work. Also, contractors shall coordinate with the River Engineer to see if any permit is required from the US Army Corps of Engineers, and if such permit is required shall work with the Town to obtain it prior to beginning work.
16. All buildings have been tested for asbestos containing materials (ACM) by a qualified firm, and if present, shall be abated by a firm licensed to do such work in Vermont in accordance with Vermont rules prior to demolition. An abatement certification, in cases where abatement is needed, shall be provided to VTDOH and the town. **The bid must include any and all costs for asbestos abatement and disposal.**
17. The contractor is responsible for the required EPA/DEC notice prior to demolition and

shall provide the town a copy. The contractor is responsible for notifying Dig Safe.

18. Household hazardous wastes, mercury containing thermostats, fuel tanks, florescent bulbs and ballasts shall be removed prior to demolition and disposed of properly. Fuel tanks shall be emptied, removed and disposed of per Vermont regulations by qualified contractors.
19. If a petroleum storage tank is present, then only certified firms may do removal of such and notice must be sent to DEC prior to removal and a full closure report done, including any required testing. A copy of all testing and a closure report will be provided to the town. If contamination is found on the property, or if during work a spill occurs, stop work and contact 800-641-5005 to make a report and obtain guidance on the next steps to take regarding cleanup. Please alert the State Hazard Mitigation Officer as this may result in a change to the scope of work, timeline, and ensuring adequate funding is available.
20. All mobilization and demobilization costs are included in the bid.
21. If any archeological deposits, including Native American pottery, stone tools, bones, or human remains are uncovered during site work, the project shall be halted, the town and TRORC notified, and reasonable measures taken to preserve the area and restrict access. Work shall only recommence upon state and federal permission.
22. Salvage of metals, untreated lumber, recycling of asphalt and concrete, and deconstruction of usable items is encouraged, however all materials salvaged must be free of asbestos, and any salvage must have a manifest as to its destination. Burying or burning of any materials is not allowed.
23. The Town of Pittsfield makes no warranty that the site is safe to work on. Building and structures may have been structurally compromised and the site itself may be unstable. The contractor shall have a health and safety plan for workers on site, comply with all OSHA/VOSHA rules, and shall post the site during work for authorized personnel only.
24. The contractor shall not operate on the site earlier than 6 A.M. or later than 8 P.M.

## **25. Insurance**

The Contractor must provide certificates of insurance to show that the following minimum coverages are in effect:

Workers Compensation: With respect to all operations performed, any contractors shall carry workers' compensation insurance in accordance with the laws of the State of Vermont.

General Liability and Property Damage: All contractors shall carry general liability insurance having all major divisions of coverage including, but not limited to:

Premises - Operations

Products and Completed Operations

Personal Injury Liability

Contractual Liability

The policy shall be on an occurrence form and limits shall not be less than:

\$1,000,000 Per Occurrence

\$2,000,000 General Aggregate

\$2,000,000 Products/Completed Operations Aggregate

\$1,000,000 Personal and Advertising Injury Liability

Any contractors shall be required to name the Town, its officers and employees as additional insureds for liability.

Automotive Liability: The contractor shall carry automotive liability insurance covering all motor vehicles, including hired and non-owned coverage, used in connection with the Agreement. Limits of coverage shall not be less than: \$1,000,000 combined single limit.



## 5. BID FORM

CONTRACTOR: \_\_\_\_\_

The Bidder agrees to perform all work described in the ITB for the following Total Bid for this property:

NOTE:

\* Bids shall include the cost of all subcontractors, sales tax, and other applicable taxes and fees

\* The contractor selected will be held responsible for the total lump sum bid for this project not for individual line items on worksheet(s)

Parcel Number: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Site Preparation/Mobilization Costs: \$ \_\_\_\_\_

Cost to Raze Primary Structure: \$ \_\_\_\_\_

Cost to Raze Foundations/Slabs: \$ \_\_\_\_\_

Cost to Raze Other Site Improvements: \$ \_\_\_\_\_

Disposal Costs \$ \_\_\_\_\_

Cost to Properly Abandon Septic System or Municipal Service Connection: \$ \_\_\_\_\_

Cost to Properly Abandon Water Supply or Municipal Service Connection: \$ \_\_\_\_\_

Cost to Properly Remove Fuel Tank from Service: \$ \_\_\_\_\_

Cost to Abate Asbestos: \$ \_\_\_\_\_

Other (describe below): \$ \_\_\_\_\_

**Subtotal** \$ \_\_\_\_\_

Salvage (describe below): (\$ \_\_\_\_\_)

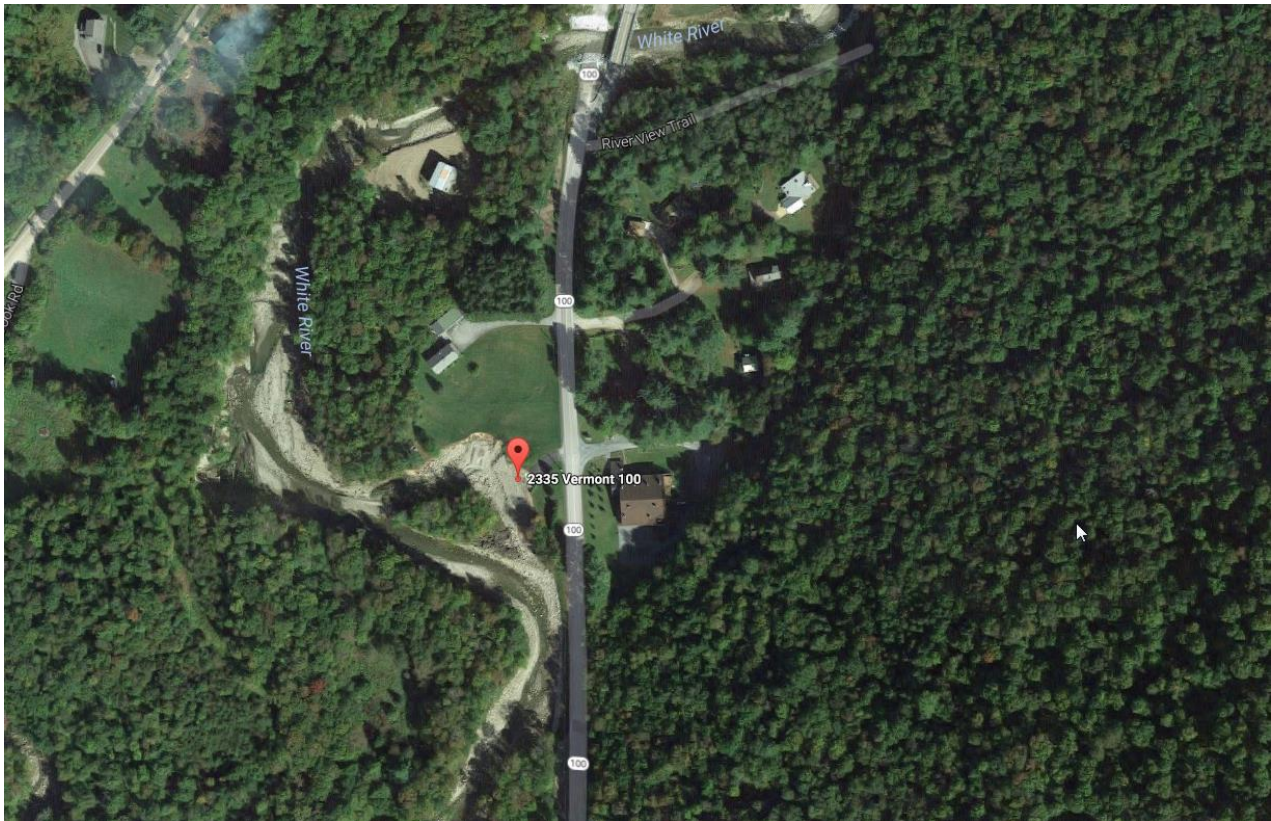
**Net Dollar Amount (Total Bid for this Property)** \$ \_\_\_\_\_

Contractor's Notes for "Other" Costs:

Contractor's Description of Proposed Salvage:

## Attachments

### 2335 VT Route 100



2335 VT Route 100 was damaged during Tropical Storm Irene in 2011 from flooding in the White River. This property was purchased by the Town of Pittsfield using FEMA Hazard Mitigation and CDBG-DR funds. An asbestos report was completed (attached) and found that there is no asbestos on the property. The original home was demolished, but an exterior building remains that will be part of this demolition project.



(05-0612)

(39-0112)

(39-0140)

(39-0060)

(38-0250)

(38-0300)

(38-0300)

(34-0283)

(34-0250)

(34-0221)

(34-0193)

(34-0055)

(05-0370)

(05-0471)

(05-0390)

(05-0369)

(05-0309)

(05-0217)

(04-0546)

(05-0063)

(04-0451)

(04-0517)

(04-0515)

(31-0427)

(31-0357)

(31-0309)

(31-0276)

(31-0253)

(37-0015)

(37-0075)

(37-0018)

(37-0050)

(31-0071)

(05-0106)

(04-0350)

(04-0375)

(04-0451)

(04-0517)

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(40-0352)

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(40-0091)

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(04-0230)

(04-0375)

(04-0451)

(04-0517)

(99-2903)

(99-2918)

(99-2834)

(99-2786)

(99-2652)

(99-2651)

(99-2586)

(99-2476)

(69-0012)

(69-0080)

(69-0010)

(69-0048)

(69-0046)

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(99-2358)

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Bombadil

Pittsfield Stockbridge

U S F S

THE COMMONS #69

(99-2490)  
89-0522

89-0198

2335 Rt 100

BAKER RD

-0143





9 November 2016

Mr. Kevin Geiger  
TRORC  
128 King Farm Road  
Woodstock, Vermont 05091

Re: Asbestos Assessment, 2335 VT Route 100, Pittsfield, Vermont  
K-D Project No. 16181-001

Dear Mr. Geiger:

At your request, K-D Associates, Inc. conducted an asbestos assessment of the garage building located at 2335 Vermont Route 100 in Pittsfield, Vermont in anticipation of the demolition of this building. Suspect materials were collected and analyzed by polarized light microscopy (PLM) until a positive sample is found or all samples are analyzed. A material is considered positive for asbestos if one sample is found to contain greater than one percent asbestos. Complete laboratory analysis results are included.

As the laboratory analysis results show, no asbestos containing materials were found at this location. One material, building paper beneath the metal roofing was sampled. An effort was made to find materials hidden from casual view. However, materials located above permanent ceilings, enclosed within walls or otherwise inaccessible may not have been sampled. Suspect materials, found during demolition activities, not identified in this survey should be assumed to be positive for asbestos until laboratory analysis shows otherwise.

I have enclosed the Environmental Protection Agency Notification of Demolition, which must be submitted two weeks prior to the demolition and a copy sent to the Vermont Department of Health along with this report. Please do not hesitate to call if you have any question or need additional information.

Sincerely

John Madigan



## Laboratory Results

Report Date: 11/8/2016

TR-ORC  
128 King Farm Road  
Woodstock, VT 05091

Date Received: 11/2/2016

Sample Location: 2335 Vermont Route 100  
Pittsfield, Vermont

Customer No.: 16181  
Lab Reference No.: 16650  
Number Samples Analyzed: 2

Analysis for asbestos type and quantity (visual area estimate and/or point count) was performed by EPA test method 600/R-93/116, utilizing Polarized Light Microscopy (PLM) and dispersion staining techniques.

Lab No.	Sample Identification	Result
B-16-4443	16MB30701 - Building paper, beneath metal roofing, garage	No Asbestos Detected
B-16-4444	16MB30702 - Building paper, beneath metal roofing, garage	No Asbestos Detected

Bryan Schultz  
Laboratory Manager

Laboratory Certifications: Vermont #AL278811  
Analyst: Bryan Schultz, #PB487404

The results listed above relate only to the items/samples tested. Samples received in good condition unless otherwise noted. K-D Associates assumes no responsibility or liability for the manner in which these results are used or interpreted. The accuracy of PLM may be limited in the analysis of certain sample materials. For PLM results that are "negative" or positive at less than one percent, re-analysis by another analytical method may be appropriate.

## EPA Notification of Demolition and Renovation

Operator Project #	Postmark:	Date Received:	Notification #				
<b>I. Type of Notification</b> (check one): <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revised <input type="checkbox"/> Cancelled							
<b>II. Facility Description</b>							
Building Name:							
Address:							
City:		State: VT		ZIP: 05	County:		
Site Location: adjacent to road							
Building Size (sq. ft.):		# of Floors:		Age in Years: ±			
Present Use: vacant			Prior Use				
<b>III. Type of Operation</b> (check one): <input checked="" type="checkbox"/> Demo <input type="checkbox"/> Ordered Demo <input type="checkbox"/> Renovation <input type="checkbox"/> Emergency Renovation <input type="checkbox"/> Fire Training							
<b>IV. Is Asbestos Present?</b> (check one): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<b>V. Facility Information</b>							
<b>Owner Name:</b>							
Address:							
City:		State: VT		ZIP: 05			
Contact:		Telephone: 802-		Fax: N/A			
<b>Removal Contractor Name:</b>							
Address:							
City:		State:		ZIP:			
Contact:		Telephone:		Fax:			
<b>Other Operator: (demolition/general)</b>							
Address:							
City:		State: VT		ZIP: 05			
Contact:		Telephone: 802-		Fax: N/A			
<b>VI. Procedure, including analytical methods, employed to detect the presence of and to estimate the quantity of RACM and Category I and Category II non-friable ACM:</b>							
Materials sampled and analyzed in accordance with Vermont Department of Health Regulations – EPA test method 600/R-93/116, utilizing Polarized Light Microscopy (PLM) and dispersion staining techniques							
<b>VII. Approximate Amount of Asbestos Materials:</b> N/A							
	RACM to be Removed	Non-friable Asbestos Material To be Removed		Non-friable Asbestos Material NOT to be Removed			
		Category I	Category II	Category I	Category II		
Pipes (linear feet)							
Surface Area (square feet)							
Facility Components (cubic ft.)							
<b>VIII. Scheduled Dates for Demolition or Renovation:</b> Start: _____ Complete: _____							
<b>IX. Dates for Asbestos Removal:</b> Start: _____ Complete: _____							
Days of the Week:	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
Hours of operation:		7:30-4:00	7:30-4:00	7:30-4:00	7:30-4:00	7:30-4:00	

*Continued on page 2*

EPA Notification of Demolition and Renovation (Continued)

<b>X. Description of planned Demolition or Renovation work to be performed and method(s) to be employed, including demolition or renovation techniques to be used and description of affected facility components:</b>		
Building to be demolished by heavy equipment		
<b>XI. Description of work practices and engineering controls to be used to comply with the requirements, including asbestos removal and waste handling emission control procedures:</b>		
<b>XII. Waste Transporter #1</b>		
Name:		
Address:		
City:	State:	ZIP:
Contact:	Telephone:	Fax:
<b>Waste Transporter #2</b>		
Name:		
Address:		
City:	State:	ZIP:
Contact Person:	Telephone:	Fax:
<b>XIII. Waste Disposal</b>		
Name:		
Location:		
City:	State:	ZIP:
Contact:	Telephone:	Fax:
<b>XIV. Emergency Demolition</b> (complete Item XIV only if this project is an Emergency Demolition)		
1. Attach a copy of the Order to this notice		
2. Name of Authority Issuing Order:	Title:	
3. Authority of Order (Citation of Code):		
4. Date of Order (MM/DD/YY):	Date Ordered to Begin (MM/DD/YY):	
<b>XV. Emergency Renovation</b> (Attach separate sheet with the following information if project is Emergency Renovation)		
1. Date and Hour of Emergency:		
2. Description of the Sudden, Unexpected Event:		
3. Explanation of how the event caused unsafe conditions or equipment damage or an unreasonable financial burden.		
<b>XVI. Description of procedures to be followed in the event that unexpected RACM is found or non-friable ACM becomes crumbled, pulverized or reduced to powder.</b>		
All work will stop and the Vermont Department of Health will be notified.		
<b>XVII. I certify that an individual trained in the provisions of NESHAP (40 CFR 60, Subpart M) will be on-site during the Demolition or Renovation, and evidence that the required training has been accomplished by this person will be available during normal business hours.</b>		
_____ Signature of Owner/Operator	_____ Date	_____ Type or Print Name and Title
<b>XVIII. I acknowledge the existence of laws prohibiting the submission of false or misleading statements, and I certify that facts contained in this notification are true, accurate, and complete.</b>		
_____ Signature of Owner/Operator	_____ Date	_____ Type or Print Name and Title

## ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

### INSTRUCTIONS

- I Type of Notification:** Enter "O" if the notification is a first time or original notification, "R" if the notification is a revision of a prior notification, or "C" if the activity has been cancelled.
- II Facility Information:** Enter the names, addresses, contact persons and telephone numbers of the following: Owner: Legal owner of the site at which asbestos is being removed or demolition planned. Removal Contractor: Contractor hired to remove asbestos. Other Operator: Demolition contractor, general contractor, or any other person who leases, operates, controls or supervises the site. If known, the name of the site supervisor should be entered as the contact person for the notification. If additional parties share responsibility for this site, demolition activity, renovations or ACM removal, include complete information (including name, address, contact person and telephone number) on additional sheets submitted with the form.
- III Type of Operation:** Enter "D" for facility demolition, "R" for facility renovation, "O" for ordered demolitions, or "E" for emergency renovations.
- IV Is Asbestos Present?** Answer "Yes" or "No" regardless of the amount or type of asbestos.
- V Facility Description:** Provide detailed information on the areas being renovated or demolished. If applicable, provide the floor numbers and room numbers where renovations are to be conducted. Site Location: Provide information needed to locate site in the event that the address alone is inadequate. Building Size: Provide in square meters or square feet. No. of Floors: Enter the number of floor including basement or ground level floors. Age in Years: Enter approximate age of the facility. Present Use/Prior Use: Describe the primary use of the facility or enter the following codes: H - Hospital; S - School; P - Public Building; O - Office; I - Industrial; U - University or College; B - Ship; C - Commercial; or R - Residence.
- VI Asbestos Detection Procedure:** Describe methods and procedures used to determine whether ACM is present at the site, including a description of the analytical methods employed.
- VII Approximate Amount of Asbestos Including:** (1) Regulated ACM to be removed (including nonfriable ACM to be sanded, ground or abraded); (2) Category 1 ACM not removed; and (3) Category II ACM not removed. For both removals and demolitions, enter the amount of RACM to be removed by entering a number in the appropriate box and an "X" for the unit. For demolitions only, enter the amount of Category I and II nonfriable asbestos not to be removed in the appropriate boxes. Category I nonfriable material includes packing, gaskets, resilient floor covering and asphalt roofing materials containing more than one percent asbestos. Category II nonfriable material includes any material, excluding Category I products, containing more than one percent asbestos, that when dry, cannot be crumbled, pulverized or reduced to powder.
- VIII Scheduled Dates of Asbestos Removal (MM/DD/YY):** Enter scheduled dates (month/day/year) for asbestos removal work. Asbestos removal work includes any activity, including site preparation, which may break up, dislodge or disturb asbestos material.
- IX Scheduled Dates of Demolition / Renovation (MM/DD/YY):** Enter scheduled dates (month/day/year) for demolition and/or renovation work.
- X Demolition of Planned Demolition or Renovation Work, and Method(s) to be Used:** Include in this description the demolition and renovation techniques to be used and a description of the areas and types of facility components which will be affected by this work.



- XI Description of Engineering Controls and Work Practices to be Used to Control Emissions of Asbestos at the Demolition and Renovation Site:** Describe the work practices and engineering controls selected to ensure compliance with the requirements of the regulations, including both asbestos removal and waste-handling emission control procedures.
- XII Waste Transporter(s):** Enter the names, addresses, contact persons and telephone numbers of the persons or companies responsible for transporting ACM from the removal site to the waste disposal site. If the removal contractor or owner is the waste transporter, state "same as owner" or "same as removal contractor." If additional parties are responsible, include complete information on an additional sheet submitted with the form.
- XIII Waste Disposal Site:** Identify the waste disposal site, including the complete name, location and telephone number of the facility. If ACM is to be disposed of at more than one site, provide complete information on an additional sheet submitted with the form.
- XIV If Demolition is Ordered by a Government Agency, Please Identify the Agency below:** Provide the name of the responsible official, title and agency, authority under which the order was issued, the dates of the order and the dates of the ordered demolition.
- XV Emergency Renovation Information:** Provide the date and time of the emergency, a description of the event and a description of unsafe conditions, equipment damage or financial burden resulting from the event. The information should be detailed enough to evaluate whether a renovation falls within the emergency exception.
- XVI Description of Procedures to be Followed in the Event that Unexpected Asbestos is Found or Previously Nonfriable Asbestos Material Becomes Crumbled, Pulverized or Reduced to Power:** Provide adequate information to demonstrate that appropriate actions have been considered and can be implemented to control asbestos emissions adequately, including at a minimum, conformance with applicable work practice standards.
- XVII Certification of Presence of Trained Supervisor:** One year after promulgation of the applicable regulation, the notifier must certify that a person trained in asbestos-removal procedures will supervise the demolition or renovation. The supervisor is responsible for the activity on-site. Evidence that the training has been completed by the supervisor must be available for inspection during normal business hours.
- XVIII Verification:** Please certify the accuracy and completeness of the information provided by signing and dating the notification form.

***Once the form is filled-out and signed:***

Mail original to:

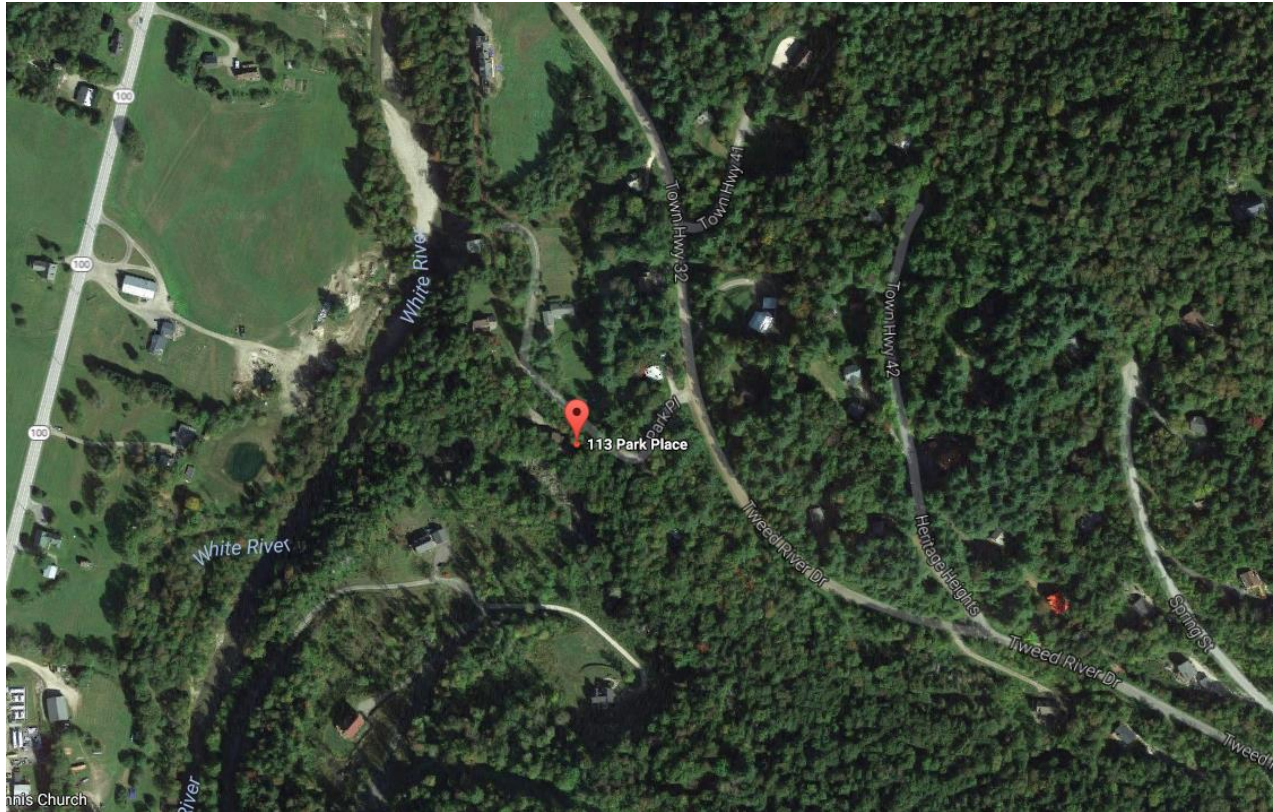
Demo/Reno Notifications  
U.S. EPA, Region 1  
5 Post Office Square, Suite 100 (OES05-4)  
Boston, MA 02109-3912

Mail a copy (along with the pre-demolition asbestos inspection report) to:

Vermont Department of Health  
Asbestos and Lead Regulatory Program  
108 Cherry Street, P.O. Box 70  
Burlington, VT 05402

***The notification must be submitted at least 10 business days in advance of the demolition!***

## 113 Park Place



113 Park Place was another property in Pittsfield that was damaged by Tropical Storm Irene in 2011. Flooding from the White River caused a backup on a tributary that affected the retaining wall adjacent to the house. The photos below showcase how close the home is to falling in the tributary. An asbestos test was conducted and it concluded that there is no asbestos in the home (report attached).









(99-2903)

(40-0352)

(99-2916)

(99-2916)

(99-2834)

(99-2786)

(99-2490)  
89-0566

(99-2652)

(99-2651)

(99-2586)

(99-2476)

89-0198

(69-0012)

(69-0080) THE CONDONS #69

(69-0010)

(69-0048)

(69-0046)

(69-0018)

(99-2358)

(99-2330)

(04-0517)

(04-0451)

(05-0217)

(04-0546)

(05-0063)

(04-0375)

(99-2447)

(99-2401)

(99-2335)

(04-0515)

(99-2074)

BAKER RD

113 Park Place

Pittsfield  
Stockbridge

5-92  
5-91  
7)

7)

TX #20



9 November 2016

Mr. Kevin Geiger  
TRORC  
128 King Farm Road  
Woodstock, Vermont 05091

Re: Asbestos Assessment, 113 Park Place, Pittsfield, Vermont  
K-D Project No. 16181-001

Dear Mr. Geiger:

At your request, K-D Associates, Inc. conducted an asbestos assessment of the house located at 113 Park Place in Pittsfield, Vermont in anticipation of the demolition of this building. Suspect materials were collected and analyzed by polarized light microscopy (PLM) until a positive sample is found or all samples are analyzed. A material is considered positive for asbestos if one sample is found to contain greater than one percent asbestos. Complete laboratory analysis results are included.

As the laboratory analysis results show, no asbestos containing materials were found at this location. An effort was made to find materials hidden from casual view. However, materials located above permanent ceilings, enclosed within walls or otherwise inaccessible may not have been sampled. Suspect materials, found during demolition activities, not identified in this survey should be assumed to be positive for asbestos until laboratory analysis shows otherwise.

I have enclosed the Environmental Protection Agency Notification of Demolition, which must be submitted two weeks prior to the demolition and a copy sent to the Vermont Department of Health along with this report. Please do not hesitate to call if you have any question or need additional information.

Sincerely

John Madigan



# Laboratory Results

Report Date: 11/8/2016

TR-ORC  
128 King Farm Road  
Woodstock, VT 05091

Date Received: 11/2/2016

Sample Location: 113 Park Place  
Pittsfield, Vermont

Customer No.: 16181

Lab Reference No.: 16651

Number Samples Analyzed: 22

Analysis for asbestos type and quantity (visual area estimate and/or point count) was performed by EPA test method 600/R-93/116, utilizing Polarized Light Microscopy (PLM) and dispersion staining techniques.

Lab No.	Sample Identification	Result
B-16-4445	16MB30703 - Textured ceiling, throughout	No Asbestos Detected
B-16-4446	16MB30704 - Textured ceiling, throughout	No Asbestos Detected
B-16-4447	16MB30705 - Gypsum board, walls & ceilings, throughout	No Asbestos Detected
B-16-4448	16MB30706 - Gypsum board, walls & ceilings, throughout	No Asbestos Detected
B-16-4449	16MB30707 - Joint compound, walls & ceilings, throughout	No Asbestos Detected
B-16-4450	16MB30708 - Joint compound, walls & ceilings, throughout	No Asbestos Detected
B-16-4451	16MB30709 - Ceramic tile grout, first floor entry	No Asbestos Detected
B-16-4452	16MB30710 - Ceramic tile grout, first floor entry	No Asbestos Detected
B-16-4453	16MB30711 - Ceramic tile adhesive, first floor entry	No Asbestos Detected
B-16-4454	16MB30712 - Ceramic tile adhesive, first floor entry	No Asbestos Detected
B-16-4455	16MB30713 - Ceramic tile grout, first & second floor bathrooms	No Asbestos Detected
B-16-4456	16MB30714 - Ceramic tile grout, first & second floor bathrooms	No Asbestos Detected
B-16-4457	16MB30715 - Ceramic tile adhesive, first & second floor bathrooms	No Asbestos Detected
B-16-4458	16MB30716 - Ceramic tile adhesive, first & second floor bathrooms	No Asbestos Detected
B-16-4459	16MB30717 - Ceramic tile grout, first floor hallway	No Asbestos Detected
B-16-4460	16MB30718 - Ceramic tile grout, first floor hallway	No Asbestos Detected
B-16-4461	16MB30719 - Ceramic tile adhesive, first floor hallway	No Asbestos Detected
B-16-4462	16MB30720 - Ceramic tile adhesive, first floor hallway	No Asbestos Detected
B-16-4463	16MB30721 - Asphalt shingle roofing, exterior	No Asbestos Detected
B-16-4464	16MB30722 - Asphalt shingle roofing, exterior	No Asbestos Detected
B-16-4465	16MB30723 - Caulking, exterior	No Asbestos Detected
B-16-4466	16MB30724 - Caulking, exterior	No Asbestos Detected

The results listed above relate only to the items/samples tested. Samples received in good condition unless otherwise noted. K-D Associates assumes no responsibility or liability for the manner in which these results are used or interpreted. The accuracy of PLM may be limited in the analysis of certain sample materials. For PLM results that are "negative" or positive at less than one percent, re-analysis by another analytical method may be appropriate.

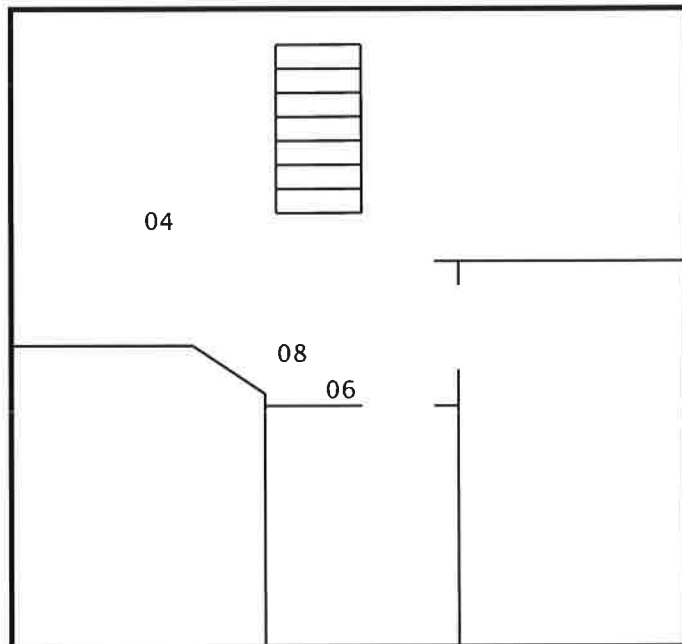
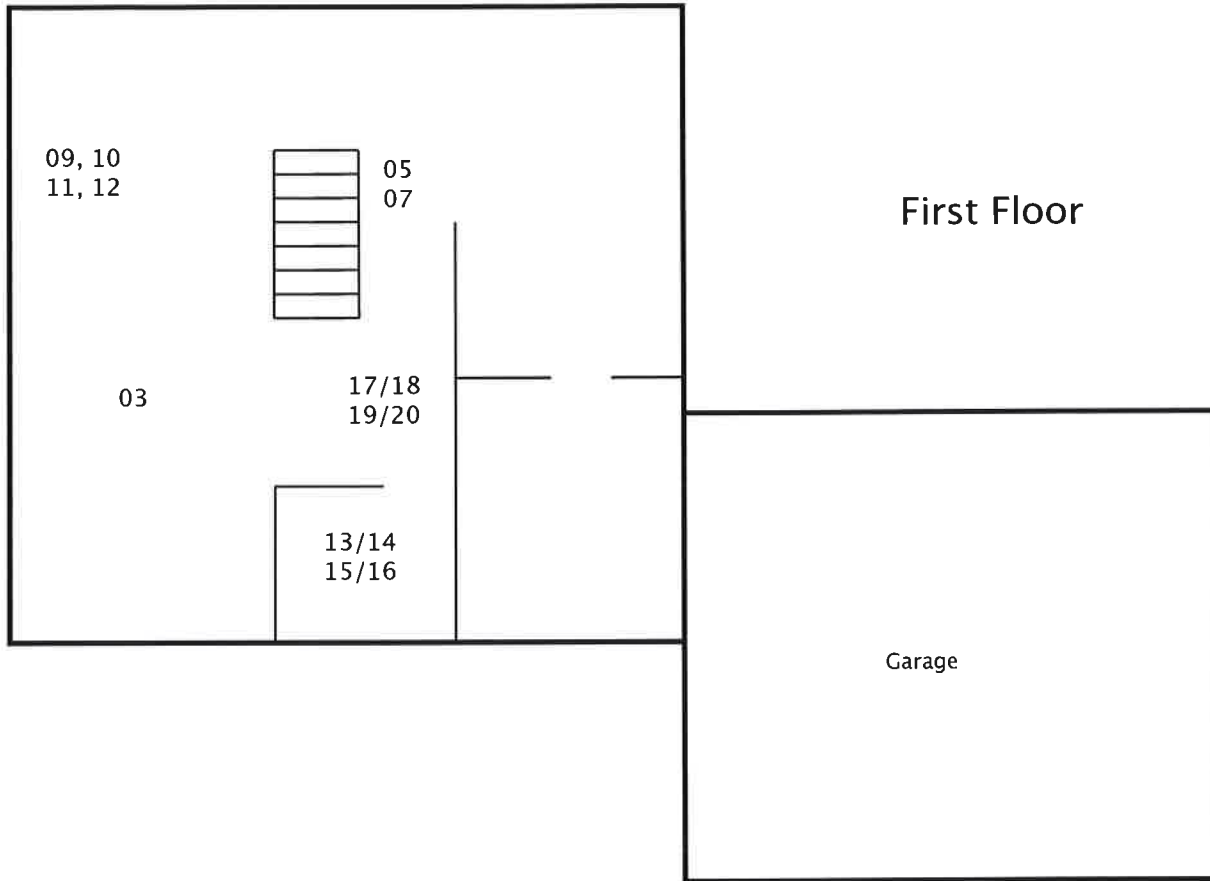
Bryan Schultz

Bryan Schultz  
Laboratory Manager

Laboratory Certifications: Vermont #AL278811  
Analyst: Bryan Schultz, #PB487404

The results listed above relate only to the items/samples tested. Samples received in good condition unless otherwise noted. K-D Associates assumes no responsibility or liability for the manner in which these results are used or interpreted. The accuracy of PLM may be limited in the analysis of certain sample materials. For PLM results that are "negative" or positive at less than one percent, re-analysis by another analytical method may be appropriate.

Approximate scale



**Asbestos Sampling Locations**  
**113 Park Place**  
**Pittsfield, VT**



## EPA Notification of Demolition and Renovation

Operator Project #	Postmark:	Date Received:	Notification #				
<b>I. Type of Notification</b> (check one): <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revised <input type="checkbox"/> Cancelled							
<b>II. Facility Description</b>							
Building Name:							
Address:							
City:		State: VT		ZIP: 05	County:		
Site Location: adjacent to road							
Building Size (sq. ft.):		# of Floors:		Age in Years: ±			
Present Use: vacant			Prior Use				
<b>III. Type of Operation</b> (check one): <input checked="" type="checkbox"/> Demo <input type="checkbox"/> Ordered Demo <input type="checkbox"/> Renovation <input type="checkbox"/> Emergency Renovation <input type="checkbox"/> Fire Training							
<b>IV. Is Asbestos Present?</b> (check one): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<b>V. Facility Information</b>							
<b>Owner Name:</b>							
Address:							
City:		State: VT		ZIP: 05			
Contact:		Telephone: 802-		Fax: N/A			
<b>Removal Contractor Name:</b>							
Address:							
City:		State:		ZIP:			
Contact:		Telephone:		Fax:			
<b>Other Operator: (demolition/general)</b>							
Address:							
City:		State: VT		ZIP: 05			
Contact:		Telephone: 802-		Fax: N/A			
<b>VI. Procedure, including analytical methods, employed to detect the presence of and to estimate the quantity of RACM and Category I and Category II non-friable ACM:</b>							
Materials sampled and analyzed in accordance with Vermont Department of Health Regulations – EPA test method 600/R-93/116, utilizing Polarized Light Microscopy (PLM) and dispersion staining techniques							
<b>VII. Approximate Amount of Asbestos Materials:</b> N/A							
	RACM to be Removed	Non-friable Asbestos Material To be Removed		Non-friable Asbestos Material NOT to be Removed			
		Category I	Category II	Category I	Category II		
Pipes (linear feet)							
Surface Area (square feet)							
Facility Components (cubic ft.)							
<b>VIII. Scheduled Dates for Demolition or Renovation:</b> Start: _____ Complete: _____							
<b>IX. Dates for Asbestos Removal:</b> Start: _____ Complete: _____							
Days of the Week:	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
Hours of operation:		7:30-4:00	7:30-4:00	7:30-4:00	7:30-4:00	7:30-4:00	

*Continued on page 2*

EPA Notification of Demolition and Renovation (Continued)

<b>X. Description of planned Demolition or Renovation work to be performed and method(s) to be employed, including demolition or renovation techniques to be used and description of affected facility components:</b>		
Building to be demolished by heavy equipment		
<b>XI. Description of work practices and engineering controls to be used to comply with the requirements, including asbestos removal and waste handling emission control procedures:</b>		
<b>XII. Waste Transporter #1</b>		
Name:		
Address:		
City:	State:	ZIP:
Contact:	Telephone:	Fax:
<b>Waste Transporter #2</b>		
Name:		
Address:		
City:	State:	ZIP:
Contact Person:	Telephone:	Fax:
<b>XIII. Waste Disposal</b>		
Name:		
Location:		
City:	State:	ZIP:
Contact:	Telephone:	Fax:
<b>XIV. Emergency Demolition</b> (complete Item XIV only if this project is an Emergency Demolition)		
1. Attach a copy of the Order to this notice		
2. Name of Authority Issuing Order:	Title:	
3. Authority of Order (Citation of Code):		
4. Date of Order (MM/DD/YY):	Date Ordered to Begin (MM/DD/YY):	
<b>XV. Emergency Renovation</b> (Attach separate sheet with the following information if project is Emergency Renovation)		
1. Date and Hour of Emergency:		
2. Description of the Sudden, Unexpected Event:		
3. Explanation of how the event caused unsafe conditions or equipment damage or an unreasonable financial burden.		
<b>XVI. Description of procedures to be followed in the event that unexpected RACM is found or non-friable ACM becomes crumbled, pulverized or reduced to powder.</b>		
All work will stop and the Vermont Department of Health will be notified.		
<b>XVII. I certify that an individual trained in the provisions of NESHAP (40 CFR 60, Subpart M) will be on-site during the Demolition or Renovation, and evidence that the required training has been accomplished by this person will be available during normal business hours.</b>		
_____ Signature of Owner/Operator	_____ Date	_____ Type or Print Name and Title
<b>XVIII. I acknowledge the existence of laws prohibiting the submission of false or misleading statements, and I certify that facts contained in this notification are true, accurate, and complete.</b>		
_____ Signature of Owner/Operator	_____ Date	_____ Type or Print Name and Title

## ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

### INSTRUCTIONS

- I Type of Notification:** Enter "O" if the notification is a first time or original notification, "R" if the notification is a revision of a prior notification, or "C" if the activity has been cancelled.
- II Facility Information:** Enter the names, addresses, contact persons and telephone numbers of the following: Owner: Legal owner of the site at which asbestos is being removed or demolition planned. Removal Contractor: Contractor hired to remove asbestos. Other Operator: Demolition contractor, general contractor, or any other person who leases, operates, controls or supervises the site. If known, the name of the site supervisor should be entered as the contact person for the notification. If additional parties share responsibility for this site, demolition activity, renovations or ACM removal, include complete information (including name, address, contact person and telephone number) on additional sheets submitted with the form.
- III Type of Operation:** Enter "D" for facility demolition, "R" for facility renovation, "O" for ordered demolitions, or "E" for emergency renovations.
- IV Is Asbestos Present?** Answer "Yes" or "No" regardless of the amount or type of asbestos.
- V Facility Description:** Provide detailed information on the areas being renovated or demolished. If applicable, provide the floor numbers and room numbers where renovations are to be conducted. Site Location: Provide information needed to locate site in the event that the address alone is inadequate. Building Size: Provide in square meters or square feet. No. of Floors: Enter the number of floor including basement or ground level floors. Age in Years: Enter approximate age of the facility. Present Use/Prior Use: Describe the primary use of the facility or enter the following codes: H - Hospital; S - School; P - Public Building; O - Office; I - Industrial; U - University or College; B - Ship; C - Commercial; or R - Residence.
- VI Asbestos Detection Procedure:** Describe methods and procedures used to determine whether ACM is present at the site, including a description of the analytical methods employed.
- VII Approximate Amount of Asbestos Including:** (1) Regulated ACM to be removed (including nonfriable ACM to be sanded, ground or abraded); (2) Category 1 ACM not removed; and (3) Category II ACM not removed. For both removals and demolitions, enter the amount of RACM to be removed by entering a number in the appropriate box and an "X" for the unit. For demolitions only, enter the amount of Category I and II nonfriable asbestos not to be removed in the appropriate boxes. Category I nonfriable material includes packing, gaskets, resilient floor covering and asphalt roofing materials containing more than one percent asbestos. Category II nonfriable material includes any material, excluding Category I products, containing more than one percent asbestos, that when dry, cannot be crumbled, pulverized or reduced to powder.
- VIII Scheduled Dates of Asbestos Removal (MM/DD/YY):** Enter scheduled dates (month/day/year) for asbestos removal work. Asbestos removal work includes any activity, including site preparation, which may break up, dislodge or disturb asbestos material.
- IX Scheduled Dates of Demolition / Renovation (MM/DD/YY):** Enter scheduled dates (month/day/year) for demolition and/or renovation work.
- X Demolition of Planned Demolition or Renovation Work, and Method(s) to be Used:** Include in this description the demolition and renovation techniques to be used and a description of the areas and types of facility components which will be affected by this work.

- XI Description of Engineering Controls and Work Practices to be Used to Control Emissions of Asbestos at the Demolition and Renovation Site:** Describe the work practices and engineering controls selected to ensure compliance with the requirements of the regulations, including both asbestos removal and waste-handling emission control procedures.
- XII Waste Transporter(s):** Enter the names, addresses, contact persons and telephone numbers of the persons or companies responsible for transporting ACM from the removal site to the waste disposal site. If the removal contractor or owner is the waste transporter, state "same as owner" or "same as removal contractor." If additional parties are responsible, include complete information on an additional sheet submitted with the form.
- XIII Waste Disposal Site:** Identify the waste disposal site, including the complete name, location and telephone number of the facility. If ACM is to be disposed of at more than one site, provide complete information on an additional sheet submitted with the form.
- XIV If Demolition is Ordered by a Government Agency, Please Identify the Agency below:** Provide the name of the responsible official, title and agency, authority under which the order was issued, the dates of the order and the dates of the ordered demolition.
- XV Emergency Renovation Information:** Provide the date and time of the emergency, a description of the event and a description of unsafe conditions, equipment damage or financial burden resulting from the event. The information should be detailed enough to evaluate whether a renovation falls within the emergency exception.
- XVI Description of Procedures to be Followed in the Event that Unexpected Asbestos is Found or Previously Nonfriable Asbestos Material Becomes Crumbled, Pulverized or Reduced to Power:** Provide adequate information to demonstrate that appropriate actions have been considered and can be implemented to control asbestos emissions adequately, including at a minimum, conformance with applicable work practice standards.
- XVII Certification of Presence of Trained Supervisor:** One year after promulgation of the applicable regulation, the notifier must certify that a person trained in asbestos-removal procedures will supervise the demolition or renovation. The supervisor is responsible for the activity on-site. Evidence that the training has been completed by the supervisor must be available for inspection during normal business hours.
- XVIII Verification:** Please certify the accuracy and completeness of the information provided by signing and dating the notification form.

***Once the form is filled-out and signed:***

Mail original to:

Demo/Reno Notifications  
U.S. EPA, Region 1  
5 Post Office Square, Suite 100 (OES05-4)  
Boston, MA 02109-3912

Mail a copy (along with the pre-demolition asbestos inspection report) to:

Vermont Department of Health  
Asbestos and Lead Regulatory Program  
108 Cherry Street, P.O. Box 70  
Burlington, VT 05402

***The notification must be submitted at least 10 business days in advance of the demolition!***