



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We Protect Hoosiers and Our Environment.

Northwest Regional Office • 330 W. U.S. Hwy 30, Suite F • Valparaiso, IN 46385

(888) 209-8892 • (219) 464-0053 • www.idem.IN.gov

Eric J. Holcomb
Governor

Brian C. Rockensuess
Commissioner

July 5, 2024

VIA ELECTRONIC MAIL

Ms. Lila Wever
C. Lee Construction Services
1011 S. Lake Street
Gary, IN 46409
lwever@cleecsi.net

Re: Inspection Summary Letter
Former Norton School Abatement
Gary, Lake County

Dear Ms. Lila Wever:

On July 1, 2024, a representative of the Indiana Department of Environmental Management (IDEM), Northwest Regional Office (NWRO), conducted an inspection of Former Norton School Abatement, located at 1356 Harrison Blvd. in Gary, 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 219-216-3657 or by email at jlinscot@idem.in.gov.

Sincerely,

Jessica Linscott, Compliance Inspector
Northwest Regional Office

ACES ID: 298735

ENCLOSURE

cc: Mrs. Jessica Linscott, Compliance and Enforcement Branch, NWRO
Ms. Corrine Rensch, Gary Community School Corporation, 3840 Georgia Street, Gary, IN 46409, crensch@garycsc.k12.in.us
Mr. Tyson Lovelace, Safe Environmental Corporation, 1006 165th Street, Hammond, IN 46324, tlovelace@safe-env.com

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



SITE INFORMATION	
SITE NAME/DESCRIPTION	Former Norton School Abatement
SITE LOCATION	1356 Harrison Blvd., Gary, Indiana Lake County

NOTIFICATION INFORMATION			
NOTIFICATION RECEIVED	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	ORIGINAL DATE RECEIVED: Unknown	
STRIPPING/REMOVAL DATES	7/1/2024 to 7/28/2024	DEMOLITION DATES	7/29/2024 to 9/27/2024
CONTRACTOR INFORMATION	Ms. Lila Wever, C. Lee Construction Services, 1011 S. Lake Street, Gary, IN 46409, lwever@cleecsi.net		
OWNER INFORMATION	Ms. Corrine Rensch, Gary Community School Corporation, 3840 Georgia Street, Gary, IN 46409, crensch@garycsc.k12.in.us		

INSPECTION INFORMATION			
INSPECTED BY	Mrs. Jessica Linscott		
INSPECTION DATE AND TIME	July 1, 2024	TIME IN: 11:45 AM	TIME OUT: 12:30 PM
REPORTED BY	Mrs. Jessica Linscott	REPORT DATE: July 2, 2024	
INSPECTION OBJECTIVE(S)	<input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Emergency Renovation <input type="checkbox"/> Complaint <input type="checkbox"/> Demolition <input type="checkbox"/> Ordered Demolition <input type="checkbox"/> Other:		
ACES TRACKING NUMBER(S)	Notification/General Inspection: 298735		
	Complaint: N/A	Violation/Warning: N/A	
RM TRACKING NUMBER(S)	Complaint: N/A		
PROJECT STATUS	Abatement of the former Newton School has not begun.		

PERSONNEL INTERVIEWED				
Name	Company	Title	Phone Number	Email Address
Mr. Juan M. Gutierrez	Safe Environmental Corporation	Asbestos Project Supervisor	N/A	N/A

OBSERVATIONS				
GENERAL SITE OBSERVATIONS				
Description of area(s) inspected and location of material(s): Removal of asbestos containing material (ACM) from pipe insulation, pipe fittings, boiler, and various other areas of ACM debris via the glovebag removal method and wetting/stripping in a full containment throughout two floors and the basement will be conducted.				
Pre-existing contamination in work area	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Contractor equipment on site	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input type="checkbox"/> N/A
Asbestos removal in progress	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input type="checkbox"/> N/A
Accreditation cards available for inspection	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input type="checkbox"/> N/A
ABATEMENT				
Asbestos removal clearly observed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
If yes, from where:	<input type="checkbox"/> Through viewing ports <input type="checkbox"/> By entering enclosures <input type="checkbox"/> Direct observation (No enclosures)			
Estimated amounts of RACM removed/disturbed	N/A linear feet N/A cubic feet		N/A square feet N/A % of total	
Abatement method(s) observed:	<input type="checkbox"/> Wetting and stripping <input type="checkbox"/> Glovebag method		<input type="checkbox"/> Unit/Sectional <input type="checkbox"/> Dry	
ISOLATION				
Warning signs displayed outside work area	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input type="checkbox"/> N/A
Objects within work area covered	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Evidence of water in containment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
ASBESTOS WASTE HANDLING				
Stripped asbestos adequately wet	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Stripped asbestos placed in leak tight wrapping	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Waste bags labeled with generator and warning labels	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Any visible emissions	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input type="checkbox"/> N/A
CLEANING				
Work area clear of visible signs of asbestos material	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Plastic sheeting disposed of as asbestos waste	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Area wet wiped/HEPA vacuumed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Final visual inspection completed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
STORAGE				
Material remaining on site securely stored	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Warning signs/labels posted outside storage area	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
ASBESTOS WASTE DISPOSAL				
Waste disposed of at an approved landfill	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not Observed	<input type="checkbox"/> N/A
Name and location of landfill	Laraway Landfill 21233 W. Laraway Road Joliet, IL 60436			
ACM AMOUNTS				
If violation(s) noted, estimated amount of ACM involved:	N/A			
ADDITIONAL COMMENTS				
Upon arrival at 1356 Harrison Blvd., I was greeted by Mr. Juan M. Gutierrez, Asbestos Project Supervisor with Safe Environmental Corporation. Mr. Gutierrez advised me that the crew was currently building containment and cleaning up trash debris that was still inside the building, so the crew can gain access to the ACM locations throughout the				

building. The ACM waste dumpster was lined with no ACM currently inside. No areas have been abated as of the time of my inspection. Mr. Gutierrez showed me the boiler where he planned to remove three (3) linear feet of ACM before the end of the day. Mr. Gutierrez gave me a tour of the rest of the building and showed me the areas where abatement will occur. The entire work area was checked for suspect asbestos containing debris and none was located. Before leaving the site, I checked and recorded the crew's asbestos licenses. Please see attached sheet.

SAMPLE INFORMATION

Sample ID	Photo No.	Sample Location/Description	Chain of Custody Complete	Sent to Lab	Results
N/A	N/A	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	... N/A	N/A

ADDITIONAL SAMPLING COMMENTS

N/A

INSPECTION FINDINGS

- No violations were observed or determined at the time of the inspection.
- The following violations were determined at the time of the inspection:

RECOMMENDED ACTION	Issue inspection summary letter.
EXIT INTERVIEW	I explained my findings, recommendations, and conclusions with Mr. Guitierrez prior to exiting the site.

ATTACHMENTS

- None Notification(s) List of licensed personnel Other:

ASBESTOS LICENSING PERSONNEL LIST

Inspected By: Jessica Linscott
Site Location: 1356 Harrison Blvd. Gary, IN

Inspection Date: 07/01/2024

Contractor Name: Safe Environmental Corporation
License Number: 193721047 Expiration Date: 12/08/2024

Circle appropriate license type:

Worker/Supervisor Name: Juan M. Gutierrez
License Number: 19A005442 Expiration Date: 03/20/2025

Worker/Supervisor Name: Luis David Sarmiento
License Number: 19A011595 Expiration Date: 10/30/2024

Worker/Supervisor Name: Pascual Preciado
License Number: 19A015793 Expiration Date: 06/20/2025

Worker/Supervisor Name: Erik Estrada
License Number: 19A009469 Expiration Date: 08/06/2024

Worker/Supervisor Name: Alvaro Rubio
License Number: 19A012404 Expiration Date: 09/20/2024

All licensing information was verified by the inspector with *MyLicense* JLL 07/02/2024

(Inspector Initials & Date Verified)



NOTIFICATION OF DEMOLITION AND RENOVATION OPERATIONS

State Form 44593 (R4 / 10-18)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

I. TYPE OF NOTIFICATION (check one):		<input type="checkbox"/> Original	<input checked="" type="checkbox"/> Revised # 2	<input type="checkbox"/> Canceled	<input type="checkbox"/> Courtesy
II. FACILITY INFORMATION					
Owner / Operator: Gary Community School Corporation					
Address: 3840 Georgia St		City: Gary		State: IN	ZIP: 46409
Contact: Corrine Rensch		Telephone: (312) 579-8212		E-mail: crensch@garycsc.k12.in.us	
Asbestos Removal Contractor: Safe Environmental		Demolition Contractor: C Lee Construction Services			
Address: 1006 165th Street		Address: 1011 S Lake St			
City: Hammond	State: IN	ZIP: 46324	City: Gary	State: IN	ZIP: 46403
Contact: Tyson Lovelace	Telephone: 219-922-0844		Contact: Lila Wever	Telephone: 219-888-9554	
E-mail: tlovelace@safe-env.com		E-mail: lwever@cleecsi.com			
IN License Number: 193721047		Expiration: 5/17/25			
Licensed Asbestos Inspector: Jeff Rugg		Project Designer: n/a			
Address: 54 Michigan Ave		Address:			
City: Valparaiso	State: IN	ZIP: 46383	City:	State:	ZIP:
Contact: Amereco Engineering	Telephone:		Contact:	Telephone:	
E-mail: jrugg@amerecoeng.com		E-mail:			
IN License Number: 194722071		Expiration:		IN License Number:	
Expiration:		Expiration:		Expiration:	
III. TYPE OF OPERATION					
<input checked="" type="checkbox"/> Demolition	<input type="checkbox"/> Renovation	<input type="checkbox"/> Ordered Demolition	<input type="checkbox"/> Emergency Renovation	<input type="checkbox"/> Intentional Burning	
IV. IS ASBESTOS PRESENT? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
V. PROCEDURES / ANALYTICAL METHODS USED TO DETECT THE PRESENCE AND AMOUNT OF ASBESTOS MATERIALS					
Bulk Sample - PLM Method.					
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.)	450	0	0	0	0
Surface Area (Sq. Ft.)	665	141,750	150	0	0
Total Volume (Cu. Ft.)	0	0	0	0	0
Total amount on or off all facility components where length or area could not be measured previously	0	0	0	0	0
VII. SCHEDULED DATE OF STRIPPING / REMOVAL		Start (mm/dd/yy): 7-1-24		End (mm/dd/yy): 7-28-24	
VIII. SCHEDULED DATES OF RENOVATION / DEMOLITION					
Renovation	Start (mm/dd/yy): n/a	End (mm/dd/yy):			
Demolition	Start (mm/dd/yy): 7-29-24	End (mm/dd/yy): 9-27-24			
IX. FACILITY DESCRIPTION					
Building Name: Former Norton School					
Street Address: 1356 Harrison Blvd					
City: Gary		State: IN		County: Lake	
Location of removal within building (including floor and room numbers):		throughout			
Building Size (Sq. Ft.): 92,968		Number of Floors: 2		Age / Year Built: 64 / 1960	
Present Use: vacant		Prior Use: school			

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

All asbestos abatement will be done within regulated work areas prior to any demolition. Demolition will be done using heavy equipment. Debris will be transported to a licensed transfer station.

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

All asbestos abatement is to be done using wet work methods to prevent emission of any asbestos. ACM pipe insulation will be removed using glovebag removal methods.
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 CRUMBLED, PULVERIZED, OR REDUCED TO POWDER

Stop work, isolate areas, determine if suspected material is actually RACM, and notify appropriate agencies. Contact licensed asbestos contractor to remove all ACM prior to continuation of work.

XIII. ASBESTOS WASTE TRANSPORTER

Name: Homewood Disposal
Address: 1501 W 175th Street
City: Homewood State: IL ZIP: 60430
Contact: Greg Piersma Telephone: 708-798-1004
E-mail:

XIV. ASBESTOS WASTE DISPOSAL SITE

Name: Laraway Landfill
Address: 21233 W Laraway Rd
City: Joliet State: IL ZIP: 60436
Contact: Front Office
E-mail: 815-727-6148

XV. ORDER DEMOLITIONS

Agency Name: n/a 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: n/a
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.

Lila Wever Date (mm/dd/yy): 6-25-24 E-mail: lwever@cleecsi.com
Owner / operator (Signature)

Lila Wever Title: Demolition Coordinator
Owner / operator (Printed)



NOTIFICATION OF DEMOLITION AND RENOVATION OPERATIONS

State Form 44593 (R4 / 10-18)
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Address: 1006 165th Street			Address: 1011 S Lake St		
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E-mail: tlovelace@safe-env.com			E-mail: lwever@cleecsi.com		
IN License Number: 193721047		Expiration: 5/17/25			
Licensed Asbestos Inspector: Jeff Rugg			Project Designer: n/a		
Address: 54 Michigan Ave			Address:		
City: Valparaiso	State: IN	ZIP: 46383	City:	State:	ZIP:
Contact: Amereco Engineering	Telephone:		Contact:	Telephone:	
E-mail: jrugg@amerecoeng.com			E-mail:		
IN License Number: 194722071		Expiration:		IN License Number:	
Expiration:		Expiration:		Expiration:	
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<input checked="" type="checkbox"/> Demolition	<input type="checkbox"/> Renovation	<input type="checkbox"/> Ordered Demolition	<input type="checkbox"/> Emergency Renovation	<input type="checkbox"/> Intentional Burning	
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Surface Area (Sq. Ft.)	665	141,750	150	0	0
Total Volume (Cu. Ft.)	0	0	0	0	0
Total amount on or off all facility components where length or area could not be measured previously	0	0	0	0	0
VII. SCHEDULED DATE OF STRIPPING / REMOVAL		Start (mm/dd/yy): 6-26-24		End (mm/dd/yy): 7-28-24	
VIII. SCHEDULED DATES OF RENOVATION / DEMOLITION					
Renovation	Start (mm/dd/yy): n/a		End (mm/dd/yy):		
Demolition	Start (mm/dd/yy): 7-29-24		End (mm/dd/yy): 9-27-24		
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City: Homewood

State: IL

ZIP: 60430

Contact: Greg Piersma

Telephone: 708-798-1004

E-mail:

XIV. ASBESTOS WASTE DISPOSAL SITE

Name: Laraway Landfill

Address: 21233 W Laraway Rd

City: Joliet

State: IL

ZIP: 60436

Contact: Front Office

E-mail: 815-727-6148

XV. ORDER DEMOLITIONS

Agency Name: n/a

Date Ordered Demolition to Begin (mm/dd/yy):

Contact:

Title:

Telephone:

E-mail:

Regulatory Authority:

Date of Order (mm/dd/yy):

XVI. EMERGENCY RENOVATIONS

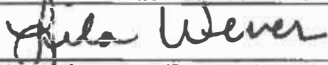
Date (mm/dd/yy) and Time of Emergency: n/a

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): 6-20-24

E-mail: lwever@cleeci.com

Owner / operator (Signature)

Lila Weaver

Title: Demolition Coordinator

Owner / operator (Printed)