



NOTIFICATION OF DEMOLITION AND RENOVATION OPERATIONS
 State Form 44593 (R4 / 10-18)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Received
 State of Indiana
 AUG 27 2025
 Dept of Environmental Mgmt
 Office of Air Quality

314143

8/27/25

I. TYPE OF NOTIFICATION (check one):		<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Revised	<input type="checkbox"/> Canceled	<input type="checkbox"/> Courtesy
II. FACILITY INFORMATION					
Owner / Operator: City of Gary					
Address: 401 Broadway		City: Gary		State: IN	ZIP: 46402
Contact: Michael Suggs		Telephone: 219-881-1464		E-mail: msuggs@gary.gov	
Asbestos Removal Contractor: n/a		Demolition Contractor: C Lee Construction Services			
Address:		Address: 1011 S Lake St			
City:	State:	ZIP:	City: Gary	State: IN	ZIP: 46403
Contact:		Telephone:		Contact: Lila Wever	
E-mail:		E-mail: lwever@clecsi.com			
IN License Number:		Expiration:			
Licensed Asbestos Inspector: Northwest Indiana Environmental		Project Designer: n/a			
Address: 660 Morningside Dr		Address:			
City: Crown Point	State: IN	ZIP: 46307	City:	State:	ZIP:
Contact: Nada Critser		Telephone: 219-743-9160		Telephone:	
E-mail: ncritser@nwi-environ.com		E-mail:			
IN License Number: 19A004777		Expiration: 5-2-26		IN License Number:	
III. TYPE OF OPERATION					
<input type="checkbox"/> Demolition	<input type="checkbox"/> Renovation	<input checked="" type="checkbox"/> Ordered Demolition	<input type="checkbox"/> Emergency Renovation	<input type="checkbox"/> Intentional Burning	
IV. IS ASBESTOS PRESENT? <input type="checkbox"/> Yes <input type="checkbox"/> No					
V. PROCEDURES / ANALYTICAL METHODS USED TO DETECT THE PRESENCE AND AMOUNT OF ASBESTOS MATERIALS					
Licensed asbestos inspector on site during demolition.					
VI. APPROXIMATE AMOUNT OF ASBESTOS TO BE REMOVED AND/OR NOT TO BE REMOVED					
	Regulated ACM to be removed	Nonfriable Asbestos Material to be removed		Nonfriable Asbestos Material NOT to be removed	
		Category I	Category II	Category I	Category II
Pipes (Ln. Ft.)	unknown	unknown	unknown	unknown	unknown
Surface Area (Sq. Ft.)	unknown	unknown	unknown	unknown	unknown
Total Volume (Cu. Ft.)	unknown	unknown	unknown	unknown	unknown
Total amount on or off all facility components where length or area could not be measured previously	unknown	unknown	unknown	unknown	unknown
VII. SCHEDULED DATE OF STRIPPING / REMOVAL		Start (mm/dd/yy):		End (mm/dd/yy):	
VIII. SCHEDULED DATES OF RENOVATION / DEMOLITION					
Renovation	Start (mm/dd/yy): n/a	End (mm/dd/yy):			
Demolition	Start (mm/dd/yy): 8-28-25	End (mm/dd/yy): 9-27-25			
IX. FACILITY DESCRIPTION					
Building Name:					
Street Address: 2433 Broadway					
City: Gary		State: IN		County: Lake	
Location of removal within building (including floor and room numbers):		n/a			
Building Size (Sq. Ft.): 2500		Number of Floors: 1		Age / Year Built: 95 / 1930	
Present Use: vacant			Prior Use: commercial		

CST 33047
 Loc 3 seq 4

Linscott

City Of Gary Building Department

401 Broadway, Suite 307, Gary, IN 46402
(219) 881-1377/Fax: 881-1425

August 5, 2025

Via First Class Mail &

Certified Mail, Return Receipt Requested

TO: Ede & Rita J Warner
4209 Grant ST
Gary, IN 46408

RE: ~~2433~~ Broadway, Gary, IN 46407

Legal Description: OAK PARK DD. ALL OF LOTS 37,38,39 BL.17
Key No.: 45-08-15-155-005.000-004

**NOTICE OF EMERGENCY ORDER
TO DEMOLISH AN UNSAFE BUILDING**

Pursuant to I.C. 36-7-9-9, please be notified that after an inspection conducted by inspectors of the City of Gary Building Department, the premises ~~2433~~ Broadway; has been found to be unsafe and in an impaired structural condition posing an imminent danger to the life, health, and safety of passersby and persons occupying or using nearby property.

Please be notified that I am hereby exercising my authority as Building Commissioner for the City of Gary, Indiana, to declare that an emergency situation exists at these premises, to wit:

1. *Property is in a collapsed state with debris/bricks falling into the street.*
2. *Structure is in violation of I.C. 36-7-9-4, under the Unsafe Building Law:*
 - a) *is in an impaired structural condition that makes it unsafe to a person or property;*
 - b) *a hazard to the public health;*
 - c) *a public nuisance;*
 - d) *dangerous to a person or property because of a violation of a statute or ordinance concerning building condition or maintenance; and not maintained in a manner that would allow human habitation, occupancy, or use and considered an unsafe building.*

Therefore, pursuant to Indiana Code 36-7-9-9(a), please be advised that I have issued an order to an independent contractor to remove the imminent danger at said premises immediately, to wit: *demolish and remove the entire unsafe structure.* In the event that there is any personal property in these unsafe premises when the demolition

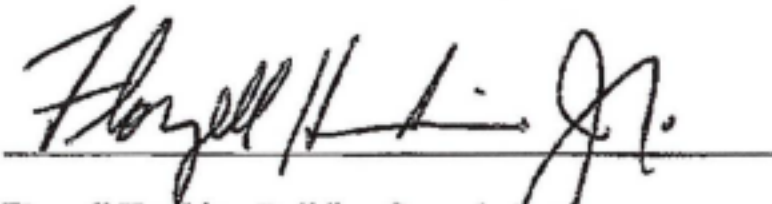
to remove the imminent danger begins and should the unremoved personal property also be demolished, the City of Gary will not be responsible or liable for the demolished personal property in the unsafe premises.

Indiana Code 36-7-9-9(a) reads in relevant part as follows:

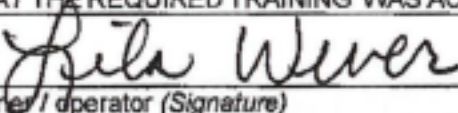
"If the enforcement authority finds it necessary to take emergency action concerning an unsafe premises in order to protect life, safety, or property, it may take that action without issuing an order or giving notice..."

Also, pursuant to I.C. 36-7-9-12, the City of Gary Building Department may recover any costs incurred by the enforcement of this emergency action by filing a civil action in the Circuit or Superior Court of Lake County, Indiana, against the persons who held a fee interest, life estate interest, or equitable interest of a contract purchaser in the unsafe and hazardous premises at the time the enforcement authority found it necessary to take emergency action. This department is not liable for the cost of this civil action.

DATED: July 31, 2025

A handwritten signature in black ink, appearing to read "Florzell Hawkins", is written over a horizontal line.

Florzell Hawkins, Building Commissioner
City of Gary Building Department
401 Broadway, Suite 307, Gary, IN 46402
(219) 881-1377

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, METHODS/TECHNIQUES TO BE USED, AFFECTED FACILITY COMPONENTS AND TYPE OF MATERIAL REMOVED			
Trucks will be lined and loaded with debris. Debris will be transported to Newton County Landfill and disposed of as ACM.			
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE SITE; INCLUDING ASBESTOS STRIPPING, REMOVAL AND WASTE HANDLING PROCEDURES TO PREVENT NONFRIABLE ASBESTOS MATERIAL FROM BECOMING FRIABLE IN THE COURSE OF THE PROJECT			
Water will be used during demolition to prevent emissions.			
XII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLLED, PULVERIZED, OR REDUCED TO POWDER			
Licensed asbestos contractor on site during demolition.			
XIII. ASBESTOS WASTE TRANSPORTER		XIV. ASBESTOS WASTE DISPOSAL SITE	
Name: C. Lee Construction Services, Inc.		Name: Republic Services	
Address: 1011 S. Lake St		Address: 2266 E 500 S	
City: Gary	State: IN	ZIP: 46403	City: Brook
			State: IN
			ZIP: 47922
Contact: Lila Wever	Telephone: 219-888-9554		Contact: Brian Ridge
E-mail: lwever@cleecsi.com			E-mail: BRidge@republicservices.com
XV. ORDER DEMOLITIONS			
Agency Name: City of Gary Building Department		Date Ordered Demolition to Begin (mm/dd/yy): 8-27-25	
Contact: Florzell Hawkins	Title: Bldg Commissioner	Telephone: 219-881-1377	E-mail: fhawkins@gary.gov
Regulatory Authority: IC 36-7-9-9 and IC 36-7-9-12		Date of Order (mm/dd/yy): 8-5-25	
XVI. EMERGENCY RENOVATIONS			
Date (mm/dd/yy) and Time of Emergency:			
Description of sudden, unexpected event:			
Explanation of how the event caused unsafe conditions or would cause equipment damage:			
XVII. CERTIFICATION STATEMENT AND SIGNATURE BY OWNER / OPERATOR			
I HEREBY CERTIFY THAT THE INFORMATION IN THIS NOTIFICATION IS CORRECT AND THAT I WILL ONLY USE INDIANA LICENSED WORKERS AND PROJECT SUPERVISORS, TO IMPLEMENT THIS ASBESTOS PROJECT, WHICH HAVE BEEN TRAINED IN 326IAC 14-10; 40 CFR PART 61, SUBPART M; AND, IF APPLICABLE, INDIANAPOLIS AIR POLLUTION CONTROL BOARD REGULATION 14. THE TRAINED INDIVIDUAL(S) ALONG WITH EVIDENCE THAT THE REQUIRED TRAINING WAS ACCOMPLISHED SHALL BE AVAILABLE AT THE JOB SITE DURING ACTUAL WORKING HOURS.			
		Date (mm/dd/yy): 8-27-25	E-mail: lwever@cleecsi.com
Owner / operator (Signature)			
Lila Wever		Title: Demolition Coordinator	
Owner / operator (Printed)			