

Florida Department of

Environmental Protection

Twin Towers Office Building • 2600 Blair Stone Road • Tallahassee, Florida 32399-2400



Miami-Dade DERM Air Section 701 N.W. 1st Court 8th Floor Miami, Florida 33136

ASBESTOS PROJECT INSPECTION REPORT

Project Address 300 NL	111 ST M	prog1, FL			140
Project Description			APIS	#	
Date 4 / 4 / []	Demolition 🖵	Renovation 🖾	Date put in APIS	//	
Non-NESHAP: Affidavit	Roofing 🗖	Complaint 🗖	Other 🛛 🖸	URTESY	
Contractor					
Site Survey by			None	Done	
Site Supervisor					
Inspector Eli Cantal	UZ	District #		County #	ADE
Renovation Project Compliance Ch		E.A.C.)		Yes No	NA
Was abatement of RACM in programment					
2. Were warning signs visible?					
3. Were visible emissions to the ou			-		
Was the wet method for abatement			-		
5. Was the glove bag method being) -		
Was only Category I material inv					
7. Was only Category II material in8. Was loadout of waste material of			<u>-</u>		
			-		
9. Was waste in labeled leak tight o			F		
10. Was the wetness of the waste co	-		-		
11. Was the waste storage area mark					
12. Was on-site supervisor current tr					
13. Were samples obtained for analy			-		
14. Were pictures taken at the site? .	****				
Additional Site Information:	UFT HAD	BEEN BEMO	DUFT). WAI	Y-THE	U
CONDUCTED, of	PRE MARKI	T NO -D	2002 SUSP	FT T NO	INV.
					ri CC
observed.					
Demolition Project Compliance Cl	hecklist (Rule 62-257 350	(FAC)			
1. Was Category I and/or II in build	\		Γ		
Was demolition in progress?	,				
Was suspected RACM observed	\				
4. Were samples taken?	- 1				
5. Were pictures taken?	\				
5. Were pictures takens					
Additional Site Information:	\				
		/			
		[1]			
)				
161_01-162 3/07	Original: Contract	or Canary: Inspe	ector File		



Florida Department of Environmental Protection Division of Air Resource Management



Miami-Dade DERM Air Quality Management Division 701 N.W. st Court, 2rd Floor Marni, Horida 33136

NOTICE OF DEMOLITION OR ASBESTOS RENOVATION

	PE OF NOTICE (CHECK ONE ONLY): ORIGINAL PE OF PROJECT (CHECK ONE ONLY): DEMOLITION PE DEMOLITION, IS IT AN ORDERED DEMOLITION? PERFOOVATION:	☐ REVISED ☐ RENOVATION ☐ YES	pre-1	ANCELLATION OOFING	☐ COURTESY
I.	IS IT AN EMERGENCY RENOVATION OPERATION? IS IT A PLANNED RENOVATION OPERATION? Facility Name FORMER Charles	☐ YES ☐ YES	□ NO	File # Process #	
	Address 300 D.W. Ith Street				
	City Wiam:	State F1 Zip 3			l =
	Site				+ EngineERING
	Building Size 4900 (Square Feet)		3 Buil	ding Age in Years	
	Prior Use: School/College/University TRes	sidence Small	Business	Other Char	ch
	6 9	idence 🗆 Small	Business	Other_Aloca	doved
11.	Facility Owner City of Mari			Phone (365) 7	3.1148
	Address 4 NN 549 Street	State PL Zip 2	0.30		
	Contractor's Name DECON ENTROPMENT		312-2	DE LA LA	00.00
ш.	Address 2052 D.W. 31st AVE.	CLEDGIOEENIC	5 100	rnone (454) 4	22-820C
	City Food Loudkedok	State Fl Zip	33311	The second state of the se	
	is the contractor exempt from licensure under section 469.002			PNO	
IV.	Scheduled Dates: (Notice must be postmarked 10 working d		ran datel		
	Asbestos Removal (mm/dd/yy) Start: 3 28 11 Tinish: 4 R11			ation (mm/dd/yy) Sta	rtF nish
V.	Description of planned demolition or renovation work to be I		to be employe	d, including demolit	ion or renovation techniques to
	be used and description of affected facility components Procedures to be Used (Check All That Apply):				
	Strip and Removal Glove Bag	T P	ulldozer	TOT	Wreeleng Ball
	Wet Method Dry Method	- Indiana	plode	H	Burn Down
	OTHER:	1	Tribria.		1011 2.0011
M	Procedures for Unexpected RACM:			and the second s	
	Ashestos Waste Transporter: Name	o stan		Phone (863)28	4-0058
	Address P.O. Box 90034				
		State 🗲 \ _ /ip	33804		
VIII	I. Waste Disposal Site: Name Angelos Land:	11			
	Address 4111 Enterine Zood				
		State F /ip_			
IX.	RACM or ACM: Procedure, instuding analytical methods, em-	played to detect the pre	esence of RACA	4 and Category Land	II nonfriable ACM.
	Amount of RACM or ACM*				
	square feet surfacing in aterial		feet comentition		
	linear feet pipe	3,432 square			
	cubic feet of RACM off facility components		feet asphalt roo	grille	
	*Identify and describe surfacing material and other materials				
	1800+ acm mostic on duct inside	otion - A	im waste	00 5 30	383
	I certify that the above information is correct and that an indiving site during the demolition or renovation and evidence that the reducing normal business hours. Accept was modeled to the result of the reducing normal business hours.				
	Arrott wis magabet (Print Naude of Owner/Operator) Argel Luis magabet (Signatura (Owner/Operator)	3/21/1 (Date)			485 8800
-	DERM USE ONLY Postmark/Date Received			ID#	



Florida Department of Environmental Protection Division of Air Resource Management



An Quality Mile general Division Tot N.W. st Court, 2nd Floor Marti, Floridy 33126

NOTICE OF DEMOLITION OR ASBESTOS RENOVATION

TYI	PE OF NOTICE (CHECK ONE ONLY). TO ORIGINAL TREVISED TO THE TIME ELATION CHOOLITESY
TY	PE OF PROJECT (CHECK ONE ONLY); TI DEMOLITION PRENCHAPONE VIENDENCE
	FIDEMOLITION, IS IT AN ORDERED DEMOLITION.
	FRENOVATION:
	F RENOVATION: IS IT A PLANNED RENOVATION OPERATION? IS IT A PLANNED RENOVATION OPERATION? FILE X F
	IS IT A PLANNED RENOVATION OPERATION! DIES APT DINGLY PROPER : 2011 0322 1454 4600
I.	Facility Name Force Crosch
	Aridress 200 U.C. 11th Street City Magazinani Division City Michael Consultant respecting Sea DVD ATE CH Employee
	Lin Michael Maria FI Maria 531360 Colon
	Building Nize 4900 Square Feets 4 of Flours 2 Huilding Age in Years 45t
	Principle: Tschool:College/University Residence Tsma's Business Other Character
	Present Use.
H.	facility Owner City of Michi thone 365 1 75 3. 1148
	Address 44 NN 549 Sheet
	(Miani 1907 1 710 33 122
HI.	Contractor's Name DECO Earlie Contracted Engine Bing Inc. Home 1954 1 485-8800
	within pura Du 31st Ave.
	in Fost Landedolic state FT 2p 33311
	Is the contractor exempt from because under section 469.002(4), F.S.? ☐ N.S. ☐ N.C.
EV.	Scheduled Dates: (Notice must be posimirked 10 working days before the amject stan date)
	Ashestos Removal immiddiny istart 228 [4] Linish [47] Bernarkenovation immiddiny istart. Finish.
V.	Description of planned demolition of functation workleyby supplyment and methods to be employed, including demolition or removation techniques to be used and description of affective for the demolition of the components.
	4x - Act and the riperon of affecting the Company in a
	Procedures to be Osen (Clark A-That Apply):
	Stap and Removal Crowe Bag Buildozer Wrecking (Lati
) It is a second of the second
	OTHE:
	Procedures for Unexpected RACM:
VII	Ashestos Waste Transporter: Name Longo Confendor Phone 863:84-0958
	Application Box goods
	(in tokelood) Sale El /ip 338004
VII	I. Waste Disposal Site: Name Angelos Londfill
	Julian 4111 elepise Euro
	Chy Dode Chay State F1 /ip 33555
IX.	RACM or ACM: Procedure in secting analytical methods, employed to detect the presence of RACM and Category Land II nonfriable ACM.
	the state of the s
	Amount of RACM or ACM*
	square (cet surfacing material aquate (cet contentitious material) invaribet pipe 3,932 square teor resilient discring
	catric feet of RACM off facility componer is square feet aspiral to offing
	*Identify and describe surfacing material and other materials as applicable
	1800st acumunite on dust insulation, - ACH make as a soks
_	
	Foortive that the above information is correct and that an individual trained in the provisions of this regulation (40 CFR Part 61, Subpart Mow'll be on-
	site during the demolition or regional on and evidence that the recurred training has been accomplished by this person will be available for inspection during normal business hours.
	Print Name of Owner Operator
	Argel wis magazit Print Nice of Owner Operator. Chack This my regalit 3/2/14 954-485-8800 (Signatural Owner Operator. Contact phone to
	15 control (Occord Control) 77 (CQ OU-1) 3/21/11 954-485-8800
	(Signature of Owner/Operator: 9 Date: 1 Contact phone #)
1	DERM USE ONLY Postmark/Date Received ID #
1	157



DERM USE ONLY

Postmark/Date Received

Florida Department of Environmental Protection Division of Air Resource Management

COUNTY

Miaml-Dade DERM Air Quality Management Division 701 N.W. 1st Court, 2nd Floor Miaml, Florida 33136

	NOTICE OF DEMOLITION OR ASBESTOS RENOVATION OF THE PROPERTY OF								
TYPE C	OF NOTICE (CHECK ONE ONLY): OF PROJECT (CHECK ONE ONLY):	☐ ORIGINAL ☐ DEMOLITION	REVISED RENOVATION		ANCELLATION X	E Stouter C			
	DEMOLITION, IS IT AN ORDERED E RENOVATION:	DEMOLITION?	☐ YES	□ NO		MAR 2 3 2011			
	IS IT AN EMERGENCY RENOVATION (YES YES			Air Quality nagement Division			
l, Fa	cility Name Frence Cho	ch			IVIA	nagement 2.v.e.			
A	idress 300 D	StOEFT							
Ç	ty Licni		State El Zi	331310	County				
Si	te		Consult	ant Inspecting Site	DYUATEC	- Enpineering			
B	ailding Size 4900	_(Square Feet)	# of Floors_	_a Buil	ding Age in Years	45+ 0			
Pr	for Use: School/College/Univ	versity Resid	dence S	mall Business	Other Char	ch_			
	esent Use: School/College/Univ		dence 🔲 Si	mall Business	Other Abo	ndentel			
	cility Owner City of Mian				Phone (345) 7	53 1148			
A	ddress 46 NN 549 Stu	204							
C	ity Mlani		State 🗲 Zi	P3312-2	3				
III. C	ontractor's Name TOFCODE	misou wery	al Expineral	and Inc	Phone (SSL)	185-860D			
A	ddress <u>3663 D.W. 31</u>	ST AVE							
	ity Food Lankedate		State F Z						
	the contractor exempt from licensure				NO				
	heduled Dates: (Notice must be pos								
	sbestos Removal (mm/dd/yy) Start: 2					art:Finish:			
	escription of planned demolition or re a used and description of affected faci		enormed and met	noas to be employe	ed, including demoi	ition of renovation techniques to			
D	a died and description or anected (act	my components							
P	rocedures to be Used (Check All That	Applyl:							
-	Strip and Removal	Glove Bag		Bulldozer		Wrecking Ball			
H	Wet Method	Dry Method		Explode		Burn Down			
ď	OTHER:								
L				n					
VI. P	rocedures for Unexpected RACM;	-20	7-		Phone (863)	311 0055			
VIII. A	sbestos Waste Transporter: Name Luddress 7.0. Box 90034	encell Control			Phone (OLS)	74-0422			
	City Lakeland		State FI Z	p 33804					
VIII V	Vaste Disposal Site: Name 2005	Marci ent	State	P_59539	-				
V 1111 V	ddress 4111 Externes	mal							
	City Dode C.f.		State EL 7	p 33525	-				
	ACM or ACM: Procedure, including a			•		nd II nonfriable ACM.			
,									
A	amount of RACM or ACM*			-	<u> </u>				
_	square feet surfacing mater	ial	squ	are feet cementitio	us material				
-	linear feet pipe			are feet resillent flo					
-	cubic feet of RACM off fac			are feet asphalt ro	ofing				
	Identify and describe surfacing materia	al and other materials a	s applicable:	Acres		L			
	1894, OCH, CCHEC S	2 0021 10201	ZEO/CZ -	ALP LESS	<u> </u>	- Calo			
912	I certify that the above information is correct and that an individual trained in the provisions of this regulation (40 CFR Part 61, 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 for inspection during normal business hours.								
1	Front Luis ma	white							
(P	int Name of Owner/Operator)	3 1							
1	my sink loons	talono	3/2	da	054	-UBS-88CC)			
(Si	gnature of Owner/Operator)	1	(Dale)	1,		tact phone #)			
-									

ID#



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161_01-158 3/07



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Florida Department of Environmental Protection Division of Air Resource Management



Area Mobile Sources Section 701 N.W. 1st Court, 8th Floor Miami, Florida 33136

	NOTICE	Ųľ	ASBESTOS	KENU	VALIC	JN OK	DEMO	LIII	UN
TYP	E OF NOTICE (CHECK ONE ONLY):	×	ORIGINAL.	☐ REVISE	D		CANCELLATI	ON	☐ COURTESY
TYPE OF PROJECT (CHECK ONE ONLY): DEMOLITIC		DEMOLITION	☐ RENOV	'ATION	ROOFING				
IF D	EMOLITION, IS IT AN ORDERED DEA	MOLIT	ION?	☐ YES		□ NO			
	IF DEMOLITION, WAS IT AN ORDE	RED D	DEMOLITION?	☐ YES		□ NO			
	IF RENOVATION:						File	#	
	IS IT AN EMERGENCY RENOVA	TION	OPERATION?	☐ YES		□ NO			
	IS IT A PLANNED RENOVATION			☐ YES		□ NO			
1.	Facility Name THE HOL	224	OF COOR	NAZE	ENE				
	Address 300 NW 115	T -	- 80						
	City Miami			State	_Zip_	<u> </u>	_County		
	Site			Co	nsultant I	nspecting Site	e		
	Building Size 3050	(S	quare Feet) Residence	# of Flo	ors2	<u> </u>	e in Years		and the second s
	Prior Use: School/College/Univ	versity	Residence	Small E	Business	Other _			
	Present Use: School/College/Univ	versity	Residence	Small E	Business	Other _			
11.	Facility Owner			1			_Phone () _	
	Address 5608 NW	10	12 14						
	City			State 1	Zip Z	5305	5	^E	1-11
III.	CityContractor's Name	01	Ey Kool	FINCE			_Phone (60) _	634-1245
	Address 3067 NW	5	ST	State F L		-6 111-			
	City Miami		~ *	State -	Zip 🗻	33142	-		_
	Florida License No. Is the contractor	exemp	ot from licensure un	der section 4	69.004(7)	, F.S.?	☐ YES		□ NO
IV.	Scheduled Dates:		.03 -1-	100					
	Asbestos Removal (mm/dd/yy) Start:			7~8		Demo/Reno	vation (mm/c	dd/yy) S	tart:Finish:
V.	Procedures to be Used (Check All That	at App	fly): /	<i>'</i>					
	Strip and Removal		Glove Bag			Illdozer			Wrecking Ball
	Wet Method		*Dry Method			plode			Burn Down
	*MUST OBTAIN PRIOR DEP APPRO								
VI.	Procedures for Unexpected RACM: _	*	Stop R	FINOTEL	DE				
			- 	\		-			
VII.	Asbestos Waste Transporter: Name _						_Phone () _	
	Address								
	City		TII Dans	State	Zip		_		
VIII.	Address SW 248 S	ou	a O TA	LCINI	J - F 1	<u> </u>	MAIM	AirDAT	DE D.E.R.M.
	CityMin N	, 1	8 97 AVI	State I-L	7: -	AIR			GEMENT DIVISION
v	Amount of RACM or ACM			State	Zip				that the required
Χ.	square feet surfacing material					Notif			ng asbestos have been
	linear feet pipe								ompliance with
	cubic feet of RACM off facility	/ com	oonents				MAD	licable	regulations.
	square feet cementitious mate					0	1	2	Date 5-19-38
	square feet resilient flooring					Signe	0 2/2		Date 3 113
-	square feet asphalt roofing		AUMSU	· ΩΩ	< + in	IE			
)					
	I certify that the above information is c								
	site during the demolition or renovatio during normal business hours.	n and	evidence that the re	equired trainii	ig has bee	en accompns	ned by this p	Jerson v	viii be available for inspection
	1 111 /8		-						
'	Name of Owner / Operator / PRINT								
	Le .						-	スカE	-1311-1011-
	(Strature of Owner/Operator)	e		/D:	ato)				5-634-1245 tact phone #)
	(Signature of Owner/Operator)			(D)	ate)			(Con	tact prione #)
[DERM USE ONLY			Post	mark/Dat	e Received			D #
				. 23					



OFFICIAL RECEIPT MIAMI-DADE COUNTY-FLORIDA

No.5939829

COUNTY								
COUNTY	RECEIVED F	ROM (AL)	THE HOU.	SE OF GO	D_ DATE_	MONTH /	19, DAY	EJ YEAR
			STREET ADDRESS		Cash		100	
	-	CITY	Addition by the beginning the second of the	STATE	ZIP			
AMOUNT OF:_	100		Dollar	s, and <u>O</u>	CENTS TOTAL	\$	(00)	00
FOR PAYMENT	OF:	ASBEI	TOJ	Manager and the second				
THIS RECEIF	T NOT VALI			ED AND SIGNED			EE OF DEPAR	RTMENT.
DEPT.:		44	DERM	By:				
FOR OFF	ICE USE (ONLY						
Trans Subsidiary		INDEX	SUBOBJECT	UBOBJECT AMOUNT				