



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

Received  
 State of Indiana

NOV 01 2022

276653-  
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<b>I. TYPE OF NOTIFICATION (check one):</b>		<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Revised	Dept of Environmental Mgmt <input type="checkbox"/> Dept of Air Quality	<input type="checkbox"/> Courtesy
<b>II. FACILITY INFORMATION</b>					
Owner / Operator: City of East Chicago Board of Works					
Address: 4526 Indianapolis Boulevard			City: East Chicago		State: IN ZIP: 46312
Contact: JAMES PORTALATIN			Telephone: 219-391-8294		E-mail: jportalatin@eastchicago.com
Asbestos Removal Contractor:			Demolition Contractor: Richardson Disposal		
Address:			Address: 620 E 10th Place		
City:	State:	ZIP:	City: Gary	State: IN	ZIP: 46402
Contact:		Telephone:	Contact: Al Richardson		Telephone: 219-944-4999
E-mail:			E-mail: richdisposal@gmail.com		
IN License Number:		Expiration:			
Licensed Asbestos Inspector: Jeff Rugg			Project Designer:		
Address: 54 Michigan Avenue			Address:		
City: Valparaiso	State: IN	ZIP: 46583	City:	State:	ZIP:
Contact: Jeff Rugg		Telephone: 219-531-0531	Contact:		Telephone:
E-mail: jrugg@amerecoeng.com			E-mail:		
IN License Number: 194722076		Expiration: 09-24-2021		IN License Number:	
Expiration:		Expiration:			
<b>III. TYPE OF OPERATION</b>					
<input checked="" type="checkbox"/> Demolition	<input type="checkbox"/> Renovation	<input type="checkbox"/> Ordered Demolition	<input type="checkbox"/> Emergency Renovation	<input type="checkbox"/> Intentional Burning	
<b>IV. IS ASBESTOS PRESENT?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>V. PROCEDURES / ANALYTICAL METHODS USED TO DETECT THE PRESENCE AND AMOUNT OF ASBESTOS MATERIALS</b>					
See attached					
<b>VI. APPROXIMATE AMOUNT OF ASBESTOS TO BE REMOVED AND/OR NOT TO BE REMOVED</b>					
	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.)					
Surface Area (Sq. Ft.)					
Total Volume (Cu. Ft.)					
Total amount on or off all facility components where length or area could not be measured previously					
<b>VII. SCHEDULED DATE OF STRIPPING / REMOVAL</b>		Start (mm/dd/yy):		End (mm/dd/yy):	
<b>VIII. SCHEDULED DATES OF RENOVATION / DEMOLITION</b>					
Renovation	Start (mm/dd/yy):	End (mm/dd/yy):			
Demolition	Start (mm/dd/yy): 11/15/2022	End (mm/dd/yy): 02/15/2023			
<b>IX. FACILITY DESCRIPTION</b>					
Building Name: None					
Street Address: 4833 McCook - Rear Structure & Garage (SEE OTHER ADDRESSES ATTACHED)					
City: East Chicago			State: IN		County: Lake
Location of removal within building (including floor and room numbers):		1,050 sq ft			
Building Size (Sq. Ft.):		Number of Floors: 1		Age / Year Built: 1922	
Present Use: VACANT			Prior Use: Single Family		

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276653 - Courtesy

ADDRESS: 4857 Wegg (Garage only) EAST CHICAGO INDIANA LAKE  
BUILDING SIZE SQ FT: 440 NUMBER OF FLOORS 1 YEAR BUILT 1921  
PRESENT USE: VACANT PRIOR USE: GARAGE

ADDRESS: 532 W 142nd (Rear structure) EAST CHICAGO INDIANA LAKE  
BUILDING SIZE SQ FT: 830 NUMBER OF FLOORS 1 YEAR BUILT 1917  
PRESENT USE: VACANT PRIOR USE: SINGLE FAMILY

276656

ADDRESS: 5013 Alexander (Garage only) EAST CHICAGO INDIANA LAKE  
BUILDING SIZE SQ FT: 480 NUMBER OF FLOORS 1 YEAR BUILT 1973  
PRESENT USE: VACANT PRIOR USE: GARAGE

276657 - Courtesy

ADDRESS: 3809 Deal (Garage only) EAST CHICAGO INDIANA LAKE  
BUILDING SIZE SQ FT: 440 NUMBER OF FLOORS 1 YEAR BUILT 1981  
PRESENT USE: VACANT PRIOR USE: GARAGE

276659 - Courtesy

ADDRESS: 4509 Tod (Garage only) EAST CHICAGO INDIANA LAKE  
BUILDING SIZE SQ FT: NUMBER OF FLOORS YEAR BUILT  
PRESENT USE: VACANT PRIOR USE: GARAGE

276660 - Courtesy

ADDRESS: 3926 Alexander EAST CHICAGO INDIANA LAKE  
BUILDING SIZE SQ FT: 940 NUMBER OF FLOORS 1 YEAR BUILT 1965  
PRESENT USE: VACANT PRIOR USE: SINGLE FAMILY

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**X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, METHODS/TECHNIQUES TO BE USED, AFFECTED FACILITY COMPONENTS AND TYPE OF MATERIAL REMOVED**

DEMOLITION IS A RAISED STRUCTURE. REMOVE ALL C & D AND DISPOSE AT ALLIED WASTE, BRICK/IRON TO BE RECYCLED, CAP ALL SEWERS, BACKFILL WITH B-BARROW MATERIALS & BRING TO ORIGINAL GRADE.

**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**

USE WATER TO CONTROL DUST AT SITE DURING DEMOLITION

**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**

STOP JOB, CALL ASBESTOS REMOVAL CONTRACTOR, CITY AND IDEM.

**XIII. ASBESTOS WASTE TRANSPORTER**

Name: RICHARDSON DISPOSAL  
 Address: 620 E 10TH PLACE  
 City: GARY State: IN ZIP: 46402  
 Contact: AL RICHARDSON Telephone: 219-944-4999  
 E-mail: RICHDISPOSAL@GMAIL.COM

**XIV. ASBESTOS WASTE DISPOSAL SITE**

Name: REPUBLIC SERVICES - NEWTON COUNTY LANDFILL  
 Address: 2266 E 500 SOUTH  
 City: BROOK State: IN ZIP: 47922  
 Contact: 219-394-7222  
 E-mail: BRIDGE@REPUBLICSERVICES.COM

**XV. ORDERD DEMOLITIONS**

Agency Name: Date Ordered Demolition to Begin (mm/dd/yy):  
 Contact: Title: Telephone: E-mail:  
 Regulatory Authority: Date of Order (mm/dd/yy):


**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.

Owner/Operator (Signature):  Date (mm/dd/yy): 11/1/2022 E-mail: RICHDISPOSAL@GMAIL.COM  
 Owner/Operator (Printed): Alfred Richardson Title: Demolition Contractor



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DEC 14 2022

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Dept. of Environmental Mgmt  
 Office of Air Quality

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City:	State:	ZIP:	City: Gary	State: IN	ZIP: 46402
Contact:	Telephone:	Contact: Al Richardson	Telephone: 219-944-4999		
E-mail:		E-mail: richdisposal@gmail.com			
IN License Number:	Expiration:				
Licensed Asbestos Inspector: Jeff Rugg		Project Designer:			
Address: 54 Michigan Avenue		Address:			
City: Valparaiso	State: IN	Zip: 46583	City:	State:	ZIP:
Contact: Jeff Rugg	Telephone: 219-531-0531		Contact:	Telephone:	
E-mail: jrugg@amerecoeng.com		E-mail:			
IN License Number: 194722076	Expiration: 09-24-2021		IN License Number:	Expiration:	
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Demolition	Start (mm/dd/yy): 01/09/2023	End (mm/dd/yy): 03/30/2023			
<b>IX. FACILITY DESCRIPTION</b>					
Building Name: None					
Street Address: 4858 Alexander Avenue					
City: East Chicago		State: IN		County: Lake	
Location of removal within building (including floor and room numbers):					
Building Size (Sq. Ft.): 2,772 sq ft		Number of Floors: 2		Age / Year Built: 1898	
Present Use: VACANT			Prior Use: Residence		

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Contact: Title:	Telephone: E-mail:
Regulatory Authority:	Date of Order (mm/dd/yy):

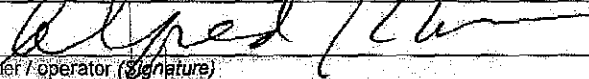
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	Date (mm/dd/yy): 12/14/2022	E-mail: RICHDISPOSAL@GMAIL.COM
Owner / operator (Signature)		
Alfred Richardson	Title: Demolition Contractor	
Owner / operator (Printed)		