



PROJECT MONITOR LOG

Part 1

1. Client: DEP	2. Project Name: DEP cleanup	4. Project #: 99906-02	5. Work Area(s): Entire Bldg
	3. Project Address: 125 Cedar St NY	4a. Task #:	
6. Contractor: Action	7. Contractor's Foreman:	8. ATC Representative: Vin Andis / Rusty / Chuck	9. Date: 9.13.02

Type of Project: ☐ Full-Containment ☐ Tent-Containment ☐ Glovebagging ☐ Other _____

Size of Project: ☐ Large (> 160 sq. ft., 260 lin. ft. of ACM) ☐ Small (< 160 sq. ft., 260 lin. ft.)

Phase of Abatement: ☐ Pre-abatement Sampling ☐ Prep ☐ Removal ☐ Cleaning

☐ Encapsulation ☐ Waste Load-out ☐ Finals

FULL-CONTAINMENT ABATEMENT

Work Area Location (floor, room, section): _____

Preparation of Work Area: ☐ Yes (Indicate prep work performed in 1 - 10) ☐ N/A (If already completed)

- | | |
|---|--|
| 1. Construction of Decon: ☐ Yes ☐ No | 2. Ceiling Poly: ☐ Yes ☐ No |
| 3. Critical Barriers (CBs): ☐ Yes ☐ No | 4. Wall Poly: ☐ Yes ☐ No |
| 5. Removal to establish CBs: ☐ Yes ☐ No | 6. Floor Poly: ☐ Yes ☐ No |
| 7. Negative air: ☐ Yes ☐ No | 8. Pre-cleaning: ☐ Yes ☐ No |
| 9. Prep work completed: ☐ Yes ☐ No | 10. Temporary Power: ☐ Yes ☐ No |
| 11. Other: ☐ Yes ☐ No | 12. Prep-Inspection Passes: ☐ Yes ☐ No (Explain why) |

Removal: ☐ Yes (Complete 1 - 5) ☐ N/A

- | |
|---|
| 1. Type of ACM: ☐ Pipe Insulation ☐ Duct Insulation ☐ Fireproofing ☐ Ceiling Tile |
| ☐ Boiler Insulation ☐ Transite Boards ☐ Floor Tile ☐ Other: _____ |
| 2. Negative air pressure ≥ 0.02 in. of water: ☐ Yes ☐ No |
| 3. Amended water used during removal: ☐ Yes ☐ No |
| 4. Critical barriers intact for shift's duration: ☐ Yes ☐ No |
| 5. Proper Decon procedures followed: ☐ Yes ☐ No |

Cleaning: ☐ Yes (Complete 1 - 6) ☐ N/A

- | | |
|---|---|
| 1. ☐ 1st Stage ☐ 2nd Stage ☐ 3rd Stage | 2. 12/12-hour waiting period after 1st cleaning: ☐ Yes ☐ No |
| 3. Removal of 1st poly layer after 1st cleaning: ☐ Yes ☐ No | 4. 4/12-hour waiting period after 2nd cleaning: ☐ Yes ☐ No |
| 5. Removal of 2nd poly layer after 2nd cleaning: ☐ Yes ☐ No | 6. 1/12-hour waiting period after 3rd cleaning: ☐ Yes ☐ No |

TENT-CONTAINMENT ABATEMENT

Work Area Location (floor, room, section): _____

Preparation of Work Area: ☐ Yes (Indicate prep work performed in 1 - 6) ☐ N/A (If already completed)

- | | |
|--|--|
| 1. Construction of Tent: ☐ Yes ☐ No | 2. Pre-cleaning: ☐ Yes ☐ No |
| 3. Construction of Decon: ☐ Yes ☐ No | 4. Negative Air: ☐ Yes ☐ No ☐ N/A |
| 5. Prep work completed: ☐ Yes ☐ No | 6. Pref-inspection passes: ☐ Yes ☐ No |

Removal:

- | |
|---|
| 1. Type of ACM: ☐ Pipe Insulation ☐ Duct Insulation ☐ Fireproofing ☐ Ceiling Tile |
| ☐ Boiler Insulation ☐ Transite Boards ☐ Floor Tile ☐ Other: _____ |
| 2. Method of Removal: ☐ Gross removal within tent ☐ Glovebag removal within tent (check 3 through 8) |

(If Glovebag Removal Check 3 through 8)

- | | |
|---|--|
| 3. Glovebags smoke-tested: ☐ Yes ☐ No | 4. Glovebags attached to smooth surface: ☐ Yes ☐ No |
| 5. Amended water used: ☐ Yes ☐ No | 6. Removal included cleaning and encapsulation: ☐ Yes ☐ No |
| 7. Open/damaged ends of insul. sealed: ☐ Yes ☐ No | 8. Glovebags vacuumed, double-bagged: ☐ Yes ☐ No |

Continued on Back

Form NY-8 1/01

CONFIDENTIAL,

CITY_21MC100_003446112

SUBJECT TO PROTECTIVE ORDER NO. 2, SEPT. 2008

WASTE LOAD-OUT

1. ____ (#) of bags
 2. Waste washed, double-bagged: ____ Yes ____ No
 3. Name of Hauler: ____
 4. Hauler's permit number: ____

FINAL AIR CLEARANCE

1. Aggressive Sampling Techniques: ____ Yes ____ No
 2. Area passed final clearance testing: ____ Yes ____ No

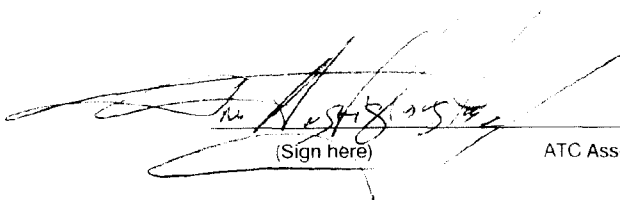
HOURLY SUMMARY OF SHIFT'S ABATEMENT:

Time	Activity
14 00	ATC reps via Austinbury and Mute Jensen arrived on site. Met ATC reps Robin and Paul. Sampling is already in progress.
15 00	Pumps running at 10 GPM. Crew continues with clean up.
16 40	Changed samples.
18 00	Equipment's operating well.
19 00	Crew continues clean up.
19 30	Crew takes lunch.
20 40	Resume work.
21 40	Changed samples. Crew continues clean up.
22 40	Pumps running well. Cleanup continues.
23 00	Crew is finishing up. Collected samples. Everything off site.

PROJECT HOURS: ____ To ____

AIR SAMPLES COLLECTED: ____

The undersigned hereby acknowledges that the information on both sides of this project management log is accurate and true to the best of their knowledge.



(Sign here)

ATC Associates Inc. Representative

CONFIDENTIAL,

CITY_21MC100_003446113

SUBJECT TO PROTECTIVE ORDER NO. 2, SEPT. 2008