

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue • Indianapolis, IN 46204

(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Eric J. Holcomb Governor Brian C. Rockensuess Commissioner

July 2, 2024

VIA ELECTRONIC MAIL

Mr. Chris Zumbaugh
Purdue University
2215 Alvord Street
Indianapolis, IN 46205
czumbauh@starenv.net

Re: Inspection Summary Letter

Purdue University Lilly Hall of Life Sciences

West Lafayette, Tippecanoe County

Dear Mr. Chris Zumbaugh:

On June 26, 2024, a representative of the Indiana Department of Environmental Management (IDEM), Office of Air Quality (OAQ), conducted an inspection of the Purdue University Lilly Hall of Life Sciences, 915 West Mitch Daniels Boulevard in West Lafayette, Indiana to determine compliance with Indiana's asbestos rules. This inspection was conducted pursuant to IC 13-14-2-2. For your information, and in accordance with IC 13-14-5, a summary of the inspection is provided below:

Inspection Type: Routine Demolition/Renovation Project

Inspection Results: No violations were observed

Please direct any questions to me at 317-233-6880 or by email at jcleveng@idem.in.gov.

Sincerely,

John Clevenger, Compliance Inspector

John Cleverger

Compliance Section 3
Office of Air Quality

ACES ID: 297722 299134

ENCLOSURE

cc: John Clevenger, Compliance and Enforcement Branch, Office of Air Quality

Mr. Ryan Tyson, Purdue University, 775 Ahlers Drive, West Lafayette, IN 47903,

rmtyson@purdue.edu

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY ASBESTOS FIELD INSPECTION REPORT



SITE INFORMATION						
SITE NAME/DESCRIPTION Purdue University Lilly Hall of Life Sciences						
SITE LOCATION	915 West Mitch Daniels Boulevard, West Lafayette, Indiana Tippecanoe County					

NOTIFICATION INFORMATION							
NOTIFICATION RECEIVED							
STRIPPING/REMOVAL DATES	6/6/2024 to 8/31/2024	DEMOLITION DATES	to				
CONTRACTOR INFORMATION	Mr. Chris Zumbaugh, Purdue University, 2215 Alvord Street, Indianapolis, IN 46205, czumbauh@starenv.net						
OWNER INFORMATION	Mr. Ryan Tyson, Purdue University, 775 Ahlers Drive, West Lafayette, IN 47903, rmtyson@purdue.edu						

INSPECTION INFORMATION							
INSPECTED BY	John Clevenger						
INSPECTION DATE AND TIME	June 26, 2024 TIME IN: 10:30 TIME OUT: 11:25						
REPORTED BY	John Clevenger REPORT DATE: July 2, 2024						
INSPECTION OBJECTIVE(S)	☑ Renovation ☐ Emergency Renovation ☐ Complaint ☐ Demolition ☐ Ordered Demolition ☐ Other:						
ACES TRACKING NUMBER(S)	Notification/General Inspection: 297722/299134						
ACES TRACKING NUMBER(S)	Complaint:	Violation/Warning:					
RM TRACKING NUMBER(S)	Complaint:						
PROJECT STATUS	Abatement completed.						

PERSONNEL INTERVIEWED							
Name	Company	Title	Phone Number	Email Address			
Ryan Tyson	Purdue University	Project Manager	765-426-7916	rmtyson@purdue.edu			

OBSERVATIONS							
GENERAL SITE OBSERVATIONS							
Description of area(s) inspected and location	n of material(s):						
Abatement completed.							
Pre-existing contamination in work area		☐ Yes	⊠ No	☐ Not Ob:	served [□ N/A	4
Contractor equipment on site		☐ Yes	⊠ No	☐ Not Ob:	served [□ N/A	4
Asbestos removal in progress		☐ Yes	⊠ No	☐ Not Ob:	served [□ N/A	4
Accreditation cards available for inspection		☐ Yes	□ No	☐ Not Ob:	served [⊠ N/A	4
ABATEMENT							
Asbestos removal clearly observed		☐ Yes	□ No	☐ Not Ob:	served [⊠ N/A	4
If yes, from where:		☐ Throu	ıgh viewir	ng ports 🛚	By entering	ng en	closures
		☐ Direct	t observa	tion (No end	closures)		
Estimated amounts of RACM removed/distu	rhed	0 line	ar feet	80	00 square		
Estimated amounts of to tolly removed/dista			ic feet		0 % of to		
Abatement method(s) observed:			ng and st	11 0	Unit/Sect	ional	
. ,		☐ Glove	ebag meth	nod 🗆	Dry		
ISOLATION							
Warning signs displayed outside work area		☐ Yes	□ No	□ Not Obs		⊠ N/A	
Objects within work area covered		□ Yes	□ No	□ Not Ob		⊠ N/A	
Evidence of water in containment		☐ Yes	□ No	□ Not Ob:	served [⊠ N/A	4
ASBESTOS WASTE HANDLING		☐ Yes					
Stripped asbestos adequately wet			□ No	□ Not Ob		⊠ N/A	
Stripped asbestos placed in leak tight wrapping			□ No	☐ Not Ob:		⊠ N/A	
Waste bags labeled with generator and warning labels			□ No	☐ Not Ob		⊠ N/A	
Any visible emissions			⊠ No	☐ Not Ob:	served [□ N/A	4
CLEANING		⊠ Yes					
Work area clear of visible signs of asbestos material			☐ No	☐ Not Ob		□ N/A	
Plastic sheeting disposed of as asbestos waste			☐ No	Not Obs		□ N/ <i>A</i>	
Area wet wiped/HEPA vacuumed		⊠ Yes	☐ No	☐ Not Ob:		□ N/A	
Final visual inspection completed		⊠ Yes	☐ No	☐ Not Ob	served [□ N/A	4
STORAGE							
Material remaining on site securely stored		☐ Yes	□ No	☐ Not Ob	served [⊠ N/A	4
Warning signs/labels posted outside storage	area	☐ Yes	☐ No	☐ Not Ob	served [⊠ N/A	4
ASBESTOS WASTE DISPOSAL							
Waste disposed of at an approved landfill	☐ Yes	□ No	Not Obs	served [□ N/A	4	
Name and location of landfill							
ACM AMOUNTS							
If violation(s) noted, estimated amount of ACM involved:							
ADDITIONAL COMMENTS							
Upon arrival at the Life Sciences Building on the Purdue campus, I met with Mr. Ryan Tyson with Purdue University.							
Mr. Tyson informed me that the abatement was completely checked for suspect asbesto						ne w	ork area
was completely offected for suspect aspest	os containing ast	วองเบอ นิยิ	bilio allu	HOHE WAS OF	osci veu.		
SAMPLE INFORMATION							
Sample ID Photo No. Sample Location/	Description	Chain of	Custody	Complete	Sent to L	ab	Results

Purdue University Lilly Hall of Life Sciences Inspection Report Page 3 of 3 $\,$

 $\ \square \ \mathsf{None}$

		☐ Yes ☐ No ☒ N/A					
ADDITIONAL SAMPLING COMMENTS							
None							
INSPECTIO	N FINDINGS						
☑ No violations were observed or determined at the time of the inspection.							
RECOMME	NDED ACTIC	N Issue inspection summary letter.					
EXIT INTER	VIEW	I explained my findings, recommendations, and conclusions with Mr. Tyson prior to exiting the site					
ATTACHME	NTS						

 \square Other:

 \square List of licensed personnel



NOTIFICATION OF DEMOLITION AND RENOVATION OPERATIONS
State Form 44593 (R3 / 9-18)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

I. TYPE OF NOTIFICATION (che	eck one):	☑ Origina	al	Revi	sed	☐ Canceled	d	☐ Courtesy		
II. FACILITY INFORMATION	All Sales of Colors Grants									
Owner / Operator: Purdue University										
Address: 775 Ahlers Drive	City: West	Lafayette			State: IN ZIP: 47903					
Contact: Ryan Tyson			Telephone: 765-426-7916				E-mail: rm	ntyson@purdue.edu		
Asbestos Removal Contractor: Star	Environmental, In	c.	Demolition Contractor: NA							
Address: 2215 Alvord Street			Address:							
City: Indianapolis	State: IN ZI	P: 46205	City:				State:	ZIP:		
Contact: Chris Zumbaugh	Telephone: 317-2	94-2235	Contact:				Telephone:			
E-mail: czumbaugh@starenv.net			E-mail:							
IN License Number: 190106071	Expiration: 07/12	/2024								
	my Malcom		Project Des	igner; NA						
Address: 130 E. Washington Stre	et		Address:							
City: Indianapolis	State: IN ZI	P: 46204	City:				State:	ZIP:		
Contact: Jeremy Malcom	Telephone: 317-7	50-9504	Contact:				Telephone	e:		
E-mail: JMalcom@tandmassocia			E-mail:							
IN License Number: 19A001700	Expiration: 01/12	/2024	IN License	Number:			Expiration	:		
III. TYPE OF OPERATION										
☐ Demolition ☑	Renovation		Ordered Den	nolition	☐ Emerge	ncy Renovation	on 🗆 Ir	ntentional Burning		
IV. IS ASBESTOS PRESENT?	☑ Yes □	No								
V. PROCEDURES / ANALYTIC	AL METHODS US	ED TO DI	ETECT THE	PRESEN	ICE AND AMO	UNT OF AS	BESTOS I	MATERIALS		
PLM analysis of bulk samples.										
VI. APPROXIMATE AMOUNT O			OVED AND	OR NOT	TO BE REMO	VED				
and the second of the second of the second	Regulated ACM to be removed		iable Asbesto	s Material	to be removed	Nonfriable A	sbestos Mai	terial NOT to be removed		
			ategory I		ategory II	Catego				
Pipes (Ln. Ft.)										
Surface Area (Sq. Ft.)	800 Sq. Ft.									
Total Volume (Cu. Ft.)										
Total amount on or off all facility components where length or area could not be measured										
previously								WHAT STATE OF THE		
VII. SCHEDULED DATE OF ST			art (mm/dd/yy):	06/06/20	24 End (mm	/dd/yy): 8/31/2	024			
VIII. SCHEDULED DATES OF F				4400						
	_{d/yy):} 06/06/2024		/dd/yy): 12/3	1/2024	Commence of the com-			The state of the s		
Demolition Start (mm/dd/yy): End (mm/dd/yy):						Committee (California Adams)				
IX. FACILITY DESCRIPTION										
Building Name: Lilly Hall of Life Sciences										
Street Address: 915 Mitch Daniels Boulevard										
City: West Lafayette Location of removal within building	_			Sta	te: IN		County: Tip	pecanoe		
(including floor and room numbers):	Room #1401									
Building Size (Sq. Ft.): 389,782 Sc	η. Ft.	Num	ber of Floors		Age / Year Bu	_{uilt:} 1951				
Present Use: School				Prior Use:	School					

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, METHODS/TECHNIQUES TO BE USED, AFFECTED FACILITY COMPONENTS AND TYPE OF MATERIAL REMOVED Project involves removal of acm fireproofing insulation to facilitate HVAC renovation. 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 Full containment, critical barriers, negative pressure, and a decon unit will be utilized. Materials will be removed wet, and placed in sealed, leak proof containers for disposal at an EPA approved landfill. XII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER Work will cease. Re-notification will be made if necessary. Accredited personnel will remove the acm using appropriate methods. XIII. ASBESTOS WASTE TRANSPORTER XIV. ASBESTOS WASTE DISPOSAL SITE Name: Republic Services of Lafayette Name: Walnut Creek Landfill Address: 3304 Concorde Road Address: 2701 N. State Road 39 City: Lafayette State: IN ZIP: 47909 City: Frankfort State: IN ZIP: 46041 Contact: Dispatch Telephone: 765-496-6467 Contact: Gate House E-mail: E-mail: XV. ORDERD DEMOLITIONS Agency Name: NA 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: NA 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): 5/23/2024 E-mail: czumbaugh@starenv.net

Chris T. Zumbaugh

Owner / operator (Printed)