

SECTION 01 00 00  
GENERAL REQUIREMENTS

1.1 SAFETY REQUIREMENTS

Refer to section 01 35 26, SAFETY REQUIREMENTS for safety and infection control requirements.

1.2 GENERAL INTENTION

- A. Contractor shall provide project and air monitoring services for building 6, second floor renovation.
- B. Visits to the site by Bidders may be made only by appointment with the CO.
- C. All employees of general contractor and subcontractors shall comply with VA security management program and obtain permission of the VA police, be identified by project and employer, and restricted from unauthorized access.

1.3 STATEMENT OF BID ITEM(S)

- A. ITEM I, Project and air monitoring services and certain other items.

1.4 SPECIFICATIONS AND DRAWINGS FOR CONTRACTOR

- A. Drawings and contract documents may be obtained from the website where the solicitation is posted. Additional copies will be at Contractor's expense.

1.5 CONSTRUCTION SECURITY REQUIREMENTS

A. Security Plan:

- 1. The security plan defines both physical and administrative security procedures that will remain effective for the entire duration of the project.
- 2. The General Contractor is responsible for assuring that all subcontractors working on the project and their employees also comply with these regulations.

B. Security Procedures:

1. General Contractor's employees shall not enter the project site without appropriate badge. They may also be subject to inspection of their personal effects when entering or leaving the project site.
2. Before starting work the General Contractor shall give one week's notice to the Contracting Officer so that security arrangements can be provided for the employees. This notice is separate from any notices required for utility shutdown described later in this section.
3. No photography of VA premises is allowed without written permission of the Contracting Officer.
4. VA reserves the right to close down or shut down the project site and order General Contractor's employees off the premises in the event of a national emergency. The General Contractor may return to the site only with the written approval of the Contracting Officer.

C. Key Control:

1. If required, the VA will provide the contractor with key access. The General Contractor shall provide duplicate keys and lock combinations to the COR for the purpose of security inspections of every area of project including tool boxes and parked machines and take any emergency action.

D. Document Control:

1. Before starting any work, the General Contractor/Sub Contractors shall submit an electronic security memorandum describing the approach to following goals and maintaining confidentiality of "sensitive information".
2. The General Contractor is responsible for safekeeping of all drawings, project manual and other project information. This information shall be shared only with those with a specific need to accomplish the project.
3. Certain documents, sketches, videos or photographs and drawings may be marked "Law Enforcement Sensitive" or "Sensitive Unclassified". Secure such information in separate containers and limit the access

to only those who will need it for the project. Return the information to the Contracting Officer upon request.

4. These security documents shall not be removed or transmitted from the project site without the written approval of Contracting Officer.
5. All paper waste or electronic media such as CD's and diskettes shall be shredded and destroyed in a manner acceptable to the VA.
6. Notify Contracting Officer and Site Security Officer immediately when there is a loss or compromise of "sensitive information".
7. All electronic information shall be stored in specified location following VA standards and procedures using an Engineering Document Management Software (EDMS).
  - a. Security, access and maintenance of all project drawings, both scanned and electronic shall be performed and tracked through the EDMS system.
  - b. "Sensitive information" including drawings and other documents may be attached to e-mail provided all VA encryption procedures are followed.

#### E. Motor Vehicle Restrictions

1. Vehicle authorization request shall be required for any vehicle entering the site and such request shall be submitted 24 hours before the date and time of access. Access shall be restricted to picking up and dropping off materials and supplies.
2. A limited number of (2 to 5) permits shall be issued for General Contractor and its employees for parking in designated areas only.

#### 1.6 OPERATIONS AND STORAGE AREAS

- A. The Contractor shall confine all operations (including storage of materials) on Government premises to areas authorized or approved by the Contracting Officer. The Contractor shall hold and save the Government, its officers and agents, free and harmless from liability of any nature occasioned by the Contractor's performance.

- C. The Contractor shall, under regulations prescribed by the Contracting Officer, use only established roadways, or use temporary roadways constructed by the Contractor when and as authorized by the Contracting Officer. When materials are transported in prosecuting the work, vehicles shall not be loaded beyond the loading capacity recommended by the manufacturer of the vehicle or prescribed by any Federal, State, or local law or regulation. When it is necessary to cross curbs or sidewalks, the Contractor shall protect them from damage. The Contractor shall repair or pay for the repair of any damaged curbs, sidewalks, or roads.
- D. Working space and space available for storing materials shall be as determined by the COR.
- E. Workmen are subject to rules of the Medical Center applicable to their conduct.
- F. Execute work so as to interfere as little as possible with normal functioning of the Medical Center as a whole, including operations of utility services, fire protection systems and any existing equipment, and with work being done by others. Use of equipment and tools that transmit vibrations and noises through the building structure, are not permitted in buildings that are occupied, during construction, jointly by patients or medical personnel, and Contractor's personnel, except as permitted by the COR.
1. Do not store materials and equipment in other than assigned areas.
  2. Schedule delivery of materials and equipment to immediate construction working areas within buildings in use by Department of Veterans Affairs in quantities sufficient for not more than two work days. Provide unobstructed access to Medical Center areas required to remain in operation.
  3. Where access by the Medical Center personnel to vacated portions of buildings is not required, storage of Contractor's materials and equipment will be permitted subject to fire and safety requirements.
- G. Utilities Services: No utility outages are anticipated during this monitoring. Any anticipated utility outages will be pre-coordinated with the COR.

G. Phasing:

The Medical Center must maintain its operation 24 hours a day 7 days a week. Therefore, any interruption in service must be scheduled and coordinated with the COR to ensure that no lapses in operation occur. It is the CONTRACTOR'S responsibility to develop a work plan and schedule detailing, at a minimum, the procedures to be employed, the equipment and materials to be used, the interim life safety measure to be used during the work, and a schedule defining the duration of the work with milestone subtasks. The work to be outlined shall include, but not be limited to:

The contractor will support the construction schedule provided by the VA on behalf of the construction contractor.

H. Utilities Services: Maintain existing utility services for the Medical Center at all times. Provide temporary facilities, labor, materials, equipment, connections, and utilities to assure uninterrupted services. Where necessary to cut existing water, steam, gases, sewer or air pipes, or conduits, wires, cables, etc. of utility services or of fire protection systems and communications systems (including telephone), they shall be cut and capped at suitable places where shown; or, in absence of such indication, where directed by the COR.

1. No utility service such as water, gas, steam, sewers or electricity, or fire protection systems and communications systems may be interrupted without prior approval of the COR.
2. Contractor shall submit a request to interrupt any such services to COR, in writing, 7 days in advance of proposed interruption. Request shall state reason, date, exact time of, and approximate duration of such interruption.
3. Contractor will be advised (in writing) of approval of request, or of which other date and/or time such interruption will cause least inconvenience to operations of the Medical Center. Interruption time approved by Medical Center may occur at other than Contractor's normal working hours.

4. Major interruptions of any system must be requested, in writing, at least 15 calendar days prior to the desired time and shall be performed as directed by the COR.
  5. In case of a contract construction emergency, service will be interrupted on approval of the COR. Such approval will be confirmed in writing as soon as practical.
  6. Whenever it is required that a connection fee be paid to a public utility provider for new permanent service to the construction project, for such items as water, sewer, electricity, gas or steam, payment of such fee shall be the responsibility of the Government and not the Contractor.
- I. To minimize interference of construction activities with flow of Medical Center traffic, comply with the following:
1. Keep roads, walks and entrances to grounds, to parking and to occupied areas of buildings clear of construction materials, debris and standing construction equipment and vehicles.
  2. Method and scheduling of required cutting, altering and removal of existing roads; walks and entrances must be approved by the COR.
- J. Coordinate the work for this contract with other construction operations as directed by the COR.

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SECTION 01 35 26  
SAFETY REQUIREMENTS

1.1 APPLICABLE PUBLICATIONS:

A. Latest publications listed below form part of this Article to extent referenced. Publications are referenced in text by basic designations only.

B. American Society of Safety Engineers (ASSE):

A10.1-2011.....Pre-Project & Pre-Task Safety and Health  
Planning

A10.34-2012.....Protection of the Public on or Adjacent to  
Construction Sites

A10.38-2013.....Basic Elements of an Employer's Program to  
Provide a Safe and Healthful Work Environment  
American National Standard Construction and  
Demolition Operations

C. American Society for Testing and Materials (ASTM):

E84-2013.....Surface Burning Characteristics of Building  
Materials

D. The Facilities Guidelines Institute (FGI):

FGI Guidelines-2010Guidelines for Design and Construction of  
Healthcare Facilities

E. National Fire Protection Association (NFPA):

10-2013.....Standard for Portable Fire Extinguishers

30-2012.....Flammable and Combustible Liquids Code

51B-2014.....Standard for Fire Prevention During Welding,  
Cutting and Other Hot Work

70-2014.....National Electrical Code

70B-2013.....Recommended Practice for Electrical Equipment  
Maintenance

70E-2015 .....Standard for Electrical Safety in the Workplace

99-2012.....Health Care Facilities Code

241-2013.....Standard for Safeguarding Construction,  
Alteration, and Demolition Operations

F. The Joint Commission (TJC)

TJC Manual .....Comprehensive Accreditation and Certification  
Manual

G. U.S. Nuclear Regulatory Commission

10 CFR 20 .....Standards for Protection Against Radiation

H. U.S. Occupational Safety and Health Administration (OSHA):

29 CFR 1904 .....Reporting and Recording Injuries & Illnesses

29 CFR 1910 .....Safety and Health Regulations for General  
Industry

29 CFR 1926 .....Safety and Health Regulations for Construction  
Industry

CPL 2-0.124.....Multi-Employer Citation Policy

I. VHA Directive 2005-007

1.2 DEFINITIONS:

A. Critical Lift. A lift with the hoisted load exceeding 75% of the crane’s maximum capacity; lifts made out of the view of the operator (blind picks); lifts involving two or more cranes; personnel being hoisted; and special hazards such as lifts over occupied facilities, loads lifted close to power-lines, and lifts in high winds or where other adverse environmental conditions exist; and any lift which the crane operator believes is critical.

B. OSHA “Competent Person” (CP). One who is capable of identifying existing and predictable hazards in the surroundings and working conditions which are unsanitary, hazardous or dangerous to employees, and who has the authorization to take prompt corrective measures to eliminate them (see 29 CFR 1926.32(f)).

C. "Qualified Person" means one who, by possession of a recognized degree, certificate, or professional standing, or who by extensive knowledge, training and experience, has successfully demonstrated his ability to solve or resolve problems relating to the subject matter, the work, or the project.

D. High Visibility Accident. Any mishap which may generate publicity or high visibility.

E. Accident/Incident Criticality Categories:

No impact - near miss incidents that should be investigated but are not required to be reported to the VA;

Minor incident/impact - incidents that require first aid or result in minor equipment damage (less than \$5000). These incidents must be investigated but are not required to be reported to the VA;

Moderate incident/impact - Any work-related injury or illness that results in:

1. Days away from work (any time lost after day of injury/illness onset);
2. Restricted work;
3. Transfer to another job;
4. Medical treatment beyond first aid;
5. Loss of consciousness;
6. A significant injury or illness diagnosed by a physician or other licensed health care professional, even if it did not result in (1) through (5) above or,
7. Any incident that leads to major equipment damage (greater than \$5000).

These incidents must be investigated and are required to be reported to the VA;

Major incident/impact - Any mishap that leads to fatalities, hospitalizations, amputations, and losses of an eye as a result of

contractors' activities. Or any incident which leads to major property damage (greater than \$20,000) and/or may generate publicity or high visibility. These incidents must be investigated and are required to be reported to the VA as soon as practical, but not later than 2 hours after the incident.

- F. Medical Treatment. Treatment administered by a physician or by registered professional personnel under the standing orders of a physician. Medical treatment does not include first aid treatment even through provided by a physician or registered personnel.

1.3 REGULATORY REQUIREMENTS:

- A. In addition to the detailed requirements included in the provisions of this contract, comply with 29 CFR 1926, comply with 29 CFR 1910 as incorporated by reference within 29 CFR 1926, comply with ASSE A10.34, and all applicable federal, state, and local laws, ordinances, criteria, rules and regulations. Submit matters of interpretation of standards for resolution before starting work. Where the requirements of this specification, applicable laws, criteria, ordinances, regulations, and referenced documents vary, the most stringent requirements govern except with specific approval and acceptance by the Contracting Officer Representative.

1.4 PRECONSTRUCTION CONFERENCE:

- A. Contractor shall attend the preconstruction conference.

1.5 ACCIDENTS, OSHA 300 LOGS, AND MAN-HOURS:

- A. The prime contractor shall establish and maintain an accident reporting, recordkeeping, and analysis system to track and analyze all injuries and illnesses, high visibility incidents, and accidental property damage (both government and contractor) that occur on site. Notify the Contracting Officer Representative as soon as practical, but no more than four hours after any accident meeting the definition of a Moderate or Major incidents, High Visibility Incidents, , or any weight handling and hoisting equipment accident. Within notification include contractor name; contract title; type of contract; name of activity, installation or location where accident occurred; date and time of accident; names of personnel injured; extent of property damage, if any; extent of injury, if known, and brief description of

accident (to include type of construction equipment used, PPE used, etc.). Preserve the conditions and evidence on the accident site until the Contracting Officer Representative determines whether a government investigation will be conducted.

- B. Conduct an accident investigation for all Minor, Moderate and Major incidents as defined in paragraph DEFINITIONS, and property damage accidents resulting in at least \$20,000 in damages, to establish the root cause(s) of the accident. Complete the VA Form 2162 (or equivalent), and provide the report to the Contracting Officer Representative. The COR will provide copies of any required or special forms.
- C. A summation of all man-hours worked by the contractor and associated sub-contractors for each month will be reported to the Contracting Officer Representative monthly.
- D. A summation of all Minor, Moderate, and Major incidents experienced on site by the contractor and associated sub-contractors for each month will be provided to the Contracting Officer Representative monthly. The contractor and associated sub-contractors' OSHA 300 logs will be made available to the Contracting Officer Representative as requested.

#### 1.6 PERSONAL PROTECTIVE EQUIPMENT (PPE):

- A. PPE is governed in all areas by the nature of the work the employee is performing. For example, specific PPE required for performing work on electrical equipment is identified in NFPA 70E, Standard for Electrical Safety in the Workplace.
- B. Mandatory PPE includes:
  - 1. Hard Hats - unless written authorization is given by the Contracting Officer Representative in circumstances of work operations that have limited potential for falling object hazards such as during finishing work or minor remodeling. With authorization to relax the requirement of hard hats, if a worker becomes exposed to an overhead falling object hazard, then hard hats would be required in accordance with the OSHA regulations.
  - 2. Safety glasses - unless written authorization is given by the Contracting Officer Representative in circumstances of no eye

hazards, appropriate safety glasses meeting the ANSI Z.87.1 standard must be worn by each person on site.

3. Appropriate Safety Shoes - based on the hazards present, safety shoes meeting the requirements of ASTM F2413-11 shall be worn by each person on site unless written authorization is given by the Contracting Officer Representative in circumstances of no foot hazards.
4. Hearing protection - Use personal hearing protection at all times in designated noise hazardous areas or when performing noise hazardous tasks.

#### 1.7 INFECTION CONTROL

- A. Infection Control is critical in all medical center facilities. Interior construction activities causing disturbance of existing dust, or creating new dust, must be conducted within ventilation-controlled areas that minimize the flow of airborne particles into patient areas.
- B. An AHA associated with infection control will be performed by VA personnel in accordance with FGI Guidelines (i.e. Infection Control Risk Assessment (ICRA)). The ICRA procedure found on the American Society for Healthcare Engineering (ASHE) website will be utilized. The Infection Control Permits will be posted outside the appropriate construction area. More than one permit may be issued for a construction project if the work is located in separate areas requiring separate classes. The primary project scope area for this project is: Class IV, however, work outside the primary project scope area may vary. The required infection control precautions with each class are as follows:

1. Class IV requirements:

- A. During Construction Work:

- 1) Comply with all outlined requirements for class IV ICRA. Before any construction on site begins, all contractor personnel involved in the construction or renovation activity shall be educated and trained in infection prevention measures established by the medical center.

- C. Medical center Infection Control personnel will monitor for airborne disease (e.g. aspergillosis) during construction. A baseline of conditions will be established by the medical center prior to the start of work and periodically during the construction stage to determine impact of construction activities on indoor air quality with safe thresholds established.

#### 1.8 FIRE SAFETY

- A. Fire Safety Plan: Follow construction contractor developed site-specific fire protection program in accordance with 29 CFR 1926. Prior to start of work, prepare a plan detailing project-specific fire safety measures, including periodic status reports, and submit to the Contracting Officer Representative for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES. This plan may be an element of the Accident Prevention Plan.
- B. Site and Building Access: Maintain free and unobstructed access to facility emergency services and for fire, police and other emergency response forces in accordance with NFPA 241.
- C. Separate temporary facilities, such as trailers, storage sheds, and dumpsters, from existing buildings and new construction by distances in accordance with NFPA 241. For small facilities with less than 6 m (20 feet) exposing overall length, separate by 3m (10 feet).
- D. Means of Egress: Do not block exiting for occupied buildings, including paths from exits to roads. Minimize disruptions and coordinate with the Contracting Officer Representative.
- E. Egress Routes for Construction Workers: Maintain free and unobstructed egress. Inspect daily. Report findings and corrective actions weekly to the Contracting Officer Representative.
- F. Fire Extinguishers: Provide and maintain extinguishers in construction areas and temporary storage areas in accordance with 29 CFR 1926, NFPA 241 and NFPA 10.

- G. Flammable and Combustible Liquids: Store, dispense and use liquids in accordance with 29 CFR 1926, NFPA 241 and NFPA 30.
- H. Existing Fire Protection: Do not impair automatic sprinklers, smoke and heat detection, and fire alarm systems, except for portions immediately under construction, and temporarily for connections. Provide fire watch for impairments more than 4 hours in a 24-hour period. Request interruptions in advance of work through the COR. All existing or temporary fire protection systems (fire alarms, sprinklers) located in construction areas shall be tested as coordinated with the medical center. Parameters for the testing and results of any tests performed shall be recorded by the medical center and copies provided to the COR.
- I. Smoke Detectors: Prevent accidental operation. Remove temporary covers at end of work operations each day. Coordinate with COR.
- J. Hot Work: Not anticipated in the project. If encountered, coordinate with the COR for approval.
- K. Fire Hazard Prevention and Safety Inspections: Inspect entire construction areas weekly. Coordinate with, and report findings and corrective actions weekly to the Contracting Officer Representative.
- L. Smoking: Smoking is prohibited in and adjacent to construction areas inside existing buildings and additions under construction. In separate and detached buildings under construction, smoking is prohibited except in designated smoking rest areas.
- M. Dispose of waste and debris in accordance with NFPA 241. Remove from buildings daily.

#### 1.9 ELECTRICAL

- A. All electrical work shall comply with NFPA 70 (NEC), NFPA 70B, NFPA 70E, 29 CFR Part 1910 Subpart J - General Environmental Controls, 29 CFR Part 1910 Subpart S - Electrical, and 29 CFR 1926 Subpart K in addition to other references required by contract.
- B. All qualified persons performing electrical work under this contract shall be licensed journeyman or master electricians. All apprentice electricians performing under this contract shall be deemed unqualified

persons unless they are working under the immediate supervision of a licensed electrician or master electrician.

C. All electrical work will be accomplished de-energized and in the Electrically Safe Work Condition (refer to NFPA 70E for Work Involving Electrical Hazards, including Exemptions to Work Permit). Any Contractor, subcontractor or temporary worker who fails to fully comply with this requirement is subject to immediate termination in accordance with FAR clause 52.236-5(c). Only in rare circumstance where achieving an electrically safe work condition prior to beginning work would increase or cause additional hazards, or is infeasible due to equipment design or operational limitations is energized work permitted. The Contracting Officer Representative with approval of the Medical Center Director will make the determination if the circumstances would meet the exception outlined above. An AHA and permit specific to energized work activities will be developed, reviewed, and accepted by the VA prior to the start of that activity.

1. Development of a Hazardous Electrical Energy Control Procedure is required prior to de-energization. A single Simple Lockout/Tagout Procedure for multiple work operations can only be used for work involving qualified person(s) de-energizing one set of conductors or circuit part source. Task specific Complex Lockout/Tagout Procedures are required at all other times.

2. Verification of the absence of voltage after de-energization and lockout/tagout is considered "energized electrical work" (live work) under NFPA 70E, and shall only be performed by qualified persons wearing appropriate shock protective (voltage rated) gloves and arc rate personal protective clothing and equipment, using Underwriters Laboratories (UL) tested and appropriately rated contact electrical testing instruments or equipment appropriate for the environment in which they will be used.

3. Personal Protective Equipment (PPE) and electrical testing instruments will be readily available for inspection by the Contracting Officer Representative.

D. Before beginning any electrical work, an Activity Hazard Analysis (AHA) will be conducted to include Shock Hazard and Arc Flash Hazard analyses

(NFPA Tables can be used only as a last alternative and it is strongly suggested a full Arc Flash Hazard Analyses be conducted). Work shall not begin until the AHA for the work activity and permit for energized work has been reviewed and accepted by the COR and discussed with all engaged in the activity, including the Contractor, subcontractor(s), and Government on-site representatives at preparatory and initial control phase meetings.

- E. Ground-fault circuit interrupters. GFCI protection shall be provided where an employee is operating or using cord- and plug-connected tools related to construction activity supplied by 125-volt, 15-, 20-, or 30-ampere circuits. Where employees operate or use equipment supplied by greater than 125-volt, 15-, 20-, or 30- ampere circuits, GFCI protection or an assured equipment grounding conductor program shall be implemented in accordance with NFPA 70E - 2015, Chapter 1, Article 110.4(C)(2)..

#### 1.10 FALL PROTECTION

- A. The fall protection (FP) threshold height requirement is 6 ft (1.8 m) for ALL WORK, unless specified differently or the OSHA 29 CFR 1926 requirements are more stringent, to include steel erection activities, systems-engineered activities (prefabricated) metal buildings, residential (wood) construction and scaffolding work.
  1. The use of a Safety Monitoring System (SMS) as a fall protection method is prohibited.
  2. The use of Controlled Access Zone (CAZ) as a fall protection method is prohibited.
  3. A Warning Line System (WLS) may ONLY be used on floors or flat or low-sloped roofs (between 0 - 18.4 degrees or 4:12 slope) and shall be erected around all sides of the work area (See 29 CFR 1926.502(f) for construction of WLS requirements). Working within the WLS does not require FP. No worker shall be allowed in the area between the roof or floor edge and the WLS without FP. FP is required when working outside the WLS.
  4. Fall protection while using a ladder will be governed by the OSHA requirements.

#### 1.11 SCAFFOLDS AND OTHER WORK PLATFORMS

- A. All scaffolds and other work platforms construction activities shall comply with 29 CFR 1926 Subpart L.
- B. The fall protection (FP) threshold height requirement is 6 ft (1.8 m) as stated in Section 1.16.
- C. The following hierarchy and prohibitions shall be followed in selecting appropriate work platforms.
  - 1. Scaffolds, platforms, or temporary floors shall be provided for all work except that can be performed safely from the ground or similar footing.
  - 2. Ladders less than 20 feet may be used as work platforms only when use of small hand tools or handling of light material is involved.
  - 3. Ladder jacks, lean-to, and prop-scaffolds are prohibited.
  - 4. Emergency descent devices shall not be used as working platforms.
- D. Contractors shall use a scaffold tagging system in which all scaffolds are tagged by the Competent Person. Tags shall be color-coded: green indicates the scaffold has been inspected and is safe to use; red indicates the scaffold is unsafe to use. Tags shall be readily visible, made of materials that will withstand the environment in which they are used, be legible and shall include:
  - 1. The Competent Person's name and signature;
  - 2. Dates of initial and last inspections.
- E. Mast Climbing work platforms: When access ladders, including masts designed as ladders, exceed 20 ft (6 m) in height, positive fall protection shall be used.

#### 1.12 EXCAVATION AND TRENCHES

- A. Not anticipated during this project. If encountered, seek approval from the COR prior to work start.

#### 1.13 CRANES

- A. Not anticipated during this project. If encountered, seek approval from the COR prior to work start.

#### 1.14 CONTROL OF HAZARDOUS ENERGY (LOCKOUT/TAGOUT)

- A. All installation, maintenance, and servicing of equipment or machinery shall comply with 29 CFR 1910.147 except for specifically referenced operations in 29 CFR 1926 such as concrete & masonry equipment [1926.702(j)], heavy machinery & equipment [1926.600(a)(3)(i)], and process safety management of highly hazardous chemicals (1926.64). Control of hazardous electrical energy during the installation, maintenance, or servicing of electrical equipment shall comply with Section 1.15 to include NFPA 70E and other VA specific requirements discussed in the section.

#### 1.15 CONFINED SPACE ENTRY

- A. All confined space entry shall comply with 29 CFR 1926, Subpart AA except for specifically referenced operations in 29 CFR 1926 such as excavations/trenches [1926.651(g)].
- B. A site-specific Confined Space Entry Plan (including permitting process) shall be developed and submitted to the COR.

#### 1.16 WELDING AND CUTTING

- A. Not anticipated during this project. If encountered, seek approval from the COR prior to work start.

#### 1.17 LADDERS

- A. All Ladder use shall comply with 29 CFR 1926 Subpart X.
- B. All portable ladders shall be of sufficient length and shall be placed so that workers will not stretch or assume a hazardous position.
- C. Manufacturer safety labels shall be in place on ladders
- D. Step Ladders shall not be used in the closed position
- E. Top steps or cap of step ladders shall not be used as a step
- F. Portable ladders, used as temporary access, shall extend at least 3 ft (0.9 m) above the upper landing surface.
  - 1. When a 3 ft (0.9-m) extension is not possible, a grasping device (such as a grab rail) shall be provided to assist workers in mounting and dismounting the ladder.

2. In no case shall the length of the ladder be such that ladder deflection under a load would, by itself, cause the ladder to slip from its support.

G. Ladders shall be inspected for visible defects on a daily basis and after any occurrence that could affect their safe use. Broken or damaged ladders shall be immediately tagged "DO NOT USE," or with similar wording, and withdrawn from service until restored to a condition meeting their original design.

#### 1.18 FLOOR & WALL OPENINGS

A. All floor and wall openings shall comply with 29 CFR 1926 Subpart M.

B. Floor and roof holes/openings are any that measure over 2 in (51 mm) in any direction of a walking/working surface which persons may trip or fall into or where objects may fall to the level below. Skylights located in floors or roofs are considered floor or roof hole/openings.

C. All floor, roof openings or hole into which a person can accidentally walk or fall through shall be guarded either by a railing system with toeboards along all exposed sides or a load-bearing cover. When the cover is not in place, the opening or hole shall be protected by a removable guardrail system or shall be attended when the guarding system has been removed or other fall protection system.

1. Covers shall be capable of supporting, without failure, at least twice the weight of the worker, equipment and material combined.

2. Covers shall be secured when installed, clearly marked with the word "HOLE", "COVER" or "Danger, Roof Opening-Do Not Remove" or color-coded or equivalent methods (e.g., red or orange "X"). Workers must be made aware of the meaning for color coding and equivalent methods.

3. Roofing material, such as roofing membrane, insulation or felts, covering or partly covering openings or holes, shall be immediately cut out. No hole or opening shall be left unattended unless covered.

4. Non-load-bearing skylights shall be guarded by a load-bearing skylight screen, cover, or railing system along all exposed sides.

5. Workers are prohibited from standing/walking on skylights.

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SECTION 02 82 11  
ASBESTOS MONITORING

PART 1 - GENERAL

1.1 SUMMARY OF THE WORK

1.1.1 EXTENT OF WORK

- A. Below is a brief description of the estimated quantities of asbestos containing materials to be monitoring during abatement. These quantities are for informational purposes only and are based on the best information available at the time of the specification preparation. The Contractor shall satisfy himself as the actual quantities to be abated. Nothing in this section may be interpreted as limiting the extent of work otherwise required by this contract and related documents.
- B. Removal, clean-up and disposal of asbestos containing materials (ACM) and asbestos/waste contaminated elements in an appropriate regulated area for the following approximate quantities;
- 600 SF Asbestos tile (9'x9') with mastic
  - 480 SF Mold

1.1.2 TASKS

The work tasks are summarized briefly as follows:

- A. Pre-abatement activities including pre-abatement meeting(s), inspection(s), submittal approvals.
- B. Project monitoring and air monitoring
- C. Final air clearances and certification of decontamination.

1.1.3 CONTRACTORS USE OF PREMISES

- A. The Contractor and Contractor's personnel shall cooperate fully with the VA representative/consultant to facilitate efficient use of buildings and areas within buildings. The Contractor shall perform the work in accordance with the VA specifications, drawings, phasing plan and in compliance with any/all applicable Federal, State and Local regulations and requirements.
- B. The Contractor shall use the existing facilities in the building strictly within the limits indicated in contract documents as well as the approved VA Design and Construction Procedures.

## 1.2 VARIATIONS IN QUANTITY

The quantities and locations of ACM as indicated on the drawings and the extent of work included in this section are estimated which are limited by the physical constraints imposed by occupancy of the buildings and accessibility to ACM. Accordingly, minor variations (+/- 5%) in quantities of ACM within the regulated area are considered as having no impact on contract price and time requirements of this contract. Where additional work is required beyond the above variation, the contractor shall provide unit prices for newly discovered ACM and those prices shall be used for additional monitoring required under the contractor.

## 1.3 DEFINITIONS

### 1.3.1 GENERAL

Definitions and explanations here are neither complete nor exclusive of all terms used in the contract documents, but are general for the work to the extent they are not stated more explicitly in another element of the contract documents. Drawings must be recognized as diagrammatic in nature and not completely descriptive of the requirements indicated therein.

## 1.4. GLOSSARY

Abatement - Procedures to control fiber release from asbestos-containing materials. Includes removal, encapsulation, enclosure, demolition, and renovation activities related to asbestos containing materials (ACM).

Aerosol - Solid or liquid particulate suspended in air.

Adequately wet - Sufficiently mixed or penetrated with liquid to prevent the release of particulates. If visible emissions are observed coming from the ACM, then that material has not been adequately wetted.

Aggressive method - Removal or disturbance of building material by sanding, abrading, grinding, or other method that breaks, crumbles, or disintegrates intact ACM.

Aggressive sampling - EPA AHERA defined clearance sampling method using air moving equipment such as fans and leaf blowers to aggressively disturb and maintain in the air residual fibers after abatement.

AHERA - Asbestos Hazard Emergency Response Act. Asbestos regulations for schools issued in 1987.

Aircell - Pipe or duct insulation made of corrugated cardboard which contains asbestos.

Air monitoring - The process of measuring the fiber content of a known volume of air collected over a specified period of time. The NIOSH 7400 Method, Issue 2 is used to determine the fiber levels in air. For personal samples and clearance air testing using Phase Contrast Microscopy (PCM) analysis. NIOSH Method 7402 can be used when it is necessary to confirm fibers counted by PCM as being asbestos. The AHERA TEM analysis may be used for background, area samples and clearance samples when required by this specification, or at the discretion of the VPIH/CIH as appropriate.

Air sample filter - The filter used to collect fibers which are then counted. The filter is made of mixed cellulose ester membrane for PCM (Phase Contrast Microscopy) and polycarbonate for TEM (Transmission Electron Microscopy)

Amended water - Water to which a surfactant (wetting agent) has been added to increase the penetrating ability of the liquid.

Asbestos - Includes chrysotile, amosite, crocidolite, tremolite asbestos, anthophyllite asbestos, actinolite asbestos, and any of these minerals that have been chemically treated or altered. Asbestos also includes PACM, as defined below.

Asbestos Hazard Abatement Plan (AHAP) - Asbestos work procedures required to be submitted by the contractor before work begins.

Asbestos-containing material (ACM) - Any material containing more than one percent of asbestos.

Asbestos contaminated elements (ACE) - Building elements such as ceilings, walls, lights, or ductwork that are contaminated with asbestos.

Asbestos-contaminated soil (ACS) - Soil found in the work area or in adjacent areas such as crawlspaces or pipe tunnels which is contaminated with asbestos-containing material debris and cannot be easily separated from the material.

Asbestos-containing waste (ACW) material - Asbestos-containing material or asbestos contaminated objects requiring disposal.

Asbestos Project Monitor - Some states require that any person conducting asbestos abatement clearance inspections and clearance air sampling be licensed as an asbestos project monitor.

Asbestos waste decontamination facility - A system consisting of drum/bag washing facilities and a temporary storage area for cleaned containers of asbestos waste. Used as the exit for waste and equipment leaving the regulated area. In an emergency, it may be used to evacuate personnel.

Authorized person - Any person authorized by the VA, the Contractor, or government agency and required by work duties to be present in regulated areas.

Authorized visitor - Any person approved by the VA; the contractor; or any government agency representative having jurisdiction over the regulated area (e.g., OSHA, Federal and State EPA).

Barrier - Any surface that isolates the regulated area and inhibits fiber migration from the regulated area.

Containment Barrier - An airtight barrier consisting of walls, floors, and/or ceilings of sealed plastic sheeting which surrounds and seals the outer perimeter of the regulated area.

Critical Barrier - The barrier responsible for isolating the regulated area from adjacent spaces, typically constructed of plastic sheeting secured in place at openings such as doors, windows, or any other opening into the regulated area.

Primary Barrier - Plastic barriers placed over critical barriers and exposed directly to abatement work.

Secondary Barrier - Any additional plastic barriers used to isolate and provide protection from debris during abatement work.

Breathing zone - The hemisphere forward of the shoulders with a radius of about 150 - 225 mm (6 - 9 inches) from the worker's nose.

Bridging encapsulant - An encapsulant that forms a layer on the surface of the ACM.

Building/facility owner - The legal entity, including a lessee, which exercises control over management and recordkeeping functions relating to a building and/or facility in which asbestos activities take place.

Bulk testing - The collection and analysis of suspect asbestos containing materials.

Certified Industrial Hygienist (CIH) - A person certified in the comprehensive practice of industrial hygiene by the American Board of Industrial Hygiene.

Class I asbestos work - Activities involving the removal of Thermal System Insulation (TSI) and surfacing ACM and Presumed Asbestos Containing Material (PACM).

Class II asbestos work - Activities involving the removal of ACM which is not thermal system insulation or surfacing material. This includes, but is not limited to, the removal of asbestos-

containing wallboard, floor tile and sheeting, roofing and siding shingles, and construction mastic.

Clean room/Changing room - An uncontaminated room having facilities for the storage of employee's street clothing and uncontaminated materials and equipment.

Clearance sample - The final air sample taken after all asbestos work has been done and visually inspected. Performed by the VA's professional industrial hygiene consultant/Certified Industrial Hygienist (VPIH/CIH).

Closely resemble - The major workplace conditions which have contributed to the levels of historic asbestos exposure are no more protective than conditions of the current workplace.

Competent person - In addition to the definition in 29 CFR 1926.32(f), one who is capable of identifying existing asbestos hazards in the workplace and selecting the appropriate control strategy for asbestos exposure, who has the authority to take prompt corrective measures to eliminate them, as specified in 29 CFR 1926.32(f); in addition, for Class I and II work who is specially trained in a training course which meets the criteria of EPA's Model Accreditation Plan (40 CFR 763) for supervisor.

Contractor's Professional Industrial Hygienist (CPIH/CIH) - The asbestos abatement contractor's industrial hygienist. The industrial hygienist must meet the qualification requirements of a PIH and may be a certified industrial hygienist (CIH).

Count - Refers to the fiber count or the average number of fibers greater than five microns in length with a length-to-width (aspect) ratio of at least 3 to 1, per cubic centimeter of air.

Crawlspace - An area which can be found either in or adjacent to the work area. This area has limited access and egress and may contain asbestos materials and/or asbestos contaminated soil.

Decontamination area/unit - An enclosed area adjacent to and connected to the regulated area and consisting of an equipment room, shower room, and clean room, which is used for the decontamination of workers, materials, and equipment that are contaminated with asbestos.

Demolition - The wrecking or taking out of any load-supporting structural member and any related razing, removing, or stripping of asbestos products.

VA Total - means a building or substantial part of the building is completely removed, torn or knocked down, bulldozed, flattened, or razed, including removal of building debris.

Disposal bag - Typically 6 mil thick sift-proof, dustproof, leak-tight container used to package and transport asbestos waste from

regulated areas to the approved landfill. Each bag/container must be labeled/marked in accordance with EPA, OSHA and DOT requirements.

Disturbance - Activities that disrupt the matrix of ACM or PACM, crumble or pulverize ACM or PACM, or generate visible debris from ACM or PACM. Disturbance includes cutting away small amounts of ACM or PACM, no greater than the amount that can be contained in one standard sized glove bag or waste bag in order to access a building component. In no event shall the amount of ACM or PACM so disturbed exceed that which can be contained in one glove bag or disposal bag which shall not exceed 60 inches in length or width.

Drum - A rigid, impermeable container made of cardboard fiber, plastic, or metal which can be sealed in order to be sift-proof, dustproof, and leak-tight.

Employee exposure - The exposure to airborne asbestos that would occur if the employee were not wearing respiratory protection equipment.

Encapsulant - A material that surrounds or embeds asbestos fibers in an adhesive matrix and prevents the release of fibers.

Encapsulation - Treating ACM with an encapsulant.

Enclosure - The construction of an air tight, impermeable, permanent barrier around ACM to control the release of asbestos fibers from the material and also eliminate access to the material.

Equipment room - A contaminated room located within the decontamination area that is supplied with impermeable bags or containers for the disposal of contaminated protective clothing and equipment.

Fiber - A particulate form of asbestos, 5 microns or longer, with a length to width (aspect) ratio of at least 3 to 1.

Fibers per cubic centimeter (f/cc) - Abbreviation for fibers per cubic centimeter, used to describe the level of asbestos fibers in air.

Filter - Media used in respirators, vacuums, or other machines to remove particulate from air.

Firestopping - Material used to close the open parts of a structure in order to prevent a fire from spreading.

Friable asbestos containing material - Any material containing more than one (1) percent or asbestos as determined using the method specified in appendix A, Subpart F, 40 CFR 763, section 1,

Polarized Light Microscopy, that, when dry, can be crumbled, pulverized, or reduced to powder by hand pressure.

Glovebag - Not more than a 60 x 60 inch impervious plastic bag-like enclosure affixed around an asbestos-containing material, with glove-like appendages through which materials and tools may be handled.

High efficiency particulate air (HEPA) filter - An ASHRAE MERV 17 filter capable of trapping and retaining at least 99.97 percent of all mono-dispersed particles of 0.3 micrometers in diameter.

HEPA vacuum - Vacuum collection equipment equipped with a HEPA filter system capable of collecting and retaining asbestos fibers.

Homogeneous area - An area of surfacing, thermal system insulation or miscellaneous ACM that is uniform in color, texture and date of application.

HVAC - Heating, Ventilation and Air Conditioning

Industrial hygienist (IH) - A professional qualified by education, training, and experience to anticipate, recognize, evaluate and develop controls for occupational health hazards. Meets definition requirements of the American Industrial Hygiene Association (AIHA).

Industrial hygienist technician (IH Technician) - A person working under the direction of an IH or CIH who has special training, experience, certifications and licenses required for the industrial hygiene work assigned. Some states require that an industrial hygienist technician conducting asbestos abatement clearance inspection and clearance air sampling be licensed as an asbestos project monitor.

Intact - The ACM has not crumbled, been pulverized, or otherwise deteriorated so that the asbestos is no longer likely to be bound with its matrix.

Lockdown - Applying encapsulant, after a final visual inspection, on all abated surfaces at the conclusion of ACM removal prior to removal of critical barriers.

National Emission Standards for Hazardous Air Pollutants (NESHAP) - EPA's rule to control emissions of asbestos to the environment (40 CFR part 61, Subpart M).

Negative initial exposure assessment - A demonstration by the employer which complies with the criteria in 29 CFR 1926.1101 (f)(2)(iii), that employee exposure during an operation is expected to be consistently below the PEL.

Negative pressure - Air pressure which is lower than the surrounding area, created by exhausting air from a sealed regulated area through HEPA equipped filtration units. OSHA requires maintaining -0.02" water column gauge inside the negative pressure enclosure.

Negative pressure respirator - A respirator in which the air pressure inside the facepiece is negative during inhalation relative to the air pressure outside the respirator facepiece.

Non-friable ACM - Material that contains more than 1 percent asbestos but cannot be crumbled, pulverized, or reduced to powder by hand pressure.

Organic vapor cartridge - The type of cartridge used on air purifying respirators to remove organic vapor hazardous air contaminants.

Outside air - The air outside buildings and structures, including, but not limited to, the air under a bridge or in an open ferry dock.

Owner/operator - Any person who owns, leases, operates, controls, or supervises the facility being demolished or renovated or any person who owns leases, operates, controls, or supervises the demolition or renovation operation, or both.

Penetrating encapsulant - Encapsulant that is absorbed into the ACM matrix without leaving a surface layer.

Personal sampling/monitoring - Representative air samples obtained in the breathing zone for one or workers within the regulated area using a filter cassette and a calibrated air sampling pump to determine asbestos exposure.

Permissible exposure limit (PEL) - The level of exposure OSHA allows for an 8 hour time weighted average. For asbestos fibers, the eight (8) hour time weighted average PEL is 0.1 fibers per cubic centimeter (0.1 f/cc) of air and the 30-minute Excursion Limit is 1.0 fibers per cubic centimeter (1 f/cc).

Personal protective equipment (PPE) - equipment designed to protect user from injury and/or specific job hazard. Such equipment may include protective clothing, hard hats, safety glasses, and respirators.

Pipe tunnel - An area, typically located adjacent to mechanical spaces or boiler rooms in which the pipes servicing the heating system in the building are routed to allow the pipes to access heating elements. These areas may contain asbestos pipe insulation, asbestos fittings, or asbestos-contaminated soil.

Polarized light microscopy (PLM) - Light microscopy using dispersion staining techniques and refractive indices to identify and quantify the type(s) of asbestos present in a bulk sample.

Polyethylene sheeting - Strong plastic barrier material 4 to 6 mils thick, semi-transparent, flame retardant per NFPA 241.

Positive/negative fit check - A method of verifying the seal of a facepiece respirator by temporarily occluding the filters and breathing in (inhaling) and then temporarily occluding the exhalation valve and breathing out (exhaling) while checking for inward or outward leakage of the respirator respectively.

Presumed ACM (PACM) - Thermal system insulation, surfacing, and flooring material installed in buildings prior to 1981. If the building owner has actual knowledge, or should have known through the exercise of due diligence that other materials are ACM, they too must be treated as PACM. The designation of PACM may be rebutted pursuant to 29 CFR 1926.1101 (b).

Professional IH - An IH who meets the definition requirements of AIHA; meets the definition requirements of OSHA as a "Competent Person" at 29 CFR 1926.1101 (b); has completed two specialized EPA approved courses on management and supervision of asbestos abatement projects; has formal training in respiratory protection and waste disposal; and has a minimum of four projects of similar complexity with this project of which at least three projects serving as the supervisory IH. The PIH may be either the VA's PIH (VPIH) or Contractor's PIH (CPIH/CIH).

Project designer - A person who has successfully completed the training requirements for an asbestos abatement project designer as required by 40 CFR 763 Appendix C, Part I; (B)(5).

Assigned protection factor - A value assigned by OSHA/NIOSH to indicate the expected protection provided by each respirator class, when the respirator is properly selected and worn correctly. The number indicates the reduction of exposure level from outside to inside the respirator facepiece.

Qualitative fit test (QLFT) - A fit test using a challenge material that can be sensed by the wearer if leakage in the respirator occurs.

Quantitative fit test (QNFT) - A fit test using a challenge material which is quantified outside and inside the respirator thus allowing the determination of the actual fit factor.

Regulated area - An area established by the employer to demarcate where Class I, II, III asbestos work is conducted, and any adjoining area where debris and waste from such asbestos work may accumulate; and a work area within which airborne concentrations

of asbestos exceed, or there is a reasonable possibility they may exceed the PEL.

Regulated ACM (RACM) - Friable ACM; Category I non-friable ACM that has become friable; Category I non-friable ACM that will be or has been subjected to sanding, grinding, cutting, or abrading or; Category II non-friable ACM that has a high probability of becoming or has become crumbled, pulverized, or reduced to powder by the forces expected to act on the material in the course of the demolition or renovation operation.

Removal - All operations where ACM, PACM and/or RACM is taken out or stripped from structures or substrates, including demolition operations.

Renovation - Altering a facility or one or more facility components in any way, including the stripping or removal of asbestos from a facility component which does not involve demolition activity.

Repair - Overhauling, rebuilding, reconstructing, or reconditioning of structures or substrates, including encapsulation or other repair of ACM or PACM attached to structures or substrates.

Shower room - The portion of the PDF where personnel shower before leaving the regulated area.

Supplied air respirator (SAR) - A respiratory protection system that supplies minimum Grade D respirable air per ANSI/Compressed Gas Association Commodity Specification for Air, G-7.1-1989.

Surfacing ACM - A material containing more than 1 percent asbestos that is sprayed, troweled on or otherwise applied to surfaces for acoustical, fireproofing and other purposes.

Surfactant - A chemical added to water to decrease water's surface tension thus making it more penetrating into ACM.

Thermal system ACM - A material containing more than 1 percent asbestos applied to pipes, fittings, boilers, breeching, tanks, ducts, or other structural components to prevent heat loss or gain.

Transmission electron microscopy (TEM) - A microscopy method that can identify and count asbestos fibers.

VA Professional Industrial Hygienist (VPIH/CIH) - The Department of Veterans Affairs Professional Industrial Hygienist must meet the qualifications of a PIH, and may be a Certified Industrial Hygienist (CIH).

VA Representative - The VA official responsible for on-going project work.

Visible emissions - Any emissions, which are visually detectable without the aid of instruments, coming from ACM/PACM/RACM/ACS or ACM waste material.

Waste/Equipment decontamination facility (W/EDF) - The area in which equipment is decontaminated before removal from the regulated area.

Waste generator - Any owner or operator whose act or process produces asbestos-containing waste material.

Waste shipment record - The shipping document, required to be originated and signed by the waste generator, used to track and substantiate the disposition of asbestos-containing waste material.

Wet cleaning - The process of thoroughly eliminating, by wet methods, any asbestos contamination from surfaces or objects.

#### 1.4.1 REFERENCED STANDARDS ORGANIZATIONS

The following acronyms or abbreviations as referenced in contract/specification documents are defined to mean the associated names. Names and addresses may be subject to change.

- A. VA Department of Veterans Affairs  
810 Vermont Avenue, NW  
Washington, DC 20420
  
- B. AIHA American Industrial Hygiene Association  
2700 Prosperity Avenue, Suite 250  
Fairfax, VA 22031  
703-849-8888
  
- C. ANSI American National Standards Institute  
1430 Broadway  
New York, NY 10018  
212-354-3300
  
- D. ASTM American Society for Testing and Materials  
1916 Race St.  
Philadelphia, PA 19103  
215-299-5400

- E. CFR Code of Federal Regulations  
Government Printing Office  
Washington, DC 20420
  
- F. CGA Compressed Gas Association  
1235 Jefferson Davis Highway  
Arlington, VA 22202  
703-979-0900
  
- G. CS Commercial Standard of the National Institute of Standards and  
Technology (NIST)  
U. S. Department of Commerce  
Government Printing Office  
Washington, DC 20420
  
- H. EPA Environmental Protection Agency  
401 M St., SW  
Washington, DC 20460  
202-382-3949
  
- I. MIL-STD Military Standards/Standardization Division  
Office of the Assistant Secretary of Defense  
Washington, DC 20420
  
- J. NIST National Institute for Standards and Technology  
U. S. Department of Commerce  
Gaithersburg, MD 20234  
301-921-1000
  
- K. NEC National Electrical Code (by NFPA)
  
- L. NEMA National Electrical Manufacturer's Association  
2101 L Street, N.W.  
Washington, DC 20037
  
- M. NFPA National Fire Protection Association  
1 Batterymarch Park  
P.O. Box 9101  
Quincy, MA 02269-9101  
800-344-3555

N. NIOSH National Institutes for Occupational Safety and Health  
4676 Columbia Parkway  
Cincinnati, OH 45226  
513-533-8236

O. OSHA Occupational Safety and Health Administration  
U.S. Department of Labor  
Government Printing Office  
Washington, DC 20402

P. UL Underwriters Laboratory  
333 Pfingsten Rd.  
Northbrook, IL 60062  
312-272-8800

## 1.5 APPLICABLE CODES AND REGULATIONS

### 1.5.1 GENERAL APPLICABILITY OF CODES, REGULATIONS, AND STANDARDS

- A. All work under this contract shall be done in strict accordance with all applicable Federal, State, and local regulations, standards and codes governing asbestos abatement, and any other trade work done in conjunction with the abatement. All applicable codes, regulations and standards are adopted into this specification and will have the same force and effect as this specification.
- B. The most recent edition of any relevant regulation, standard, document or code shall be in effect. Where conflict among the requirements or with these specifications exists, the most stringent requirement(s) shall be utilized.
- C. Copies of all standards, regulations, codes and other applicable documents, including this specification and those listed in Section 1.5 shall be available at the worksite in the clean change area of the worker decontamination system.

### 1.5.2 ASBESTOS ABATEMENT MONITORING CONTRACTOR RESPONSIBILITY

The Contractor shall assume full responsibility and liability for compliance with all applicable Federal, State and Local regulations related to any and all aspects of the asbestos abatement monitoring project. The Contractor is responsible for providing and maintaining training, accreditations, medical exams, medical records, personal protective equipment (PPE) including respiratory protection including respirator fit testing, as required by applicable Federal, State and Local

regulations. The Contractor shall hold the VA and VPIH/CIH consultants harmless for any Contractor's failure to comply with any applicable work, packaging, transporting, disposal, safety, health, or environmental requirement on the part of himself, his employees, or his subcontractors. The Contractor will incur all costs of the CPIH/CIH, including all sampling/analytical costs to assure compliance with OSHA/EPA/State requirements related to failure to comply with the regulations applicable to the monitoring.

### 1.5.3 FEDERAL REQUIREMENTS

Federal requirements which govern of asbestos abatement include, but are not limited to, the following regulations.

#### A. Occupational Safety and Health Administration (OSHA)

1. Title 29 CFR 1926.1101 - Construction Standard for Asbestos
2. Title 29 CFR 1910 Subpart I - Personal Protective Equipment
3. Title 29 CFR 1910.134 - Respiratory Protection
4. Title 29 CFR 1926 - Construction Industry Standards
5. Title 29 CFR 1910.1020 - Access to Employee Exposure and Medical Records
6. Title 29 CFR 1910.1200 - Hazard Communication
7. Title 29 CFR 1910 Subpart K - Medical and First Aid

#### B. Environmental Protection Agency (EPA):

1. 40 CFR 61 Subpart A and M (Revised Subpart B) - National Emission Standard for Hazardous Air Pollutants - Asbestos.
2. 40 CFR 763.80 - Asbestos Hazard Emergency Response Act (AHERA)

#### C. Department of Transportation (DOT)

Title 49 CFR 100 - 185 - Transportation

### 1.5.4 STATE REQUIREMENTS

State requirements that apply to the asbestos abatement work, disposal, clearance, etc., include, but are not limited to, the following:

- NYSCR 56

#### 1.5.5 STANDARDS

- A. Standards which govern asbestos abatement activities include, but are not limited to, the following:
  - 1. American National Standards Institute (ANSI) Z9.2-79 - Fundamentals Governing the Design and Operation of Local Exhaust Systems and ANSI Z88.2 - Practices for Respiratory Protection.
  - 2. Underwriters Laboratories (UL) 586-90 - UL Standard for Safety of HEPA Filter Units, 7th Edition.
- B. Standards which govern the fire and safety concerns in abatement work include, but are not limited to, the following:
  - 1. National Fire Protection Association (NFPA) 241 - Standard for Safeguarding Construction, Alteration, and Demolition Operations.
  - 2. NFPA 701 - Standard Methods for Fire Tests for Flame Resistant Textiles and Film.
  - 3. NFPA 101 - Life Safety Code

#### 1.5.6 EPA GUIDANCE DOCUMENTS

- A. EPA guidance documents which discuss asbestos abatement work activities are listed below. These documents are made part of this section by reference. EPA publications can be ordered from (800) 424-9065.
- B. Guidance for Controlling ACM in Buildings (Purple Book) EPA 560/5-85-024
- C. Asbestos Waste Management Guidance EPA 530-SW-85-007
- D. A Guide to Respiratory Protection for the Asbestos Abatement Industry EPA-560-OPTS-86-001
- E. Guide to Managing Asbestos in Place (Green Book) TS 799 20T July 1990

#### 1.5.7 PRIOR TO COMMENCEMENT OF ABATEMENT WORK:

- A. Submit to the VA results of background air sampling; including location of samples, person who collected the samples, equipment utilized, calibration data and method of analysis. During abatement, submit to the VA, results of bulk material analysis and air sampling data collected during the course of the abatement.

This information shall not release the Contractor from any responsibility for OSHA compliance.

#### 1.5.8 PRE-CONSTRUCTION MEETING

Prior to commencing the monitoring, the Contractor shall meet with the VA. The pre-start meeting is to discuss and determine procedures to be used during the project. At this meeting, the Contractor shall provide at a minimum:

- A. Proof of Contractor licensing.
- B. Proof the Competent Person(s) is trained and accredited and approved for working in this State. Verification of the experience of the Competent Person(s) shall also be presented.
- C. A list of all workers who will participate in the project, including experience and verification of training and accreditation.
- D. A list of and verification of training for all personnel who have current first-aid/CPR training. A minimum of one person per shift must have adequate training.
- E. Current medical written opinions for all personnel working on-site meeting the requirements of 29 CFR 1926.1101 (m).
- F. Current fit-tests for all personnel wearing respirators on-site meeting the requirements of 29 CFR 1926.1101 (h) and Appendix C.
- G. Personal protective equipment to be used;
- H. At this meeting the Contractor shall provide all submittals as required.

#### 1.6 PROJECT COORDINATION

The following are the minimum administrative and supervisory personnel necessary for coordination of the work.

##### 1.6.1 PERSONNEL

- A. Administrative and supervisory personnel shall consist of a qualified Contractor Professional Industrial Hygiene Technicians and abatement monitors. These employees are the Contractor's representatives responsible for compliance with these specifications and all other applicable requirements.

B. Non-supervisory personnel shall consist of an adequate number of qualified personnel to meet the schedule requirements of the project. Personnel shall meet required qualifications. Personnel utilized on-site shall be pre-approved by the VA representative. A request for approval shall be submitted for any person to be employed during the project giving the person's name; social security number; qualifications; accreditation card with color picture; Certificate of Worker's Acknowledgment; and Affidavit of Medical Surveillance and Respiratory Protection and current Respirator Fit Test.

C. Minimum qualifications for Contractor and assigned personnel are:

1. The Contractor Professional Industrial Hygienist/CIH (CPIH/CIH) and/or Asbestos project monitor shall have five (5) years of monitoring experience and supervision of asbestos abatement projects; has participated as senior IH on five (5) abatement projects, three (3) of which are similar in size and complexity as this project; has developed at least one complete standard operating procedure for asbestos abatement; has trained abatement personnel for three (3) years; has specialized EPA AHERA/OSHA training in asbestos abatement management, respiratory protection, waste disposal and asbestos inspection; has completed the NIOSH 582 Course or equivalent, Contractor/Supervisor course; and has appropriate medical/respiratory protection records/documentation.
2. All personnel should be in compliance with OSHA construction safety training as applicable and submit certification.

## 1.7 RESPIRATORY PROTECTION

### 1.7.1 GENERAL - RESPIRATORY PROTECTION PROGRAM

The Contractor shall develop and implement a written Respiratory Protection Program (RPP) which is in compliance with the January 8, 1998 OSHA requirements found at 29 CFR 1926.1101 and 29 CFR 1910.Subpart I;134. ANSI Standard Z88.2-1992 provides excellent guidance for developing a respiratory protection program. All respirators used must be NIOSH approved for asbestos abatement activities. The written RPP shall, at a minimum, contain the basic requirements found at 29 CFR 1910.134 (c)(1)(i - ix) - Respiratory Protection Program.

### 1.7.2 RESPIRATORY PROTECTION PROGRAM COORDINATOR

The Respiratory Protection Program Coordinator (RPPC) must be identified and shall have two (2) years experience coordinating RPP of similar size and complexity. The RPPC must submit a signed statement attesting to the fact that the program meets the above requirements.

### 1.7.3 SELECTION AND USE OF RESPIRATORS

The procedure for the selection and use of respirators must be submitted to the VA as part of the Contractor's qualifications. The procedure must be written clearly enough for workers to understand. A copy of the Respiratory Protection Program must be available in the clean room of the decontamination unit for reference by employees or authorized visitors.

### 1.7.4 MINIMUM RESPIRATORY PROTECTION

Minimum respiratory protection shall be a full face powered air purifying respirator when fiber levels are maintained consistently at or below 0.5 f/cc. A higher level of respiratory protection may be provided or required, depending on fiber levels. Respirator selection shall meet the requirements of 29 CFR 1926.1101 (h); Table 1, except as indicated in this paragraph. Abatement personnel must have a respirator for their exclusive use.

### 1.7.5 MEDICAL WRITTEN OPINION

No employee shall be allowed to wear a respirator unless a physician or other licensed health care professional has provided a written determination they are medically qualified to wear the class of respirator to be used on the project while wearing whole body impermeable garments and subjected to heat or cold stress.

### 1.7.6 RESPIRATOR FIT TEST

All personnel wearing respirators shall have a current qualitative/quantitative fit test which was conducted in accordance with 29 CFR 1910.134 (f) and Appendix A. Quantitative fit tests shall be done for PAPRs which have been put into a motor/blower failure mode.

### 1.7.7 RESPIRATOR FIT CHECK

The Competent Person shall assure that the positive/negative pressure user seal check is done each time the respirator is donned by an employee. Head coverings must cover respirator head straps. Any situation that prevents an effective facepiece to face seal as evidenced by failure of a user seal check shall preclude that person from wearing a respirator inside the regulated area until resolution of the problem.

#### 1.7.8 MAINTENANCE AND CARE OF RESPIRATORS

The Respiratory Protection Program Coordinator shall submit evidence and documentation showing compliance with 29 CFR 1910.134 (h) Maintenance and Care of Respirators.

#### 1.8 WORKER PROTECTION

##### 1.8.1 MEDICAL EXAMINATIONS

Medical examinations meeting the requirements of 29 CFR 1926.1101 (m) shall be provided for all personnel working in the regulated area, regardless of exposure levels. A current physician's written opinion as required by 29 CFR 1926.1101 (m)(4) shall be provided for each person and shall include in the medical opinion the person has been evaluated for working in a heat and cold stress environment while wearing personal protective equipment (PPE) and is able to perform the work without risk of material health impairment.

##### 1.8.2 REGULATED AREA ENTRY PROCEDURE

Each time workers enter the regulated area; workers remove ALL street clothes in the clean room of the decontamination unit and put on new disposable coveralls, head coverings, a clean respirator, and then proceed through the shower room to the equipment room where they put on non-disposable required personal protective equipment.

##### 1.8.3 DECONTAMINATION PROCEDURE

All personnel will adhere to following decontamination procedures whenever they leave the regulated area.

- A. When exiting the regulated area, remove disposable coveralls, and ALL other clothes, disposable head coverings, and foot coverings or boots in the equipment room.
- B. Still wearing the respirator and completely naked, proceed to the shower. Showering is MANDATORY. Care must be taken to follow reasonable procedures in removing the respirator to avoid inhaling asbestos fibers while showering. The following procedure is required as a minimum:
  1. Thoroughly wet body including hair and face. If using a PAPR hold blower above head to keep filters dry.
  2. With respirator still in place, thoroughly decontaminate body, hair, respirator face piece, and all other parts of the

respirator except the blower and battery pack on a PAPR. Pay particular attention to cleaning the seal between the face and respirator facepiece and under the respirator straps.

3. Take a deep breath, hold it and/or exhale slowly, completely wetting hair, face, and respirator. While still holding breath, remove the respirator and hold it away from the face before starting to breathe.
- C. Carefully decontaminate the facepiece of the respirator inside and out. If using a PAPR, shut down using the following sequence: a) first cap inlets to filters; b) turn blower off to keep debris collected on the inlet side of the filter from dislodging and contaminating the outside of the unit; c) thoroughly decontaminate blower and hoses; d) carefully decontaminate battery pack with a wet rag being cautious of getting water in the battery pack thus preventing destruction. (THIS PROCEDURE IS NOT A SUBSTITUTE FOR RESPIRATOR CLEANING!)
- D. Shower and wash body completely with soap and water. Rinse thoroughly.
- E. Rinse shower room walls and floor to drain prior to exiting.
- F. Proceed from shower to clean room; dry off and change into street clothes or into new disposable work clothing.

#### 1.8.4 REGULATED AREA REQUIREMENTS

Requirements for regulated areas at 29 CFR 1926.1101 (e) are to be met. All personnel in the regulated area shall not be allowed to eat, drink, smoke, chew tobacco or gum, apply cosmetics, or in any way interfere with the fit of their respirator.

### 1.9 DECONTAMINATION FACILITIES

#### 1.9.1 DESCRIPTION

Utilize provided separate personnel decontamination facilities (PDF) and waste/equipment decontamination facilities (W/EDF). Use these as the only means of ingress and egress to the regulated area and that all equipment, bagged waste, and other material exit the regulated area only through the W/EDF.

#### 1.9.2 GENERAL REQUIREMENTS

All personnel entering or exiting a regulated area must go through the PDF and shall follow the requirements at 29 CFR 1926.1101 (j)(1) and these specifications. All waste, equipment

and contaminated materials must exit the regulated area through the W/EDF and be decontaminated in accordance with these specifications.

## PART 2 - PRODUCTS, MATERIALS AND EQUIPMENT

### 2.1 MATERIALS AND EQUIPMENT

#### 2.1.1 GENERAL REQUIREMENTS

- A. The Contractor shall not block or hinder use of buildings by patients, staff, and visitors to the VA in partially occupied buildings by placing materials/equipment in any unauthorized location.
- B. Adequate and appropriate PPE for the monitoring and number of personnel/shifts shall be provided. All personal protective equipment issued must be based on a written hazard assessment conducted under 29 CFR 1910.132(d).

### 2.2 MONITORING, INSPECTION AND TESTING

#### 2.2.1 GENERAL

- A. Perform the necessary monitoring, inspection, testing, and other support services to ensure that VA patients, employees, and visitors will not be adversely affected by the abatement work, and that the abatement work proceeds in accordance with these specifications, that the abated areas or abated buildings have been successfully decontaminated.
- B. If fibers counted during abatement work, either inside or outside the regulated area, utilizing the NIOSH 7400 air monitoring method, notify the government immediately so that work can be stopped.

#### 2.2.2 SCOPE OF SERVICES

- A. The purpose of the work of the contractor is to: assure quality; adherence to the specification; resolve problems; prevent the spread of contamination beyond the regulated area; and assure clearance at the end of the project. In addition, their work includes performing the final inspection and testing to determine whether the regulated area or building has been adequately decontaminated. All air monitoring is to be done utilizing PCM/TEM. The contractor will perform the following tasks:

1. Task 1: Establish background levels before abatement begins by collecting background samples. Retain samples for possible TEM analysis.
  2. Task 2: Perform continuous air monitoring, inspection, and testing outside the regulated area during actual abatement work to detect any faults in the regulated area isolation and any adverse impact on the surroundings from regulated area activities.
  3. Task 3: Perform unannounced visits to spot check overall compliance of work with contract/specifications. These visits may include any inspection, monitoring, and testing inside and outside the regulated area and all aspects of the operation except personnel monitoring.
  4. Task 4: Provide support to the VA representative such as evaluation of submittals from the Contractor, resolution of conflicts, interpret data, etc.
  5. Task 5: Perform, in the presence of the VA representative, final inspection and testing of a decontaminated regulated area at the conclusion of the abatement to certify compliance with all regulations and VA requirements/specifications.
  6. Task 6: Issue certificate of decontamination for each regulated area and project report.
- B. All documentation, inspection results and testing results generated by the VPIH/CIH will be available to the government/contractor for information and consideration.
- C. The monitoring and inspection results of the VPIH/CIH will be used by the VA to issue any Stop Removal orders to the Contractor during abatement work and to accept or reject a regulated area or building as decontaminated.

## 2.3 SUBMITTALS

### 2.3.1 PRE-START MEETING SUBMITTALS

Submit to the VA a maximum of 14 days after project award.

- A. Submit a detailed work schedule for the entire project including all monitoring, testing, and inspection.
- B. Submit a staff organization chart showing all personnel who will be working on the project and their capacity/function. Provide their qualifications, training, accreditations, and licenses, as appropriate. Provide a copy of the "Certificate of Worker's Acknowledgment" and the "Affidavit of Medical Surveillance and Respiratory Protection" for each person.

- C. Submit the specifics of the materials and equipment to be used for this project with manufacturer names, model numbers, performance characteristics, pictures/diagrams, and number available for the following, but not limited to:
1. Air monitoring pumps and calibration devices
  2. Respirators, protective clothing, personal protective equipment.
- D. Submit required notifications and arrangements made with regulatory agencies having regulatory jurisdiction and the specific contingency/emergency arrangements made with local health, fire, ambulance, hospital authorities and any other notifications/arrangements.
- E. Submit the name, location and verification of the laboratory and/or personnel to be used for analysis of air and/or bulk samples. Personal air monitoring must be done in accordance with OSHA 29 CFR 1926.1101(f) and Appendix A. Area or clearance air monitoring shall be conducted in accordance with EPA AHERA protocols.
- F. Submit information on personnel: Provide a resume; address each item completely; copies of certificates, accreditations, and licenses. Submit an affidavit signed by the CPIH/CIH stating that all personnel submitted below have medical records in accordance with OSHA 29 CFR 1926.1101(m) and 29 CFR 1910.20 and that the company has implemented a medical surveillance program and written respiratory protection program, and maintains recordkeeping in accordance with the above regulations. Submit the phone number and doctor/clinic/hospital used for medical evaluations.
1. CPIH/CIH and IH Technician and/or Air Monitor: Name; years of abatement experience; list of projects similar to this one; certificates, licenses, accreditations for proof of AHERA/OSHA specialized asbestos training; professional affiliations; number of workers trained; samples of training materials; samples of AHAPs developed; medical opinion; and current respirator fit test.
  2. Workers: Numbers; names; social security numbers; years of abatement experience; certificates, licenses, accreditations; training courses in asbestos abatement and respiratory protection; medical opinion (asbestos surveillance and respirator use); and current respirator fit test.
- H. Submit copies of State license for asbestos abatement project and air monitoring; copy of insurance policy, including exclusions with a letter from agent stating in plain language the coverage provided and the fact that asbestos abatement activities are covered by the policy; copy of AHAPs incorporating the

requirements of this specification; information on who provides your training, how often; who provides medical surveillance, how often; who performs and how is personal air monitoring of abatement workers conducted; a list of references of independent laboratories/IH's familiar with your air monitoring and standard operating procedures; and copies of monitoring results of the five referenced projects listed and analytical method(s) used.

#### 2.3.2 SUBMITTALS DURING ABATEMENT

- A. The Contractor shall maintain and submit a daily log documenting the dates and times of the following: attendees and summary of meetings; and representative air monitoring and results/TWA's/EL's. Submit this information daily to the government.
- B. The contractor shall document and maintain the inspection of the regulated area preparation prior to start of work and daily during work.

#### 2.3.3 SUBMITTALS AT COMPLETION OF ABATEMENT

The contractor shall submit a project report consisting of the daily log book requirements and documentation of events during the abatement project. The report shall include a certificate of completion, signed and dated by the CPIH/CIH, in accordance with Attachment #1. All clearance and perimeter area samples must be submitted. The VA Representative will retain the abatement report after completion of the project and provide copies of the abatement report to VAMC Office of Engineer and the Safety Office.

### PART 3 - EXECUTION

#### 3.1. SANITARY FACILITIES

The Contractor shall utilize only provided sanitary facilities for personnel.

#### 3.2 PERSONAL PROTECTIVE EQUIPMENT

Provide whole body clothing, head coverings, gloves and foot coverings and any other personal protective equipment as determined by conducting the hazard assessment required by OSHA at 29 CFR 1910.132 (d). The Competent Person shall ensure the

integrity of personal protective equipment worn for the duration of the project. Duct tape shall be used to secure all suit sleeves to wrists and to secure foot coverings at the ankle.

### 3.3 PROJECT DECONTAMINATION

#### 3.3.1 GENERAL

A. The entire work related to project decontamination shall be performed under the close supervision and monitoring of the contractor.

#### 3.3.2 REGULATED AREA CLEARANCE

Clearance air testing and other requirements which must be met before release of the Contractor and re-occupancy of the regulated area space are specified in Final Testing Procedures.

#### 3.3.3 PRE-CLEARANCE INSPECTION AND TESTING

The contractor will perform a thorough and detailed visual inspection at the end of the cleaning to determine whether there is any visible residue in the regulated area. If the visual inspection is acceptable, the CPIH/CIH will perform pre-clearance sampling using aggressive clearance as detailed in 40 CFR 763 Subpart E (AHERA) Appendix A (III)(B)(7)(d). If the sampling results show values below 0.01 f/cc, then the Contractor shall notify the VA's representative of the results with a brief report from the CPIH/CIH documenting the inspection and sampling results and a statement verifying that the regulated area is ready for lockdown encapsulation. The VA reserves the right to utilize their own VPIH/CIH to perform a pre-clearance inspection and testing for verification.

### 3.4 FINAL VISUAL INSPECTION AND AIR CLEARANCE TESTING

#### 3.4.1 FINAL VISUAL INSPECTION

Final visual inspection will include the entire regulated area, the PDF, all poly sheeting, seals over HVAC openings, doorways, windows, and any other openings. If any debris, residue, dust or any other suspect material is detected, the final cleaning shall be repeated at no cost to the VA. Dust/material samples may be collected and analyzed at no cost to the VA to confirm visual findings. When the regulated area is visually clean the final testing can be done.

### 3.4.2 FINAL AIR CLEARANCE TESTING

- A. After an acceptable final visual inspection by the contractor and VA Representative, the contractor will perform the final clearance testing. Air samples will be collected and analyzed in accordance with procedures for AHERA in this specification. If work is less than 260 lf/160 sf/35 cf, 5 PCM samples shall be collected for clearance and a minimum of one field blank. If work is equal to or more than 260 lf/160 sf/35 cf, AHERA TEM sampling shall be performed for clearance. TEM analysis shall be done in accordance with procedures for EPA AHERA in this specification. If the release criteria are not met, the Contractor shall repeat the final cleaning and continue decontamination procedures until clearance is achieved. All Additional inspection and testing costs will be borne by the Contractor.
- B. If release criteria are met, proceed to perform the abatement closeout and to issue the certificate of completion in accordance with these specifications.

### 3.4.3 FINAL AIR CLEARANCE PROCEDURES

- A. Contractor's Release Criteria: Work in a regulated area is complete when the regulated area is visually clean and airborne fiber levels have been reduced to or below 0.01 f/cc as measured by the AHERA PCM protocol, or 70 AHERA structures per square millimeter (s/mm<sup>2</sup>) by AHERA TEM.
- B. Air Monitoring and Final Clearance Sampling: To determine if the elevated airborne fiber counts encountered during abatement operations have been reduced to the specified level, the contractor will secure samples and analyze them according to the following procedures:
  - 1. Fibers Counted: "Fibers" referred to in this section shall be either all fibers regardless of composition as counted in the NIOSH 7400 PCM method or asbestos fibers counted using the AHERA TEM method.
  - 2. Aggressive Sampling: All final air testing samples shall be collected using aggressive sampling techniques except where soil is not encapsulated or enclosed. Samples will be collected on 0.8 $\mu$  MCE filters for PCM analysis and 0.45 $\mu$  Polycarbonate filters for TEM. A minimum of 1200 Liters of using calibrated pumps shall be collected for clearance samples. Before pumps are started, initiate aggressive air mixing sampling as detailed in 40 CFR 763 Subpart E (AHERA) Appendix A (III)(B)(7)(d). Air samples will be collected in areas subject to normal air circulation away from corners, obstructed locations, and locations near windows, doors, or vents. After air sampling pumps have been shut off, circulating fans shall be shut off. The negative pressure system shall continue to operate.

3. Final clearance for soil that is not encapsulated, samples will be collected on 0.8 $\mu$  MCE filters for PCM analysis and 0.45 $\mu$  Polycarbonate filters for TEM. A minimum of 1200 Liters of using calibrated pumps shall be collected for clearance samples. Air clearance of work areas where contaminated soil has been removed is in addition to the requirement for clearance by bulk sample analysis discussed within these specifications. There will be no aggressive air sampling for the clearance of soil due to the fact that aggressive air sampling may overload the cassettes.
4. Random samples shall be collected from areas of soil which have been abated to ensure that the soil has been properly decontaminated. The total number of samples to be collected from the soil areas shall be; <1000 SF of soil - 3 samples; >1000 to <5000 SF of soil - 5 samples; and >5000 SF of soil - 7 samples. The soil samples shall be collected in a statistically random manner and shall be analyzed by PLM method. The clearance level to determine the soil clean is <1% asbestos by weight as analyzed by PLM method. If this level is achieved, the soil areas shall be considered clear. If the levels are >1% asbestos, the areas shall be re-cleaned until the sample results are <1%.

#### 3.4.4 CLEARANCE SAMPLING USING PCM - LESS THAN 260LF/160SF:

- A. The contractor will perform clearance samples as indicated by the specification.
- B. The NIOSH 7400 PCM method will be used for clearance sampling with a minimum collection volume of 1200 Liters of air. A minimum of 5 PCM clearance samples shall be collected. All samples must be equal to or less than 0.01 f/cc to clear the regulated area.
- C. Random samples shall be collected from areas of soil which have been abated to ensure that the soil has been properly decontaminated. The total number of samples to be collected from the soil areas shall be; <1000 SF of soil - 3 samples; >1000 to <5000 SF of soil - 5 samples; and >5000 SF of soil - 7 samples. The soil samples shall be collected in a statistically random manner and shall be analyzed by PLM method. The clearance level to determine the soil clean is <1% asbestos by weight as analyzed by PLM method. If this level is achieved, the soil areas shall be considered clear. If the levels are >1% asbestos, the areas shall be re-cleaned until the sample results are <1%.

#### 3.4.5 CLEARANCE SAMPLING USING TEM - EQUAL TO OR MORE THAN 260LF/160SF: TEM

- A. Clearance requires 13 samples be collected; 5 inside the regulated area; 5 outside the regulated area; and 3 field blanks.
- B. The TEM method will be used for clearance sampling with a minimum collection volume of 1200 Liters of air. A minimum of 13 clearance samples shall be collected. All samples must be equal to or less than 70 AHERA structures per square millimeter (s/mm<sup>2</sup>) AHERA TEM.

#### 3.4.6 LABORATORY TESTING OF PCM CLEARANCE SAMPLES

The services of an AIHA accredited laboratory will be employed by the contractor to perform analysis for the PCM air samples. The accredited laboratory shall be successfully participating in the AIHA Proficiency Analytical Testing (PAT) program. Samples will be sent daily by the VPIH/CIH so that verbal/faxed reports can be received within 24 hours. A complete record, certified by the laboratory, of all air monitoring tests and results will be furnished to the VA's representative and the Contractor.

#### 3.4.7 LABORATORY TESTING OF TEM SAMPLES

Samples shall be sent by the contractor to a NIST accredited laboratory for analysis by TEM. The laboratory shall be successfully participating in the NIST Airborne Asbestos Analysis (TEM) program. Verbal/faxed results from the laboratory shall be available within 24 hours after receipt of the samples. A complete record, certified by the laboratory, of all TEM results shall be furnished to the VA's representative and the Contractor.

#### 3.4.8 LABORATORY TESTING OF BULK SAMPLES

Samples shall be sent by the contractor to a NIST accredited laboratory for analysis by PLM. The laboratory shall be successfully participating in the NIST Bulk Asbestos Analysis (PLM) program. Verbal/faxed results from the laboratory shall be available within 24 hours after receipt of the samples. A complete record, certified by the laboratory, of all TEM results shall be furnished to the VA's representative and the Contractor.

### 3.5 ABATEMENT CLOSEOUT AND CERTIFICATE OF COMPLIANCE

#### 3.5.1 CERTIFICATE OF COMPLETION BY CONTRACTOR

The contractor shall complete and sign the "Certificate of Completion" in accordance with Attachment 1 at the completion of the abatement and decontamination of the regulated area.

### 3.5.2 WORK SHIFTS

Work shall primarily be done during administrative hours (8:00 AM to 4:30 PM) Monday -Friday excluding Federal Holidays. Off-hour work may be required at the COR's discretion. Any change in the work schedule must be approved in writing by the VA Representative.

ATTACHMENT #1  
CERTIFICATE OF COMPLETION

DATE: \_\_\_\_\_ VA Project #: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_ Abatement Contractor: \_\_\_\_\_

VAMC/ADDRESS: \_\_\_\_\_

1. I certify that I have personally inspected, monitored and supervised the abatement work of (specify regulated area or Building):  
  
which took place from    /    /            to    /    /
2. That throughout the work all applicable requirements/regulations and the VA's specifications were met.
3. That any person who entered the regulated area was protected with the appropriate personal protective equipment and respirator and that they followed the proper entry and exit procedures and the proper operating procedures for the duration of the work.
4. That all employees of the Abatement Contractor engaged in this work were trained in respiratory protection, were experienced with abatement work, had proper medical surveillance documentation, were fit-tested for their respirator, and were not exposed at any time during the work to asbestos without the benefit of appropriate respiratory protection.
5. That I performed and supervised all inspection and testing specified and required by applicable regulations and VA specifications.
6. That the conditions inside the regulated area were always maintained in a safe and healthy condition and the maximum fiber count never exceeded 0.5 f/cc, except as described below.
7. That all abatement work was done in accordance with OSHA requirements and the manufacturer's recommendations.

CPIH/CIH Signature/Date: \_\_\_\_\_

CPIH/CIH Print Name: \_\_\_\_\_

Abatement Contractor Signature/Date: \_\_\_\_\_

Abatement Contractor Print Name: \_\_\_\_\_

ATTACHMENT #2

CERTIFICATE OF WORKER'S ACKNOWLEDGMENT

PROJECT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

ABATEMENT CONTRACTOR'S NAME: \_\_\_\_\_

WORKING WITH ASBESTOS CAN BE HAZARDOUS TO YOUR HEALTH. INHALING ASBESTOS HAS BEEN LINKED WITH VARIOUS TYPES OF CANCERS. IF YOU SMOKE AND INHALE ASBESTOS FIBERS, YOUR CHANCES OF DEVELOPING LUNG CANCER IS GREATER THAN THAT OF THE NON-SMOKING PUBLIC.

Your employer's contract with the owner for the above project requires that: You must be supplied with the proper personal protective equipment including an adequate respirator and be trained in its use. You must be trained in safe and healthy work practices and in the use of the equipment found at an asbestos abatement project. You must receive/have a current medical examination for working with asbestos. These things shall be provided at no cost to you. By signing this certificate you are indicating to the owner that your employer has met these obligations.

RESPIRATORY PROTECTION: I have been trained in the proper use of respirators and have been informed of the type of respirator to be used on the above indicated project. I have a copy of the written Respiratory Protection Program issued by my employer. I have been provided for my exclusive use, at no cost, with a respirator to be used on the above indicated project.

TRAINING COURSE: I have been trained by a third party, State/EPA accredited trainer in the requirements for an AHERA/OSHA Asbestos Abatement Worker training course, 32 hours minimum duration. I currently have a valid State accreditation certificate. The topics covered in the course include, as a minimum, the following:

- Physical Characteristics and Background Information on Asbestos
- Potential Health Effects Related to Exposure to Asbestos
- Employee Personal Protective Equipment
- Establishment of a Respiratory Protection Program
- State of the Art Work Practices
- Personal Hygiene
- Additional Safety Hazards
- Medical Monitoring
- Air Monitoring
- Relevant Federal, State and Local Regulatory Requirements, Procedures, and Standards
- Asbestos Waste Disposal

MEDICAL EXAMINATION: I have had a medical examination within the past 12 months which was paid for by my employer. This examination included: health history, occupational history, pulmonary function test, and may have included a chest x-ray evaluation. The physician issued a positive written opinion after the examination.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Witness: \_\_\_\_\_

ATTACHMENT #3

AFFIDAVIT OF MEDICAL SURVEILLANCE, RESPIRATORY PROTECTION AND TRAINING/ACCREDITATION

VA PROJECT NAME AND NUMBER: \_\_\_\_\_

VA MEDICAL FACILITY: \_\_\_\_\_

ABATEMENT CONTRACTOR'S NAME AND ADDRESS: \_\_\_\_\_

1. I verify that the following individual

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

who is proposed to be employed in asbestos abatement work associated with the above project by the named Abatement Contractor, is included in a medical surveillance program in accordance with 29 CFR 1926.1101(m), and that complete records of the medical surveillance program as required by 29 CFR 1926.1101(m)(n) and 29 CFR 1910.20 are kept at the offices of the Abatement Contractor at the following address.

Address: \_\_\_\_\_

2. I verify that this individual has been trained, fit-tested and instructed in the use of all appropriate respiratory protection systems and that the person is capable of working in safe and healthy manner as expected and required in the expected work environment of this project.

3. I verify that this individual has been trained as required by 29 CFR 1926.1101(k). This individual has also obtained a valid State accreditation certificate. Documentation will be kept on-site.

4. I verify that I meet the minimum qualifications criteria of the VA specifications for a CPIH.

Signature of CPIH/CIH: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of CPIH/CIH: \_\_\_\_\_

Signature of Contractor: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Contractor: \_\_\_\_\_

ATTACHMENT #4

ABATEMENT CONTRACTOR/COMPETENT PERSON(S) REVIEW AND ACCEPTANCE OF THE VA'S ASBESTOS SPECIFICATIONS

VA Project Location: \_\_\_\_\_

VA Project #: \_\_\_\_\_

VA Project Description: \_\_\_\_\_

This form shall be signed by the Asbestos Abatement Contractor Owner and the Asbestos Abatement Contractor's Competent Person(s) prior to any start of work at the VA related to this Specification. If the Asbestos Abatement Contractor's/Competent Person(s) has not signed this form, they shall not be allowed to work on-site.

I, the undersigned, have read VA's Asbestos Specification regarding the asbestos abatement requirements. I understand the requirements of the VA's Asbestos Specification and agree to follow these requirements as well as all required rules and regulations of OSHA/EPA/DOT and State/Local requirements. I have been given ample opportunity to read the VA's Asbestos Specification and have been given an opportunity to ask any questions regarding the content and have received a response related to those questions. I do not have any further questions regarding the content, intent and requirements of the VA's Asbestos Specification.

At the conclusion of the asbestos abatement, I will certify that all asbestos abatement work was done in accordance with the VA's Asbestos Specification and all ACM was removed properly and no fibrous residue remains on any abated surfaces.

Abatement Contractor Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Abatement Contractor Competent Person(s) \_\_\_\_\_ Date \_\_\_\_\_

-- END--