

BID FORMS AND SPECIFICATIONS
FOR THE
ASBESTOS ABATEMENT OF ONE RESIDENTIAL
STRUCTURE

104 West Second Street (79.14-2-72)

CITY OF DUNKIRK DEPARTMENT HOUSING, ZONING AND BUILDING



BIDS DUE: [March 26th, 2024, 10:00 A.M. EST](#)

Dunkirk City Clerk's Office
City Hall, 342 Central Avenue, Dunkirk, New York 14048

INCLUDED IN THIS PACKAGE

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AVAILABLE BY REQUEST OR BY GOING TO WWW.CITYOFDUNKIRK.COM/BIDDOCS

- SAMPLE CITY OF DUNKIRK CONTRACT
- CITY OF DUNKIRK STANDARD INSURANCE CERTIFICATE
- APPENDIX A – MWBE REQUIREMENTS

SHOULD ANY OF THE ABOVE DOCUMENTS OR PAGES BE OMITTED, PLEASE CONTACT THE HOUSING, ZONING AND BUILDING OFFICE 716-366-9858 FOR INFORMATION.

NOTICE TO BIDDERS

Sealed bids will be received at the office of the City Clerk, City Hall, Dunkirk, New York no later than **10:00 A.M. EST on March 26, 2024** and publicly opened at that time for the ASBESTOS ABATEMENT of the following RESIDENTIAL STRUCTURE:

104 West Second Street (79.14-2-72)

Bids will be used by the City of Dunkirk, New York in accordance with specifications to be procured from the Housing, Building, Zoning Office, City Hall, 342 Central Avenue, Dunkirk, New York 14048. Specifications and other contract documents may be obtained or examined at the Housing, Building, Zoning Office City Hall, 342 Central Avenue, Dunkirk, New York 14048. Asbestos Sampling Reports are included in the packet for your review.

The City reserves the right to waive any informality, accept the bid deemed most favorable to the City or to reject any or all bids.

Each bidder must deposit with this bid a bid bond or certified check in an amount as outlined in the specifications and instructions.

Adv. March 12, 13 ,14 2024

Lillian Divine
City Clerk

INSTRUCTIONS TO BIDDERS

1. **Sealed bids shall be addressed in care of the City Clerk, 342 Central Avenue, City Hall, Dunkirk, New York 14048 with the item or items bid upon so stated on the outside of the sealed envelope "Asbestos Abatement of 104 W. Second Street". All envelopes shall have a return address identifying the Bidder.**
2. **Please indicate an estimate of days that air monitoring be utilized under "Additional Information" item number five (5).**
3. Bids shall be submitted on the Proposal Sheet provided with these specifications.
4. Non-Collusive Certificate must be completed, signed, and returned with the Proposal Sheet.
5. Vendor Responsibility Questionnaire must be completed, signed, and returned with the Proposal Sheet.
6. Unless otherwise provided, all bids shall be submitted on the forms provided. Unsolicited bids not conforming to the specifications or forms shall not be considered.
7. The City of Dunkirk reserves the right to accept or reject any and all bids and award the contract to the bidder deemed most favorable to the City. The City of Dunkirk shall be the sole judge of all equivalencies.
8. Cost of the asbestos abatement shall conform to the specification documents provided.
9. If there are any questions concerning these specifications, please contact the Housing, Building and Zoning Office, City Hall, Central Avenue, Dunkirk, NY 14048 or telephone (716) 366-9858.
10. Each proposal must be accompanied by a certified check or bid bond in the amount of five percent (5%) of the bid for those items bid upon. Such certified check or bid bond is to be made payable to the City Clerk of the City of Dunkirk, New York and is to be held as a guarantee that in the event the bid is accepted and a contract awarded to the bidder, the contract will be duly executed and its performance properly secured. In default thereof, said guarantee will be forfeited to the City of Dunkirk as liquidated damages.
11. The successful Bidder shall be required to execute a City "AGREEMENT FOR SERVICES/MATERIALS" contract upon City acceptance, a copy of which is provided herein. The bidder shall conform to the "ADDITIONAL TERMS AND CONDITIONS" contained on the Agreement form.
12. The successful Bidder, upon City acceptance, shall provide the City Attorney insurance as required, naming the City of Dunkirk as additional insured. The City's "STANDARD INSURANCE CERTIFICATE" is provided herein. The standard form shall be filled out by the insurer and be submitted to the City Attorney for approval. For this bid, Vendor Classification "A" shall apply.
13. Iran Divestment Act - By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each bidder is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law.

ADDITIONAL INFORMATION

1. The work performed herein involves the City's participation with the Community Development Block Grant including, in whole or in part, funding received by and through the State of New York Office of the Attorney General ("OAG") and the OAG's Community Revitalization initiatives, as well as the Chautauqua County Land Bank. All work and required reporting shall be undertaken in conformance with such program and all requirements contained in the agreement by and between this Community Development Block Grant, Chautauqua County Land Bank and this City, including any and all attachments, exhibits and appendices, which are specifically incorporated herein by reference. A copy is available through the City's Housing, Building and Zoning Officers.
2. Under New York State Labor Law, contractors and subcontractors must pay the prevailing wage rate and supplements (fringe benefits) to all workers under a public work contract. Employers must pay the prevailing wage rate set for the locality where the work is performed. Prevailing wage is the pay rate set by law for work on public work projects. Contractor shall comply with all requirements as set forth in the Prevailing Wage Schedule for the Prevailing Rate Case Number (PRC) provided. Contractor must also provide the projected start date and completion date on the state's PW-16 form that must be submitted by the City of Dunkirk to the New York State Department of Labor. The contractor also agrees to supply certified payroll documents for all employees to the City of Dunkirk by U.S. mail upon completion of the contracted work, to assure compliance with state prevailing wage regulations. Documentation must be provided prior to final payment of invoices submitted.
3. All work shall be performed in strict conformance with applicable federal, state and local rules, laws, and regulations.
4. Bid price shall be good for one (1) calendar year commencing on the date of the bid of the bid year.
5. For air monitoring purposes the abatement shall be completed within ____ days of commencement. The contractor shall be responsible for additional air monitoring costs if abatement exceeds the days agreed to above.
6. Successful bidders are required to provide a qualified representative to provide on-site progress to the Housing, Building and Zoning Officers.
7. The Housing, Zoning and Building Inspectors shall be notified of the beginning and the completion of the abatement of each structure.
8. Completion of this project shall be done no later than 90 days after execution of agreement of services, subject to *force majeure* conditions, issues and/or incidents.

CITY OF DUNKIRK HOUSING, BUILDING AND ZONING OFFICE
OFFICIAL BID FORM

Asbestos Abatement of ONE Residential Structure

This is to certify that I have read the attached bidding documents completely, have inspected the site and that the work to be furnished will meet or exceed the attached specifications.

104 West Second Street

\$_____.00

**TOTAL COST ASBESTOS ABATEMENT
OF ONE STRUCTURE**

\$_____.00

BID DEPOSITS: *Computation of Bid Deposits shall be 5% of the total of the Estimated Total Cost column for those items thereon.*

COMPANY NAME_____

AUTHORIZED SIGNATURE: _____

TITLE: _____

ADDRESS: _____

EMAIL: _____

TELEPHONE NO.: _____

CELL PHONE NO:_____

FAX NO.: _____

DATE: _____

NON-COLLUSIVE FORM

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of knowledge and belief:

1. The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor; and
2. Unless otherwise required by law, the prices which have been quoted in the bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and
3. No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

Name of Corporation

By: _____
Title

Partnership

By: _____
Partner

Individual

Signature

Date: _____

LEGAL STATUS INFORMATION

To facilitate correct drawing and execution of the contract, bidder shall supply full information concerning legal status:

FIRM NAME: _____

PRINCIPAL OFFICE:

Street _____

City, State, Zip _____

Telephone (____) _____ Fax (____) _____

LOCAL OFFICE (if any):

Street _____

City, State, Zip _____

Telephone (____) _____ Fax (____) _____

CONTRACT TO BE SENT TO: Principal Office ☐ Local Office ☐

CHECK ONE: Corporation ☐ Partnership ☐ Individual ☐

(Incorporated under the Laws of the State of _____)

(If foreign corporation, state if authorized to do business in the State of New York: ☐ Yes ☐ No

☐ Not Applicable)

TRADE NAMES: _____

NAMES AND ADDRESSES OF PARTNERS:

NAME, TITLE AND ADDRESS OF PERSON AUTHORIZED TO SIGN CONTRACT ON BEHALF OF THE BIDDER:

Name: _____

Title: _____

Address: _____

ADDITIONAL TERMS AND CONDITIONS

1. **Payment.** Payment shall be made upon submission by Vendor to City of a properly executed and itemized City claim voucher in form and content approved by the City Department Head or the Department Head's authorized subordinate, and accompanied by such fiscal records and documentation as may be reasonably requested.
2. **Termination.** This Agreement can be terminated immediately in the event Vendor fails to comply with sections 4, 5, 6, and 8 hereof.
3. **Guarantee.** The Vendor shall fully guarantee the quality and workmanship of the services or goods provided and shall represent and warrant that such goods or services meet or exceed all applicable industry standards.
4. **Insurance.** The Vendor shall secure and maintain in full force and effect liability and casualty insurance of at least \$1 million or such other liability coverage as accepted by the City Law Department. Unless City otherwise agrees in writing, the City shall be named as additional insured for purposes of coverage but not for payment of premium. Vendor shall file a copy of its certificate of insurance with the City Clerk prior to performing this Agreement or receiving any payment thereunder. All certificates of insurance shall provide that the City be given at least thirty (30) days advance written notice of any intent to cancel coverage.
5. **Statutory Compliance.** The Vendor shall perform in accordance with all federal, state and local laws, rules and regulations, including without limitation any applicable provisions of Article 8 of the Labor Law of the State of New York. All statutory provisions applicable to this Agreement are hereby incorporated by reference. Vendor shall provide at their expense all permits or licenses for the performance of this Agreement and shall be solely responsible for paying any fines or penalties incurred as a result of any improper services.
6. **Non-discrimination.** The Vendor will not discriminate or permit discrimination against any individual or group on the grounds of age, race, creed, color, national origin, sex, religion, disability or marital status.
7. **Records.** The Vendor shall prepare and maintain in an orderly manner all relevant records and documents relating to the goods or services provided hereunder. All books and records of the Vendor shall be available upon request for inspection and/or audit by the City during the term hereof and for a period of three (3) years thereafter.
8. **Assignment.** The Vendor shall not assign, transfer, convey, sublet or otherwise dispose of this Agreement or any right, title or interest therein, or the power to execute this Agreement, without the prior written consent of the City.
9. **Amendments.** No waiver, modification or amendment of this Agreement or any part thereof shall be valid unless in writing and duly executed by both parties. A waiver of any breach hereof shall not prevent forfeiture for any succeeding breach.
10. **Force Majeure.** Except as otherwise expressly set forth in this Agreement, in the event either party hereto shall be delayed or hindered in, or prevented from, the performance of any act (other than the payment of money) required hereunder by reason of strikes, lock-outs, labor troubles, inability to procure materials, failure of power, riots, insurrection, pandemics, war or other reasons of a like nature not the fault of the party delayed in performing work or doing acts required under this Agreement (all of such reasons or causes referred to in this Agreement as "force majeure"), then performance of such acts shall be excused for the period of the delay, and the period within which the performance of such act may be required hereunder shall be extended by a period equal to the period of such delay.
11. **Entire Agreement.** This Agreement, including all documents regarding the City's participation with the Chautauqua County Land Bank Corporation and the Office of the Attorney General's Community Revitalization initiatives, including any attachments, exhibits and addenda, contains the sole and entire agreement between the parties and shall supersede any and all other agreements between the parties relating to the services provided hereunder. Any other statements or representations made by either party are void and have no force or effect.
12. **Iran Divestment Act.** By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each bidder is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the New York State Finance Law.

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

You have selected the For-Profit Construction questionnaire, commonly known as the “CCA-2,” which may be printed and completed in this format or, **for your convenience, may be completed online using the [New York State VendRep System](#).**

COMPLETION & CERTIFICATION

The person(s) completing the questionnaire must be knowledgeable about the vendor’s business and operations. An owner or official must certify the questionnaire and the signature must be notarized.

NEW YORK STATE VENDOR IDENTIFICATION NUMBER (VENDOR ID)

The Vendor ID is a ten-digit identifier issued by New York State when the vendor is registered on the Statewide Vendor File. This number must now be included on the questionnaire. If the business entity has not obtained a Vendor ID, contact the IT Service Desk at ITServiceDesk@osc.state.ny.us or call 866-370-4672.

DEFINITIONS

All underlined terms are defined in the “New York State Vendor Responsibility Definitions List,” found at <http://www.osc.state.ny.us/vendrep/documents/questionnaire/definitions.pdf>. These terms may not have their ordinary, common or traditional meanings. Each vendor is strongly encouraged to read the respective definitions for any and all underlined terms. By submitting this questionnaire, the vendor agrees to be bound by the terms as defined in the "New York State Vendor Responsibility Definitions List" existing at the time of certification.

RESPONSES

Every question must be answered. Each response must provide all relevant information which can be obtained within the limits of the law. However, information regarding a determination or finding made in error which was subsequently corrected or overturned, and/or was withdrawn by the issuing government entity, is not required. Individuals and Sole Proprietors may use a Social Security Number but are encouraged to obtain and use a federal Employer Identification Number (EIN).

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

BUSINESS ENTITY INFORMATION				
<u>Legal Business Name</u>		<u>EIN</u> _____		
Address of the <u>Principal Place of Business</u> (street, city, state, zip code)		<u>New York State Vendor Identification Number</u>		
		Telephone ext.		Fax
		Website		
Authorized Contact for this Questionnaire				
Name		Telephone ext.		Fax
Title		Email		
Additional <u>Business Entity</u> Identities: If applicable, list any other <u>DBA</u> , <u>Trade Name</u> , <u>Former Name</u> , Other Identity, or <u>EIN</u> used in the last five (5) years, the state or county where filed and the status (active or inactive).				
Type	Name	EIN	State or County where filed	Status

I. BUSINESS CHARACTERISTICS		
1.0 <u>Business Entity</u> Type – Check appropriate box and provide additional information:		
a) <input type="checkbox"/> <u>Corporation</u> (including <u>PC</u>)	Date of Incorporation	
b) <input type="checkbox"/> <u>Limited Liability Company</u> (LLC or PLLC)	Date Organized	
c) <input type="checkbox"/> <u>Limited Liability Partnership</u>	Date of Registration	
d) <input type="checkbox"/> <u>Limited Partnership</u>	Date Established	
e) <input type="checkbox"/> <u>General Partnership</u>	Date Established	County (if formed in NYS)
f) <input type="checkbox"/> <u>Sole Proprietor</u>	How many years in business?	
g) <input type="checkbox"/> Other	Date Established	
If Other, explain:		
1.1 Was the <u>Business Entity</u> formed in New York State?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If “No,” indicate jurisdiction where the <u>Business Entity</u> was formed:		
<input type="checkbox"/> United States	State	
<input type="checkbox"/> Other	Country	

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

I. BUSINESS CHARACTERISTICS			
1.2 Is the <u>Legal Business Entity</u> publicly traded?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide the <u>CIK code</u> or Ticker Symbol:			
1.3 Is the <u>Business Entity</u> currently <u>registered to do business in New York State</u> ?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Note: Select "Not Required" if the Business Entity is a Sole Proprietor or General Partnership</i>			<input type="checkbox"/> Not Required
If "No," explain why the <u>Business Entity</u> is not required to be <u>registered to do business in New York State</u> :			
1.4 Is the responding <u>Business Entity</u> a <u>Joint Venture</u> ? Note: If the submitting <u>Business Entity</u> is a <u>Joint Venture</u> , also submit a separate questionnaire for each <u>Business Entity</u> comprising the <u>Joint Venture</u> .			<input type="checkbox"/> Yes <input type="checkbox"/> No
1.5 If the <u>Business Entity's</u> <u>Principal Place of Business</u> is not in New York State, does the <u>Business Entity</u> maintain an office in New York State?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>(Select "N/A" if <u>Principal Place of Business</u> is in New York State.)</i>			<input type="checkbox"/> N/A
If "Yes," provide the address and telephone number for one office located in New York State.			
1.6 Is the Business Entity a New York State certified <u>Minority-Owned Business Enterprise</u> , or <u>Women-Owned Business Enterprise</u> , or <u>New York State Small Business</u> , or federally certified <u>Disadvantaged Business Enterprise</u> ?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," check all that apply: <input type="checkbox"/> New York State certified <u>Minority-Owned Business Enterprise</u> (MBE) <input type="checkbox"/> New York State certified <u>Women-Owned Business Enterprise</u> (WBE) <input type="checkbox"/> <u>New York State Small Business</u> <input type="checkbox"/> Federally certified <u>Disadvantaged Business Enterprise</u> (DBE)			
1.7 Identify each person or business entity that is, or has been within the past five (5) years, <u>Principal Owner</u> of 5.0% or more of the firm's shares; a Business Entity Official; or one of the five largest shareholders, if applicable. <i>(Attach additional pages if necessary.)</i> <u>Joint Ventures</u> : Provide information for all firms involved.			
Name <i>(For each person, include middle initial)</i>	Title	Percentage of ownership (Enter 0%, if not applicable)	Employment status with the firm
			<input type="checkbox"/> Current <input type="checkbox"/> Former
			<input type="checkbox"/> Current <input type="checkbox"/> Former
			<input type="checkbox"/> Current <input type="checkbox"/> Former
			<input type="checkbox"/> Current <input type="checkbox"/> Former

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

II. AFFILIATE and JOINT VENTURE RELATIONSHIPS		
2.0 Are there any other <u>construction</u> -related firms in which, now or in the past five years, the submitting <u>Business Entity</u> or any of the individuals or business entities listed in question 1.7 either owned or owns 5.0% or more of the shares of, or was or is one of the five largest shareholders or a director, officer, partner or proprietor of said other firm? <i>(Attach additional pages if necessary.)</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No
Firm/Company Name	Firm/Company EIN (If available)	Firm/Company's Primary Business Activity
Firm/Company Address		
Explain relationship with the firm and indicate percent of ownership, if applicable (enter N/A, if not applicable):		
Are there any shareholders, directors, officers, owners, partners or proprietors that the submitting <u>Business Entity</u> has in common with this firm?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Individual's Name <i>(Include middle initial)</i>	Position/Title with Firm/Company	
2.1 Does the <u>Business Entity</u> have any <u>construction</u> -related <u>affiliates</u> not identified in the response to question 2.0 above? <i>(Attach additional pages if necessary.)</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No
Affiliate Name	Affiliate EIN (If available)	Affiliate's Primary Business Activity
Affiliate Address		
Explain relationship with the affiliate and indicate percent of ownership, if applicable <i>(enter N/A, if not applicable)</i> :		
Are there any shareholders, directors, officers, owners, partners or proprietors that the submitting Business Entity has in common with this affiliate?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Individual's Name <i>(Include middle initial)</i>	Position/Title with Firm/Company	
2.2 Has the <u>Business Entity</u> participated in any <u>construction-related Joint Ventures</u> within the past three (3) years? <i>(Attach additional pages if necessary.)</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No
Joint Venture Name	Joint Venture EIN (If available)	Identify parties to the Joint Venture

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

III. CONTRACT HISTORY

3.0 Has the Business Entity completed any construction contracts? ☐ Yes ☐ No

If "Yes," list the ten most recent construction contracts the Business Entity has completed using Attachment A – Completed Construction Contracts, found at www.osc.state.ny.us/vendrep/documents/questionnaire/ac3294s.doc.

If less than ten, include most recent subcontracts on projects up to that number.

3.1 Does the Business Entity currently have uncompleted construction contracts? ☐ Yes ☐ No

If "Yes," list all current uncompleted construction contracts by using Attachment B – Uncompleted Construction Contracts, found at www.osc.state.ny.us/vendrep/documents/questionnaire/ac3295s.doc.

Note: Ongoing projects must be included.

IV. INTEGRITY – CONTRACT BIDDING

Within the past five (5) years, has the Business Entity, an affiliate, or any predecessor company or entity:

4.0 Been suspended or debarred from any government contracting process or been disqualified on any government procurement? ☐ Yes ☐ No

4.1 Been subject to a denial or revocation of a government prequalification? ☐ Yes ☐ No

4.2 Had any bid rejected by a government entity for lack of qualifications, responsibility or because of the submission of an informal, non-responsive or incomplete bid? ☐ Yes ☐ No

4.3 Had a proposed subcontract rejected by a government entity for lack of qualifications, responsibility or because of the submission of an informal, non-responsive or incomplete bid? ☐ Yes ☐ No

4.4 Had a low bid rejected on a government contract for failure to make good faith efforts on any Minority-Owned Business Enterprise, Women-Owned Business Enterprise or Disadvantaged Business Enterprise goal or statutory affirmative action requirements on a previously held contract? ☐ Yes ☐ No

4.5 Agreed to a voluntary exclusion from bidding/contracting with a government entity? ☐ Yes ☐ No

4.6 Initiated a request to withdraw a bid submitted to a government entity or made any claim of an error on a bid submitted to a government entity? ☐ Yes ☐ No

For each "Yes," provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Business Entity, the government entity involved, project(s), relevant dates, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer(s) below or attach additional sheets with numbered responses.

V. INTEGRITY – CONTRACT AWARD

Within the past five (5) years, has the Business Entity, an affiliate, or any predecessor company or entity:

5.0 Defaulted on or been suspended, cancelled or terminated for cause on any contract? ☐ Yes ☐ No

5.1 Been subject to an administrative proceeding or civil action seeking specific performance or restitution (except any disputed work proceeding) in connection with any government contract? ☐ Yes ☐ No

5.2 Entered into a formal monitoring agreement, consent decree or stipulation settlement as specified by, or agreed to with, any government entity? ☐ Yes ☐ No

5.3 Had its surety called upon to complete any contract whether government or private sector? ☐ Yes ☐ No

5.4 Forfeited all or part of a standby letter of credit in connection with any government contract? ☐ Yes ☐ No

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

V. INTEGRITY – CONTRACT AWARD

Within the past five (5) years, has the Business Entity, an affiliate, or any predecessor company or entity:

For each “Yes,” provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Business Entity, the government entity/owners involved, project(s), contract number(s), relevant dates, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer(s) below or attach additional sheets with numbered responses.

VI. CERTIFICATIONS/LICENSES

Within the past five (5) years, has the Business Entity, an affiliate, or any predecessor company or entity:

6.0 Had a revocation or <u>suspension</u> of any business or professional permit and/or license?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.1 Had a denial, decertification, revocation or forfeiture of New York State certification of <u>Minority-Owned Business Enterprise</u> , <u>Women-Owned Business Enterprise</u> or a federal certification of <u>Disadvantaged Business Enterprise</u> status, for other than a change of ownership?	<input type="checkbox"/> Yes <input type="checkbox"/> No

For each “Yes,” provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer(s) below or attach additional sheets with numbered responses.

VII. LEGAL PROCEEDINGS/GOVERNMENT INVESTIGATIONS

Within the past five (5) years, has the Business Entity, an affiliate, or any predecessor company or entity:

7.0 Been the subject of a criminal <u>investigation</u> , whether open or closed, or an indictment for any business-related conduct constituting a crime under local, state or <u>federal</u> law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.1 Been the subject of: (i.) An indictment, grant of immunity, <u>judgment</u> or conviction (including entering into a plea bargain) for conduct constituting a crime; or (ii.) Any criminal <u>investigation</u> , felony indictment or conviction concerning the formation of, or any business association with, an allegedly false or fraudulent <u>Minority-Owned Business Enterprise</u> , <u>Women-Owned Business Enterprise</u> , or a <u>Disadvantaged Business Enterprise</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
7.2 Received any <u>OSHA</u> citation, which resulted in a final determination classified as <u>serious</u> or <u>willful</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.3 Had a <u>government entity</u> find a willful prevailing wage or supplemental payment violation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.4 Had a New York State Labor Law violation deemed willful?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.5 Entered into a consent order with the New York State Department of Environmental Conservation, or a <u>federal</u> , state or local government enforcement determination involving a violation of <u>federal</u> , state or local environmental laws?	<input type="checkbox"/> Yes <input type="checkbox"/> No

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

VII. LEGAL PROCEEDINGS/GOVERNMENT INVESTIGATIONS

Within the past five (5) years, has the Business Entity, an affiliate, or any predecessor company or entity:

<p>7.6 Other than previously disclosed, been the subject of any <u>citations</u>, notices or violation orders; a pending administrative hearing, proceeding or determination of a violation of:</p> <ul style="list-style-type: none"> • <u>Federal</u>, state or local health laws, rules or regulations; • <u>Federal</u>, state or local environmental laws, rules or regulations; • Unemployment insurance or workers compensation coverage or <u>claim</u> requirements; • Any labor law or regulation, which was deemed willful; • Employee Retirement Income Security Act (ERISA); • <u>Federal</u>, state or local human rights laws; • <u>Federal</u>, state or local security laws? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

For each "Yes," provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer(s) below or attach additional sheets with numbered responses.

Note: Information regarding a determination or finding made in error, which was subsequently corrected or overturned, and/or was withdrawn by the issuing government entity, is not required.

VIII. LEADERSHIP INTEGRITY

If the Business Entity is a Joint Venture Entity, answer "N/A - Not Applicable" to questions in this section.

Within the past five (5) years has any individual previously identified or any individual currently or formerly having the authority to sign, execute or approve bids, proposals, contracts or supporting documentation on behalf of the Business Entity with any government entity been:

<p>8.0 <u>Sanctioned</u> relative to any business or professional permit and/or license?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>8.1 <u>Suspended</u>, <u>debarred</u> or <u>disqualified</u> from any <u>government contracting process</u>?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>8.2 The subject of a criminal <u>investigation</u>, whether open or closed, or an indictment for any business-related conduct constituting a crime under local, state or <u>federal</u> law?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>8.3 Charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a judgment for:</p> <ul style="list-style-type: none"> (i.) Any business-related activity, including but not limited to fraud, coercion, extortion, bribe or bribe-receiving, giving or accepting unlawful gratuities, immigration or tax fraud, racketeering, mail fraud, wire fraud, price-fixing or collusive bidding; or (ii.) Any crime, whether or not business-related, the underlying conduct of which related to truthfulness, including but not limited to the filing of false documents or false sworn statements, perjury or larceny 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

For each "Yes," provide an explanation of the issue(s), the individual involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer(s) below or attach additional sheets with numbered responses.

NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE FOR-PROFIT CONSTRUCTION (CCA-2)

IX. FINANCIAL AND ORGANIZATIONAL CAPACITY			
9.0 Within the past five (5) years, has the <u>Business Entity</u> or any <u>affiliate</u> received any <u>formal unsatisfactory performance assessment(s)</u> from any <u>government entity</u> on any contract?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If "Yes," provide an explanation of the issue(s), the <u>Business Entity</u> involved, the relationship to the submitting <u>Business Entity</u>, the <u>government entity</u> involved, relevant dates, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.</i>			
9.1 Within the past five (5) years, has the <u>Business Entity</u> or any <u>affiliate</u> had any <u>liquidated damages</u> assessed over \$25,000?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If "Yes," provide an explanation of the issue(s), the <u>Business Entity</u> involved, the relationship to the submitting <u>Business Entity</u>, relevant dates, the contracting party involved, the amount assessed and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.</i>			
9.2 Within the past five (5) years, has the <u>Business Entity</u> or any <u>affiliate</u> had any <u>liens, claims or judgments</u> over \$25,000 filed against the <u>Business Entity</u> which remain undischarged or were unsatisfied for more than 90 days? (Note: Including but not limited to tax warrants or liens. Do not include UCC filings.)			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If "Yes," provide an explanation of the issue(s), the <u>Business Entity</u> involved, the relationship to the submitting <u>Business Entity</u>, relevant dates, the Lien holder or Claimants' name(s), the amount of the <u>lien(s)</u> and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.</i>			
9.3 In the last seven (7) years, has the <u>Business Entity</u> or any <u>affiliate</u> initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If "Yes," provide the <u>Business Entity</u> involved, the relationship to the submitting <u>Business Entity</u>, the bankruptcy chapter number, the court name and the docket number. Indicate the current status of the proceedings as "Initiated," "Pending" or "Closed." Provide answer below or attach additional sheets with numbered responses.</i>			
9.4 What is the <u>Business Entity's</u> Bonding Capacity?			
a. Single Project		b. Aggregate (All Projects)	
9.5 List <u>Business Entity's</u> Gross Sales for the previous three (3) Fiscal Years:			
1st Year (Indicate year) Gross Sales	2nd Year (Indicate year) Gross Sales	3rd Year (Indicate year) Gross Sales	
9.6 List <u>Business Entity's</u> Average Backlog for the previous three (3) fiscal years: (Estimated total value of uncompleted work on outstanding contracts)			
1st Year (Indicate year) Amount	2nd Year (Indicate year) Amount	3rd Year (Indicate year) Amount	
9.7 Attach <u>Business Entity's</u> most recent annual <u>financial statement</u> and accompanying notes or complete Attachment C – Financial Information, found at www.osc.state.ny.us/vendrep/documents/questionnaire/ac3296s.xls . (This information must be attached.)			

**NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE
FOR-PROFIT CONSTRUCTION (CCA-2)**

X. FREEDOM OF INFORMATION LAW (FOIL)

10.0 Indicate whether any information provided herein is believed to be exempt from disclosure under the Freedom of Information Law (FOIL).

☐ Yes ☐ No

Note: A determination of whether such information is exempt from FOIL will be made at the time of any request for disclosure under FOIL. Attach additional pages if necessary.

If "Yes," indicate the question number(s) and explain the basis for the claim.

Pre-Demolition Asbestos Inspection

104 W Second Street
Dunkirk, NY 14048



Chapman Consulting Project # 104-06272023

Prepared for:

City of Dunkirk
342 Central Ave
Dunkirk, NY 14048

Prepared By:



Chapman Consulting

ASBESTOS & DEMOLITION CONSULTANTS
P.O. BOX 393, ASHVILLE NY 14710
CHAPMANCONSULT.NET (716)640-0562

Conditions as of June 27, 2023



Chapman Consulting

ASBESTOS & DEMOLITION CONSULTANTS
P.O. BOX 393, ASHVILLE NY 14710
CHAPMANCONSULT.NET (716)640-0562

June 27, 2023

RE: Pre-Demolition Asbestos Inspection
104 W Second Street
Dunkirk, NY 14048


To Whom it May Concern:

Chapman Consulting has submitted the attached inspection/report for the above referenced property as requested. This inspection was conducted in accordance with applicable regulations including New York State Department of Labor standards 12 NYCRR Part 56, National Emission Standards for Hazardous Air Pollutants (NESHAP), and Occupational Safety and Health Administration regulations. The Purpose of this inspection is to identify, quantify and document the condition and location of asbestos-containing materials that would be disturbed during the renovation or demolition activities. Please note should any materials be encountered that are NOT identified in this inspection; they should be assumed to be asbestos until a licensed inspector deems them non-asbestos containing.

Identified Asbestos Containing Materials:

HAN 104 - <10 Sq Ft Duct Wrap Insulation. Please refer to the original inspection from ACS, Inc. sampled December 2022 for any additional ASBESTOS CONTAINING MATERIALS.

Sincerely,
Chapman Consulting


Matthew Chapman
NYS Asbestos License #495105
Inspector Certification #14-02476



Chapman Consulting

ASBESTOS & DEMOLITION CONSULTANTS
P.O. BOX 393, ASHVILLE NY 14710
CHAPMANCONSULT.NET (716)640-0562

Pre-Demolition Asbestos Inspection

Table of Contents

1. Introduction
 - 1.1 Key terms and Definitions
2. Methodology for Inspection
3. Executive Summary

Appendix A – Floor Plans

Appendix B – Site Photos

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Appendix D – General Conditions of the Inspection

Appendix E – Certifications and Licenses



Chapman Consulting

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1. Introduction

Chapman Consulting was retained by the City of Dunkirk to perform a pre-demolition asbestos inspection of **104 W Second Street, Dunkirk, NY**. The property is a two-story residential home.

Although the report is a comprehensive analysis of the asbestos inspection work performed, it would be helpful to review all applicable federal, state, and local rules, laws and regulations regarding the handling and treatment of asbestos containing building materials (ACBM). The following is a list of suggested reading and information sources related to asbestos:

- New York State Department of Labor Industrial Code Rule 56
- National Emission Standard for Hazardous Air Pollutants (NESHAP)
- Occupation Safety and Health Administration
- Environmental Protection Agency rule CFR 763.46 Asbestos Hazard Emergency Response Act

1.1 Key Terms and Definitions

PACM: Presumed Asbestos Containing Material: Any building material required to be tested for renovation or demolition to be considered ACM unless proven otherwise by appropriate bulk sampling and laboratory analyses.

ACM: Asbestos Containing Material: Any material containing greater than 1% asbestos.

HAN: Homogenous Area Number: Specific number assigned to categorize material of similar composition, texture, color, and appearance.

NOB: Non-Friable Organically Bound Asbestos Material: Non-Friable asbestos materials embedded in flexible-to-rigid asphalt or vinyl matrices, including but not limited to flooring materials, adhesives, mastics, asphalt shingles, roofing materials and caulks.

PLM: Polarized Light Microscopy: Method used to identify asbestos in bulk samples of suspect building materials.

TEM: Transmission Electron Microscopy: Microscopy technique in which a beam of electrons is transmitted through a specimen to form an image.



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2. Methodology

All work performed by Chapman Consulting was conducted in accordance with applicable regulations including New York State Department of Labor standards 12 NYCRR Part 56, National Emission Standards for Hazardous Air Pollutants (NESHAP), and Occupational Safety and Health Administration regulations. All Chapman Consulting personnel assigned to conduct inspections have completed the Environmental Protection Agency (EPA) required training and the New York Department of Labor Division of Safety and Health certification program.

The floor plan maps that accompany this report were drawn by Chapman Consulting and provided to assist in identifying the locations of asbestos containing materials.

Each suspected asbestos containing building material (ACBM) was assigned a HOMOGENEOUS AREA NUMBER (HAN). Homogeneous areas are materials of like composition, color, texture, and appearance.

Based on the homogeneous areas, samples of suspect materials were collected. Techniques used for sample collection were designed to minimize damage to suspect areas, reduce any potential for fiber release, and ensure the safety of the sampling team and building occupants.

Samples were analyzed using Polarized Light Microscopy (PLM) in accordance with NYS DOH ELAP Item #198.1 or #198.6. For materials classified as non-friable organically bound materials (NOBs) that were analyzed as equal to or less than 1% asbestos by PLM. Additional analysis was performed under Transmission Electron Microscopy (TEM) in accordance with NYS DOH ELAP Item #198.4. The results of this analysis confirmed whether a suspect material contained asbestos. The confirmed materials are listed in **SECTION 3 Executive Summary**.



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3. Executive Summary

The scope of services included the identification of suspect asbestos containing building materials in preparation for building demolition sampling and analysis of the suspect materials; and approximate quantity of confirmed asbestos containing materials.

The inspection was conducted on June 27, 2023, and revealed the following materials as suspected of containing asbestos:

HAN #	Description
100	Plaster
101	Drywall
102	Joint Compound
103	Wall Patching Material
104	Duct Wrap Insulation
200	12"x12" Ceiling Tile



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Executive Summary Continued

Bulk sampling and laboratory analysis of the suspect asbestos containing materials by the Polarized Light Microscopy (PLM) and, where necessary, Transmission Electron Microscopy (TEM) methods, revealed the following materials as asbestos containing building materials (ACBM): **THERE IS ASBESTOS CONTAINING MATERIALS**

HAN#	Material Description and Approximate Location	Friability / Condition Note 1	Approximate Quantity Note 2
104** Note 2	Duct Wrap Insulation	F/I	<10 Sq Ft

Note 1: Friability/Condition:

F=Friable: A material that when dry, can be crumbled, pulverized, or reduced to powder by hand pressure, or is capable of being released into the air by hand pressure.

NF=Non-Friable: A material that when dry cannot be crumbled, pulverized, or reduced to powder by hand pressure, and is not capable of being released into the air by hand pressure.

I=Intact: Asbestos material that has not crumbled, been pulverized, or otherwise been damaged or disturbed, and the materials matrix has not noticeably deteriorated.

D=Damaged: Asbestos material that has deteriorated or sustained physical injury demonstrated by separation of the ACM into layers, separation of the ACM from the substrate, flaking, blistering, crumbling, water damage, scrapes, gouges, or other signs of physical injury.

SD=Significantly Damaged: Damaged asbestos where the damage is extensive and severe.

Note 2: **=Presumed Asbestos Containing: This material was assumed to contain asbestos based on Chapman Consulting's experience on similar projects or because the material was adhered to another asbestos containing material (or adjacent to other materials needing abatement) and must be managed as such.



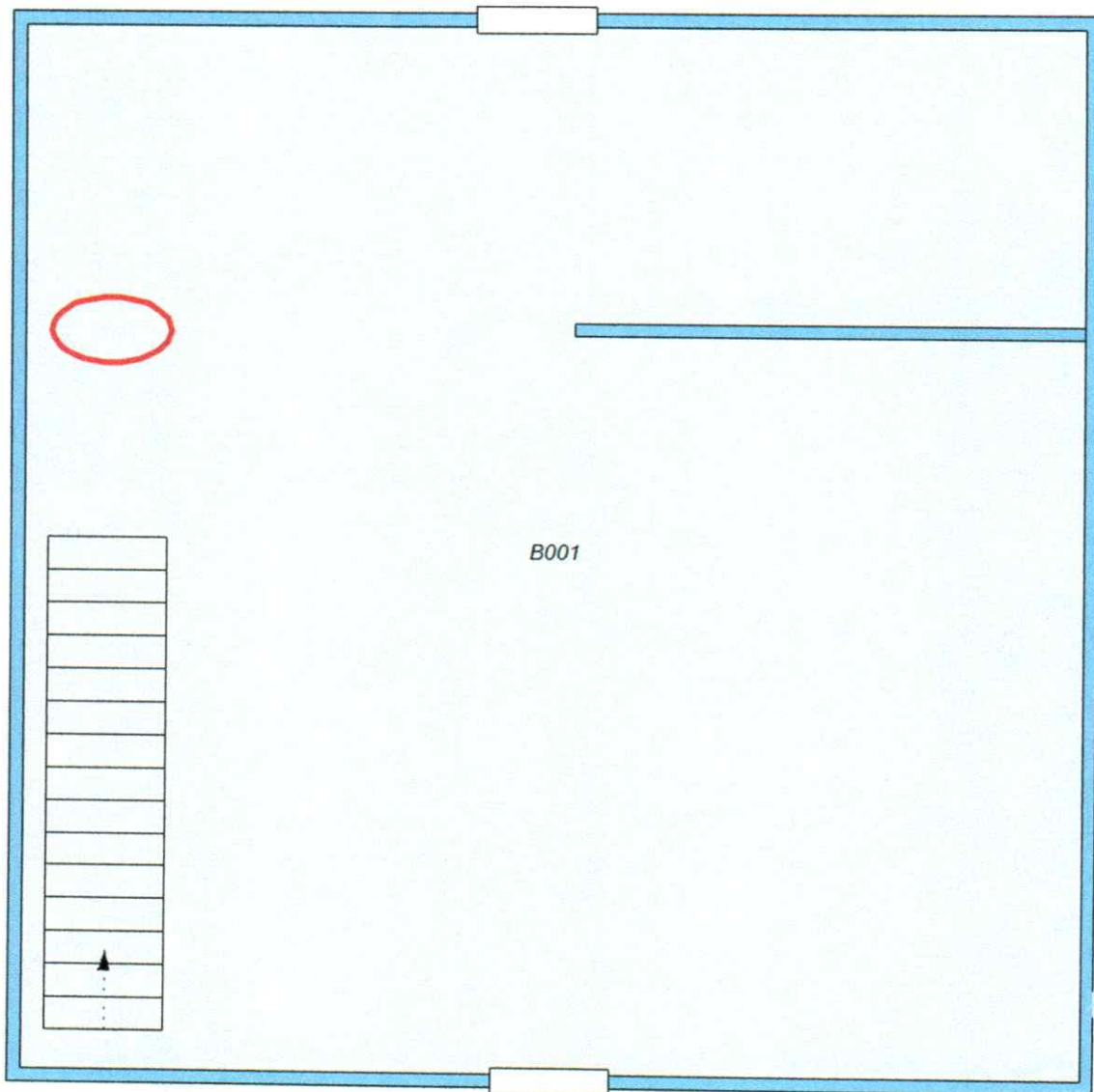
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P.O. BOX 393, ASHVILLE NY 14710
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104 W Second Street, Dunkirk – Basement



-HAN 104 – Duct Wrap Insulation

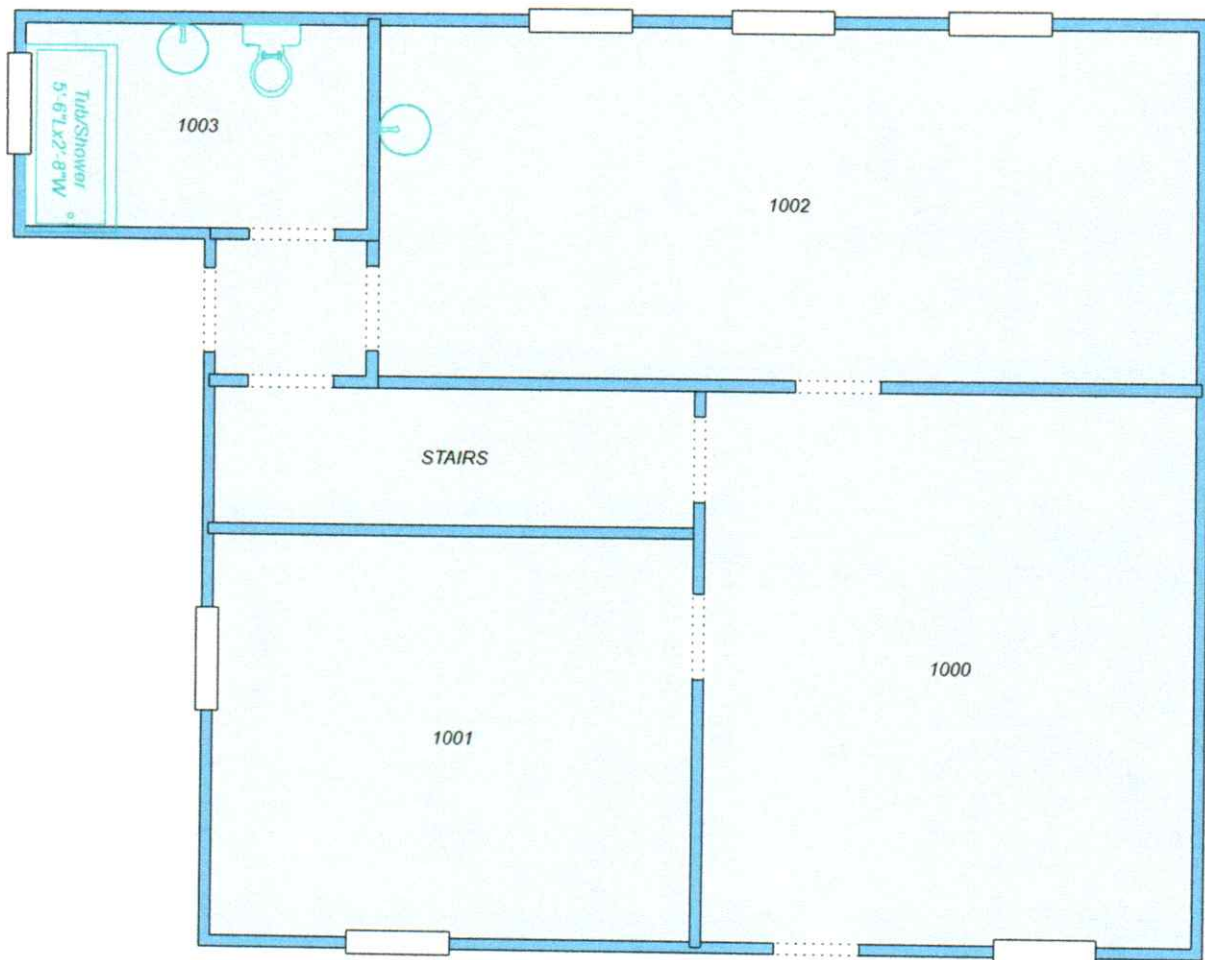




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104 W Second Street, Dunkirk – 1st Floor

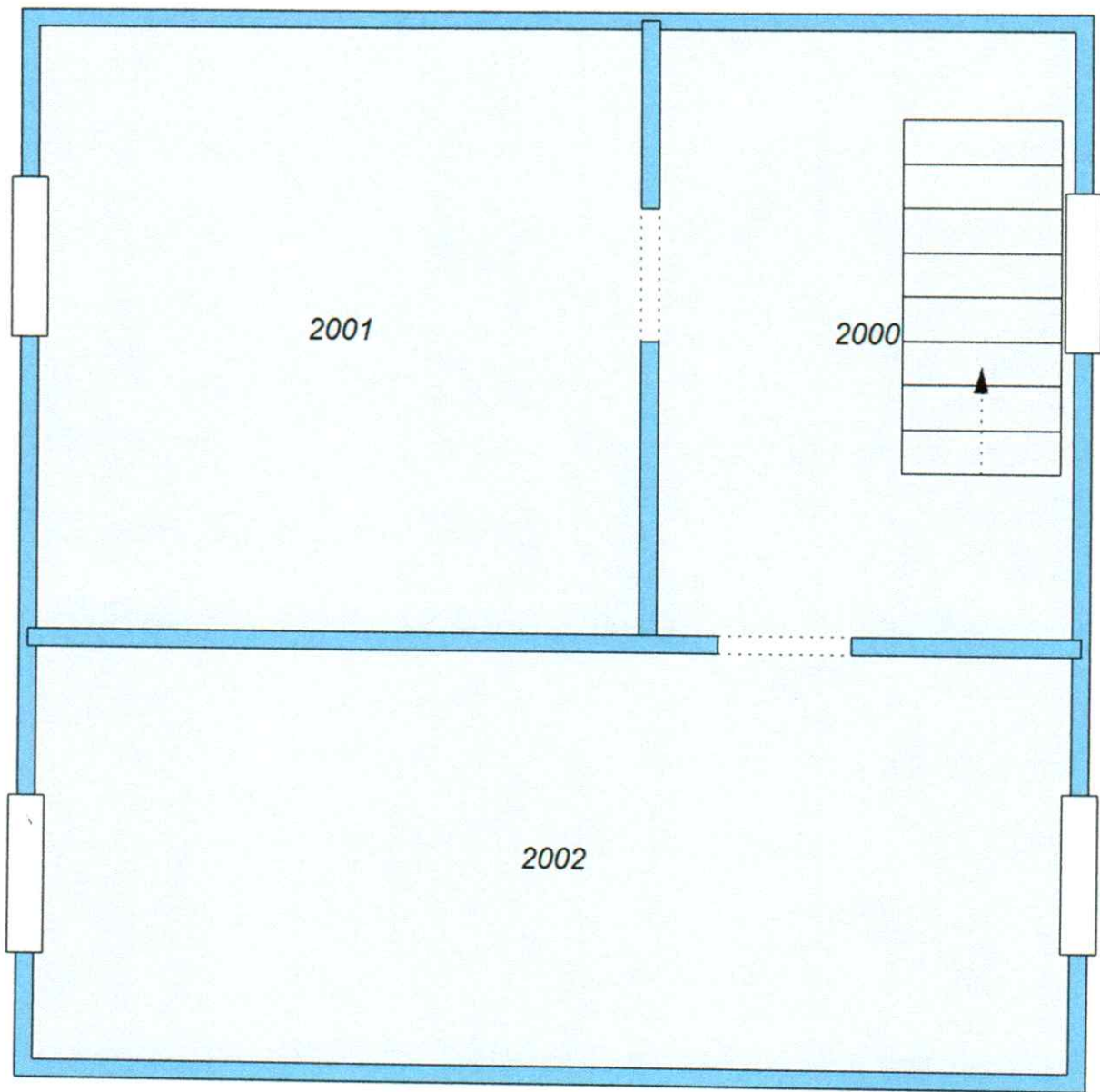




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104 W Second Street, Dunkirk - 2nd Floor





Chapman Consulting

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104 W Second Street, Dunkirk – Site Pictures



Duct Wrap Insulation

HAN – 104

Location – B001(Basement)

Friable / Intact

Quantity - <10 Sq Ft



AmeriSci Richmond
13635 GENITO ROAD
MIDLOTHIAN, VIRGINIA 23112
TEL: 8047631200 FAX: 8047631800

July 7, 2023

Chapman Consulting
Attn: Matthew Chapman
4932 Stoneledge Rd
Ashville, NY 14710

RE: Chapman Consulting
Job Number 123062182
P.O. #104-06272023
104-06272023; W Second Reinspection; 104 W Second St Dunkirk, NY

Dear Matthew Chapman:

Enclosed are the results of Asbestos Analysis - Bulk Protocol of the following Chapman Consulting samples, received at AmeriSci on Friday, June 30, 2023, for a 5 day turnaround:

1, 2, 3, 4, 5, 6, 7, 8

The 8 samples, placed in zip lock bag, were shipped to AmeriSci via Fed Ex 8175 6333 7387 B 930. Chapman Consulting requested ELAP PLM/TEM analysis of these samples.

The results of the analyses which were performed under NYSDOH ELAP Lab Certification # 10984 following ELAP 198.4 TEM guidelines are presented within the Summary Table of this report. The presence of matrix reduction data in the Summary Table normally indicates an NOB sample. For NOB samples the individual matrix reduction and TEM analysis results are listed in Table I. Complete PLM results for individual samples analyzed by ELAP 198.1 (friable) and ELAP 198.6 (NOB) are presented in the PLM Bulk Asbestos Report. This combined report relates ONLY to sample analysis expressed as percent composition by weight and percent asbestos. This report must not be used to claim product endorsement or approval by these laboratories, NVLAP, ELAP or any other associated agency. The National Institute of Standards and Technology accreditation requirements, mandate that this report must not be reproduced, except in full without the written approval of the laboratory. This report may contain specific data not covered by NVLAP or ELAP accreditations respectively, if so identified in relevant footnotes.

AmeriSci appreciates this opportunity to serve your organization. Please contact us for any further assistance or with any questions.

Sincerely,

A handwritten signature in black ink, appearing to be "Cory M. Parnell". The signature is fluid and cursive, with the first letter of the first name being a large, stylized "C".

Cory M. Parnell

Laboratory Director | Authorized Signatory

Boston - Los Angeles - New York - Richmond

**AmeriSci Richmond**

13635 GENITO ROAD
MIDLOTHIAN, VIRGINIA 23112
TEL: (804) 763-1200 • FAX: (804) 763-1800

PLM Bulk Asbestos Report

Chapman Consulting
Attn: Matthew Chapman
4932 Stoneledge Rd

Ashville, NY 14710

Date Received 06/30/23 **AmeriSci Job #** 123062182
Date Examined 07/06/23 **P.O. #**
ELAP # 10984 **Page** 1 of 3
RE: 104-06272023; W Second Reinspection; 104 W Second St
Dunkirk, NY

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
1 100 Location: 1000; Plaster	123062182-01.1	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: Off-White, Heterogeneous, Non-Fibrous, Skim Coat (Plaster) Asbestos Types: Other Material: Non-fibrous 100%			
1 100 Location: 1000; Plaster	123062182-01.2	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: Gray, Heterogeneous, Fibrous, Cementitious, Base Coat (Plaster) Asbestos Types: Other Material: Animal hair Trace, Non-fibrous 100%			
2 100 Location: 2000; Plaster	123062182-02	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: Gray, Heterogeneous, Fibrous, Cementitious, Bulk Material Asbestos Types: Other Material: Cellulose 4.0%, Non-fibrous 96%			
3 101 Location: 1000; Drywall	123062182-03	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: Brown/White/Brown, Heterogeneous, Fibrous, Bulk Material Asbestos Types: Other Material: Cellulose 8.0%, Non-fibrous 92%			
4 102 Location: 1000; Joint Compound	123062182-04	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: White, Heterogeneous, Non-Fibrous, Cementitious, Bulk Material Asbestos Types: Other Material: Non-fibrous 100%			

See Reporting notes on last page

Client Name: Chapman Consulting

PLM Bulk Asbestos Report104-06272023; W Second Reinspection; 104 W Second St
Dunkirk, NY

Client No. / HGA	Lab No.	Asbestos Present	Total % Asbestos
5 102	123062182-05 Location: 2000; Joint Compound	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: White, Heterogeneous, Non-Fibrous, Bulk Material Asbestos Types: Other Material: Non-fibrous 100%			
6 103	123062182-06 Location: 2000; Wall Patching Material	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: White, Heterogeneous, Non-Fibrous, Bulk Material Asbestos Types: Other Material: Non-fibrous 100%			
7 103	123062182-07.1 Location: 2000; Wall Patching Material	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: White, Heterogeneous, Fibrous, Tape Asbestos Types: Other Material: Fibrous glass 95%, Non-fibrous 5.0%			
7 103	123062182-07.2 Location: 2000; Wall Patching Material	No	NAD (by NYS ELAP 198.1) by David W. Ralbovsky on 07/06/23
Analyst Description: White, Heterogeneous, Non-Fibrous, Joint Compound Asbestos Types: Other Material: Non-fibrous 100%			
8 200	123062182-08 Location: 1002; 12" x 12" Ceiling Tile	No	NAD (NOB by NYS ELAP 198.6) by David W. Ralbovsky on 07/06/23
Analyst Description: Beige, Heterogeneous, Non-Fibrous, Bulk Material Asbestos Types: Other Material: Non-Asbestos 57%			

See Reporting notes on last page

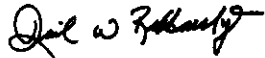
Client Name: Chapman Consulting

PLM Bulk Asbestos Report

104-06272023; W Second Reinspection; 104 W Second St
Dunkirk, NY

Reporting Notes:

Analyzed by: David W. Ralbovsky
Date: 7/6/2023



Reviewed by: Cory M. Parnell



*NAD = no asbestos detected, Detection Limit < 1%, Reporting Limits: CVES = 1%, 400 Pt Ct = 0.25%, 1000 Pt Ct = 0.1%; "Present" or NVA = "No Visible Asbestos" are observations made during a qualitative analysis; NA = not analyzed; NA/PS = not analyzed / positive stop; PLM Bulk Asbestos Analysis using Olympus, Model BH-2 microscope, Serial #229707, by EPA 600/R-93/116 per 40 CFR 763 (NVLAP Lab Code 101904-0) and ELAP PLM Analysis Protocol 198.1 for New York friable samples which includes quantitation of any vermiculite observed (198.6 for NOB samples) or EPA 400 pt ct by EPA 600/M4-82-020 (NYSDOH ELAP Lab # 10984); CA ELAP Lab # 2508; Note: PLM is not consistently reliable in detecting asbestos in floor coverings and similar NOB materials. NAD or Trace results by PLM are inconclusive, TEM is currently the only method that can be used to determine if this material can be considered or treated as non-asbestos-containing in New York State (also see EPA Advisory for floor tile, FR 59, 146, 38970, 8/1/94). NIST Accreditation requirements mandate that this report must not be reproduced except in full without the approval of the laboratory. This PLM report relates ONLY to the items tested.

Client Name: Chapman Consulting

Table I

Summary of Bulk Asbestos Analysis Results by NYS ELAP 198.4

104-06272023; W Second Reinspection; 104 W Second St Dunkirk, NY

AmeriSci Sample #	Client Sample#	HG Area	NOB Sample Weight (gram)	NOB Heat Sensitive Organic %	NOB Acid Soluble Inorganic %	NOB Insoluble Non-Asbestos Inorganic %	** Asbestos % by PLM/MS	** Asbestos % by TEM
01.1	1	100	---	---	---	---	NAD	NA
Location: 1000; Plaster								
01.2	1	100	---	---	---	---	NAD	NA
Location: 1000; Plaster								
02	2	100	---	---	---	---	NAD	NA
Location: 2000; Plaster								
03	3	101	---	---	---	---	NAD	NA
Location: 1000; Drywall								
04	4	102	---	---	---	---	NAD	NA
Location: 1000; Joint Compound								
05	5	102	---	---	---	---	NAD	NA
Location: 2000; Joint Compound								
06	6	103	---	---	---	---	NAD	NA
Location: 2000; Wall Patching Material								
07.1	7	103	---	---	---	---	NAD	NA
Location: 2000; Wall Patching Material								
07.2	7	103	---	---	---	---	NAD	NA
Location: 2000; Wall Patching Material								
08	8	200	0.189	26.2	16.6	57.2	NAD	NAD
Location: 1002; 12" x 12" Ceiling Tile								

Analyzed by: Cory M. Parnell

Reviewed by: Cory M. Parnell

Date: 7/7/2023

Semi-Quantitative Analysis: NAD = no asbestos detected; NA = not analyzed; NA/PS = not analyzed due to positive stop; Trace = <1%; PLM analysis by EPA 600/R-93/116 per 40 CFR 763 (NVLAP Lab Code 101904-0) or NY ELAP 198.4 for New York friable samples which includes quantitation of any vermiculite observed (198.6 for NOB samples) or EPA 400 pt ct by EPA 600/M4-82-020 (NY ELAP Lab # 10984); TEM prep by EPA 600/R-93/116 Section 2.3 (analysis by Section 2.5, not covered by NVLAP Bulk accreditation); or NY ELAP 198.4 for New York NOB samples (NY ELAP Lab # 10984). Analysis using Jeol Model JEM-100CX II microscope, Serial #156147-247. ** Warning Notes: Consider PLM fiber diameter limitation, only TEM will resolve fibers <0.25 micrometers in diameter. TEM bulk analysis is representative of the fine grained matrix material and may not be representative of non-uniformly dispersed debris, soils or other heterogeneous materials for which a combination PLM/TEM evaluation is recommended. Quantitation for beginning weights of <0.1 grams should be considered as qualitative only.

Date/Time: 4pm-2/28/23

Date/Time:**Date/Time:****Date/Time:**

Project: b) Second Reinspection

128082182

Proj Mar: *Mathews* *Champion*

Proj #: 104-06272023

Zip: 14710

Cell:

ASTM Dust ☐ (Microvac) ☐ (Wipe);

Turnaround Time: 5 day

Sampled By: Matthew Chapman

Date Sampled: 06-27-2023

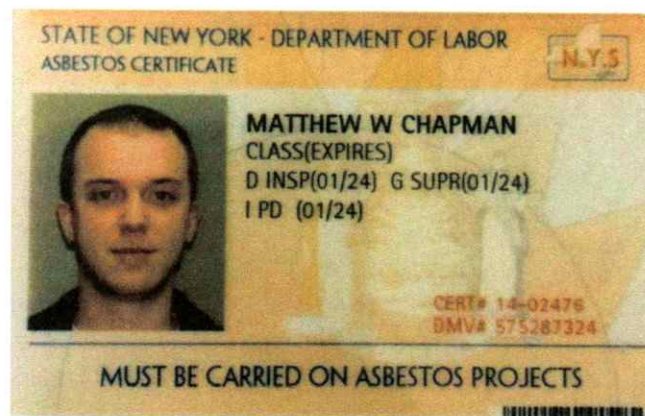
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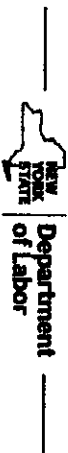
Matthew W. Chapman



NYS Certified Asbestos Certifications:

**Inspector
Supervisor
Project Designer**

WE ARE YOUR DOL



DIVISION OF SAFETY & HEALTH LICENSE AND CERTIFICATE UNIT, STATE OFFICE CAMPUS, BLDG. 12, ALBANY, NY 12226

ASBESTOS HANDLING LICENSE

Chapman Consulting
4932 Stoneledge Rd., Ashville, NY, 14710

License Number: 495105

License Class: RESTRICTED

Date of Issue: 04/18/2023

Expiration Date: 04/30/2024

Duly Authorized Representative: Matthew Chapman

This license has been issued in accordance with applicable provisions of Article 30 of the Labor Law of New York State and of the New York State Codes, Rules and Regulations (12 NYCRR Part 56). It is subject to suspension or revocation for a (1) serious violation of state, federal or local laws with regard to the conduct of an asbestos project, or (2) demonstrated lack of responsibility in the conduct of any job involving asbestos or asbestos material.

This license is valid only for the contractor named above and this license or a photocopy must be prominently displayed at the asbestos project worksite. This license verifies that all persons employed by the licensee on an asbestos project in New York State have been issued an Asbestos Certificate, appropriate for the type of work they perform, by the New York State Department of Labor.

A handwritten signature in black ink, appearing to read "Amy Phillips".

Amy Phillips, Director
For the Commissioner of Labor



ASBESTOS SAMPLING

Location:

Vacant House
104 W. Second
Dunkirk, NY

Conditions as of December 2022

Prepared For:

City of Dunkirk
Housing, Building and Zoning
City Hall
Dunkirk, NY

Prepared by:

Advanced Contracting Services
PO Box 986
Grand Island NY 14072
advancedcss1976@gmail.com

NYSDOL Asbestos License # 115026



Advanced Contracting Services was retained to perform asbestos sampling.

The purpose of the sampling was to determine the presence, location, and quantity of ACM (asbestos containing materials) at the above referenced location as defined by the property owner's specific scope of work for the project. This survey includes the following:

- Identification of suspect asbestos containing materials.
- Sampling and analysis of suspect materials.
- Identification of the location, approximate quantity, friability of confirmed asbestos containing materials.

ASBESTOS CONTAINING MATERIALS (ACM)

Polarized Light Microscopy (PLM) and, where required, Transmission Electron Microscopy (TEM) revealed asbestos in the following analyzed samples

Homogeneous Material	Approximate Quantity and Location of ACM		Friability	Asbestos
Plaster 1			No	No
Plaster 2			No	No
Plaster 3			No	No
Drywall 1			No	No
Drywall 2			No	No
Ceiling Tile			No	No
Floor – Kitchen			No	No
Floor – Bath			No	No
Ceiling Tile			No	No
Glazing			No	No
Roof 1			No	No
Roof 2			No	No

Laboratory Analysis Performed By: Paradigm Environmental NYS DOH ELAP# 11955
Sampling Performed By: Advanced Contracting NYS Asbestos Contractor # 115026



GENERAL CONDITIONS OF INSPECTION

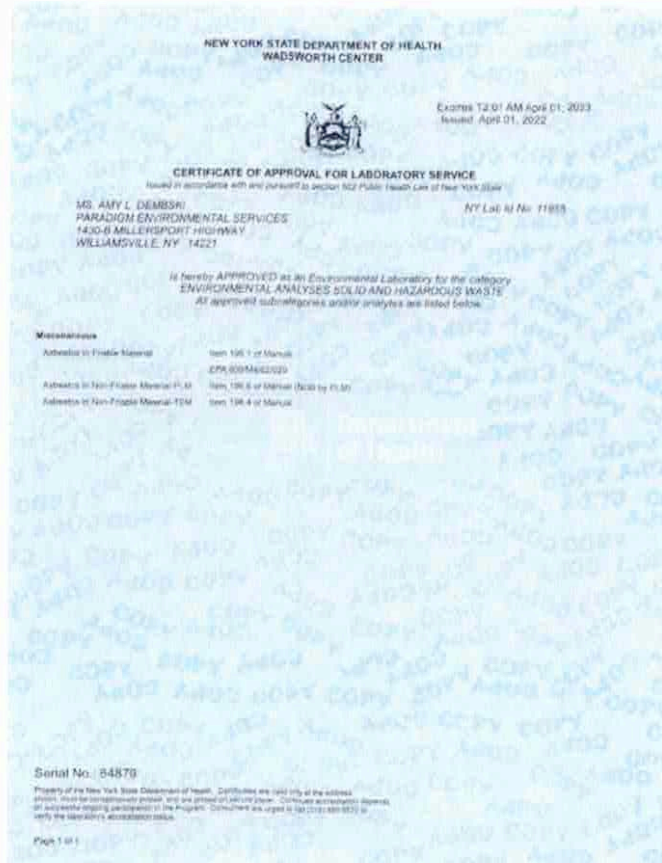
Any reported quantities found in this report, if applicable, are field approximations of materials in accessible areas only and should be field verified prior to abatement. This report is not designed to serve as a specification for abatement. Please find enclosed the laboratory analytical results and chain of custody documentation.

Any included laboratory results, if applicable, are submitted pursuant to ACS Services current terms and conditions of sale, including the company's standard warrant and limitation of liability provisions. No responsibility or liability is assumed for the manner in which the results are used or interpreted.

This report is based on the condition and contents present at the above referenced location at the time of inspection.



ACS, Inc.







PLM & TEM BULK ASBESTOS ANALYSIS REPORT
via NYSDOH ELAP Method 198.1, 198.4 and 198.6

Client: Advanced Contracting Services

Job No: 2595-22B

Location: 104 West Second
Dunkirk, New York

Page: 1 of 2

Sample Date: 12/14/2022

Sample Received Date: 12/14/2022

Client ID	Lab ID	Sampling Location	Description	PLM Asbestos Fibers Type & Percentage	PLM Total Asbestos	N O B	TEM Asbestos Fibers Type & Percentage	TEM Total Asbestos	PLM Non-Asbestos Fibers Type & Percentage	Non- Fibrous Matrix Material %
1	21206	Plaster	Gray Plaster	None Detected	0%		Not Required	N/A	None Detected	100%
2	21207	Plaster	Gray Plaster	None Detected	0%		Not Required	N/A	None Detected	100%
3	21208	Plaster	Gray Plaster	None Detected	0%		Not Required	N/A	None Detected	100%
4	21209	Drywall	White Drywall	None Detected	0%		Not Required	N/A	None Detected	100%
5	21210	Floor	Brown Floor Tile	Inconclusive No Asbestos Detected	0%	✓	None Detected	<1.0%	None Detected	100%
6	21211	Floor	Black Floor Tile	Inconclusive No Asbestos Detected	0%	✓	None Detected	<1.0%	None Detected	100%
7	21212	Glazing	White Glazing	Inconclusive No Asbestos Detected	0%	✓	None Detected	<1.0%	None Detected	100%
8	21213	Roof	Black Roofing	Inconclusive No Asbestos Detected	0%	✓	None Detected	<1.0%	None Detected	100%
9	21214	Roof	Black Roofing	Inconclusive No Asbestos Detected	0%	✓	None Detected	<1.0%	None Detected	100%
10	21215	Ceiling Tile	Tan Ceiling Tile	Inconclusive No Asbestos Detected	0%	#	None Detected	<1.0%	None Detected	100%

KEY TO NOB COLUMN SYMBOLS

No Symbol in the NOB column denotes sample analyzed by ELAP Method 198.1 (PLM).

✓ NOB (non-friable organically bound) denotes material analyzed by ELAP Method 198.6 (PLM) and 198.4 (TEM) as noted.

✓ denotes material analyzed by ELAP Method 198.6 (PLM) per NYSDOH. This Method does not remove vermiculite and may underestimate the level of asbestos present in a sample containing greater than 10% vermiculite.

denotes friable material analyzed by ELAP Method 198.6 (PLM) and 198.4 (TEM) as noted.

X denotes sample prepped only by ELAP Method 198.6.

** Polarized-light microscopy is not consistently reliable in detecting asbestos in floor coverings and similar non-friable organically bound materials.

N/A - Not Applicable

Quantitative transmission electron microscopy is currently the only method that can be used to determine if this material can be considered or treated as non-asbestos containing.

PLM Bulk Asbestos Analysis by New York State Department of Health, ELAP Method 198.1, 198.4 and 198.6 ("Polarized Light Microscopy and Transmission Electron Microscopy Identifying and Quantitating Asbestos in Bulk Samples and in Non-Friable Organically Bound Bulk Samples.") or EPA 600/M4-82-020 per 40 CFR 763

ELAP ID No.: 11955

PLM Date Analyzed: 12/16/2022

TEM Date Analyzed: 12/16/2022

PLM Analyst: A. Maciejewski

TEM Analyst: A. Maciejewski

Microscope: Olympus BH-2 #241709

Microscope: Hitachi 600 AB

Laboratory Results Approved By:
Asbestos Technical Director or Designee

Andrew Maciejewski

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2595-22B 12/19/2022



ACS

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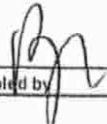
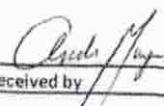
2595-22B

ASBESTOS ANALYSIS REQUEST AND CHAIN OF CUSTODY

104 West Second
Location Dunkin' 24hr 48hr 72hr 5day

Sample #	Material Description	Quantity	Location	Lab Use
1	Plaster			21206
2	Plaster			207
3	Plaster			208
4	Drywall			209
5	Floor		K	210
6	Floor		B	211
7	Glazing			212
8	Roof			213
9	Roof			214
10	Ceiling tile			215
11				
12				
13				
14				
15				

Comments / Special Instructions

 12-14-22
 Sampled by _____ date _____ time _____
 Received by  12/14/22 1515
 Received by _____ date _____ time _____