



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

June 26, 2024

VIA ELECTRONIC MAIL

Mr. Jeff McKernan
JM Industrial Services, Inc.
416 N. State Road 55
Fair Oaks, IN 47943
jmwreck@sbcglobal.net

Re: Inspection Summary Letter
Gary Commercial Building Ordered Demo
Gary, Lake County

Dear Mr. Jeff McKernan:

On June 21, 2024, a representative of the Indiana Department of Environmental Management (IDEM), Northwest Regional Office (NWRO), conducted an inspection of the Gary Commercial Building Ordered Demo, located at 5701 W. 5th Ave. 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: Ordered Demolition 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: ACES ID
298741

ENCLOSURE

cc: Mrs. Jessica Linscott, Compliance and Enforcement Branch, NWRO
Mr. Cedric Kuykendall, City of Gary, 504 Broadway, Gary, IN, 46402,
ckuykendall@gary.gov

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



SITE INFORMATION	
SITE NAME/DESCRIPTION	Gary Commercial Building Ordered Demo
SITE LOCATION	5701 W. 5th Ave., Gary, Indiana Lake County

NOTIFICATION INFORMATION			
NOTIFICATION RECEIVED	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	ORIGINAL DATE RECEIVED: Unknown	
STRIPPING/REMOVAL DATES	N/A	DEMOLITION DATES	6/17/2024 to 9/30/2024
CONTRACTOR INFORMATION	Mr. Jeff McKernan, JM Industrial Services, Inc., 416 N. State Road 55, Fair Oaks, IN 47943, jmwreck@sbcglobal.net		
OWNER INFORMATION	Mr. Cedric Kuykendall, City of Gary, 504 Broadway, Gary, IN, 46402, ckuykendall@gary.gov		

INSPECTION INFORMATION			
INSPECTED BY	Mrs. Jessica Linscott		
INSPECTION DATE AND TIME	June 21, 2024	TIME IN: 9:15 AM	TIME OUT: 9:45 AM
REPORTED BY	Mrs. Jessica Linscott	REPORT DATE:	
INSPECTION OBJECTIVE(S)	<input type="checkbox"/> Renovation <input type="checkbox"/> Emergency Renovation <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Demolition <input checked="" type="checkbox"/> Ordered Demolition <input type="checkbox"/> Other:		
ACES TRACKING NUMBER(S)	Notification/General Inspection: ACES ID		
	Complaint: N/A	Violation/Warning: N/A	
RM TRACKING NUMBER(S)	Complaint: N/A		
PROJECT STATUS	Ordered demolition of the former commercial building has begun.		

PERSONNEL INTERVIEWED				
Name	Company	Title	Phone Number	Email Address
N/A	N/A	N/A	N/A	N/A

OBSERVATIONS				
GENERAL SITE OBSERVATIONS				
Description of area(s) inspected and location of material(s): Upon arrival at 5701 W. 5 th Ave., I was able to determine that the demolition of the former Gary commercial building had begun. No one from the demolition company was onsite at the time of my inspection. I was able to check the site for suspect asbestos containing debris and none was observed.				
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 type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Accreditation cards available for inspection	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
ABATEMENT				
Asbestos removal clearly observed If yes, from where:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
	<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 type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" 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 type="checkbox"/> No	<input type="checkbox"/> Not Observed	<input checked="" 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 type="checkbox"/> Not Observed	<input checked="" type="checkbox"/> N/A
Name and location of landfill	N/A			
ACM AMOUNTS				
If violation(s) noted, estimated amount of ACM involved:	N/A			
ADDITIONAL COMMENTS				
None				

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	
<input checked="" type="checkbox"/> No violations were observed or determined at the time of the inspection. <input type="checkbox"/> The following violations were determined at the time of the inspection:	
RECOMMENDED ACTION	Issue inspection summary letter.
EXIT INTERVIEW	No exit interview was conducted, as no one from the demolition company was on site at the time of my inspection.

ATTACHMENTS	
<input type="checkbox"/> None <input checked="" type="checkbox"/> Notification(s) <input type="checkbox"/> List of licensed personnel <input type="checkbox"/> Other:	



NOTIFICATION OF DEMOLITION AND RENOVATION OPERATIONS

State Form 44593 (R4 / 10-18)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

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: 504 Broadway			City: Gary	State: IN	ZIP: 46402
Contact: Cedric Kuykendall			Telephone: 219-886-1531	E-mail: ckuykendall@gary.gov	
Asbestos Removal Contractor:			Demolition Contractor: JM Industrial Services, Inc.		
Address:			Address: 416 N. State Road 55		
City:	State:	ZIP:	City: Fair Oaks	State: IN	ZIP: 47943
Contact:		Telephone:	Contact: Jeff Mckernan		Telephone: 219-937-5075
E-mail:			E-mail: jmwreck@sbcglobal.net		
IN License Number:		Expiration:			
Licensed Asbestos Inspector: Robert Rumsey-Lake County Env Svcs, LLC			Project Designer: NA		
Address: 2158 45th Street			Address:		
City: Highland	State: IN	ZIP: 46322	City:	State:	ZIP:
Contact: Robert Rumsey		Telephone: 219-455-1239	Contact:		Telephone:
E-mail: LakeCountyServices82@gmail.com			E-mail:		
IN License Number: 19AD13954		Expiration: 5/23/25		IN License Number:	
Expiration:		Expiration:			
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 checked="" type="checkbox"/> No					
V. PROCEDURES / ANALYTICAL METHODS USED TO DETECT THE PRESENCE AND AMOUNT OF ASBESTOS MATERIALS					
PLM. .					
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.)					
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					
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):		End (mm/dd/yy):		
Demolition	Start (mm/dd/yy): 06/17/24		End (mm/dd/yy): 9/30/24		
IX. FACILITY DESCRIPTION					
Building Name:					
Street Address: 5701 W. 5th Avenue					
City: Gary			State: IN		County: Lake
Location of removal within building (including floor and room numbers):					
Building Size (Sq. Ft.): 10,526		Number of Floors: 2		Age / Year Built: 1949	
Present Use: vacant			Prior Use: Commercial		

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

The building will be demolished with an excavator and other misc. equipment.

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

A licensed asbestos inspector will be on site during the demolition. The site will be secured and safety measures will be taken to prevent emissions. The crew will adequately wet the materials during demolition.

XII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLER, PULVERIZED, OR REDUCED TO POWDER

Demo will stop, all parties will be notified immediately. A revised notification will be sent to IDEM. A licensed asbestos inspector will be hired to remove asbestos.

XIII. ASBESTOS WASTE TRANSPORTER

Name:
Address:
City: State: ZIP:
Contact: Telephone:
E-mail:

XIV. ASBESTOS WASTE DISPOSAL SITE

Name:
Address:
City: State: ZIP:
Contact:
E-mail:

XV. ORDERED DEMOLITIONS

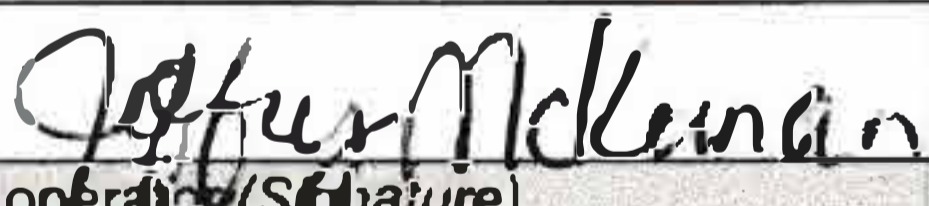
Agency Name: City of Gary	Date Ordered Demolition to Begin (mm/dd/yy): 06/12/24
Contact: FlorZell Hawkins Jr. Title: Buidling Commsisioner	Telephone: 219-881-1377 E-mail: fhawkins@gary.gov
Regulatory Authority: City of Gary - Building Commissioner	Date of Order (mm/dd/yy):

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): 6/14/24	E-mail: jmwreck@sbcglobal.net
Owner / operator (Signature)		
Jeffrey Mckernan	Title: President	
Owner / operator (Printed)		

EMERGENCY ORDER

Date: 6-12-24

TO: City of Gary Department of Commerce
Redevelopment Division (Demolition)
504 Broadway, Suite 200
Gary, Indiana 46402

I am acting pursuant to Section 9, of the Indiana Code, I. C. 36-7-9-9 and Section 162.01 of the City of Gary, Indiana Code of Ordinances entitled "The Unsafe Building (s) Ordinance."

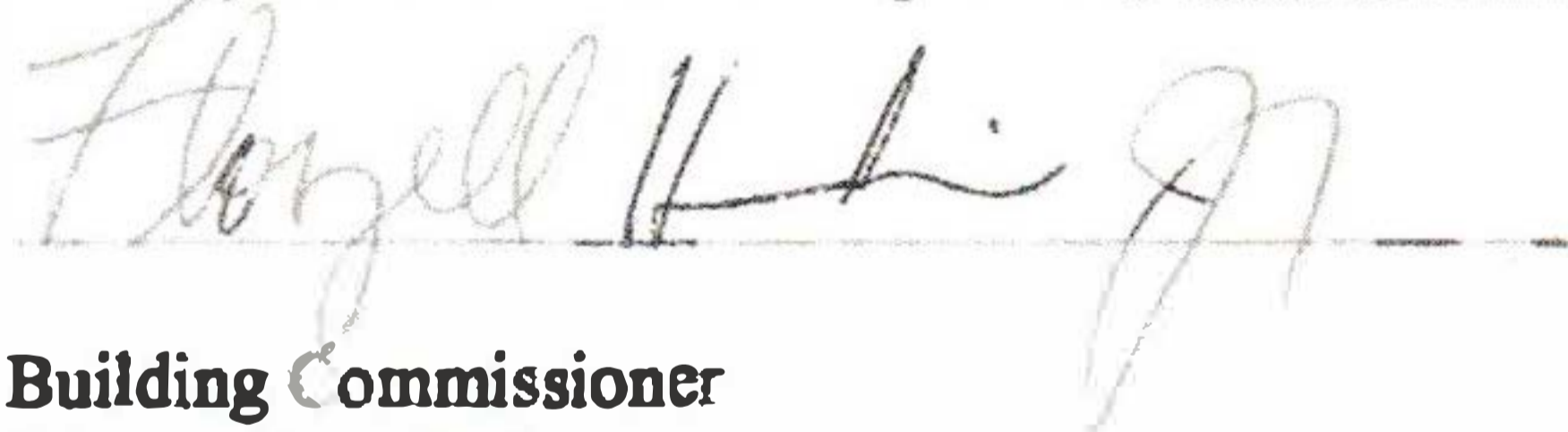
As a result of the inspection, I have determined that the Building (s) and premises Commonly 5701 W. 5th Ave situated in Gary, Indiana and legally described as:

Legal: Gary City Estates L. 1 Bl. G All lots 2, 3, & 4 Bl. E & VAC.
EAST W. of Adj. Alley
Parcel: 45-07-01-328-003.000-004

is/are Unsafe, for the reasons set forth in the inspection reports, copies of which may be obtained from the Building Department.

I hereby order that the Building(s) must be **DEMOLISHED**.

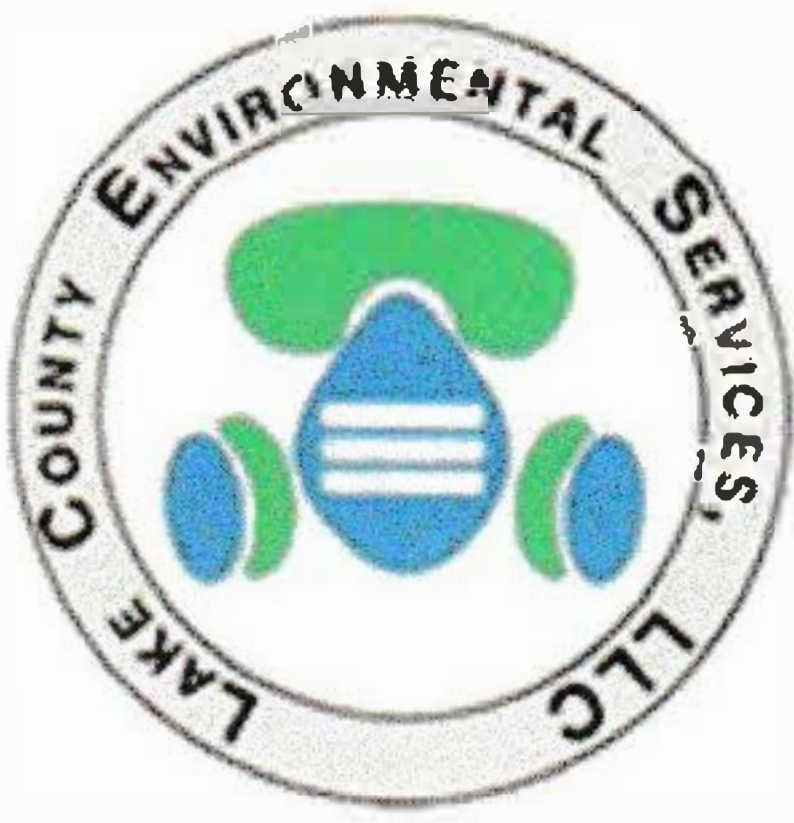
Such operations must be completed by 8-31-24.



Building Commissioner
City of Gary, Indiana

cc: File

City of Gary
839 Broadway
Gary, IN 46402
PROPERTY OWNER



Lake County Environmental Services, LLC

2158 45th Street - Suite #155
Highland, Indiana 46322

LakeCountyServices82@gmail.com

Cell: 219-455-1239
Office: 219-307-8850

06/14/24

An Inspector from Lake County Environmental Services, LLC will be onsite during the completion of the Demo of 5701 5th Ave., Gary, IN.. If any suspected ACM is located work will be stopped immediately and either sent for sampling or assumed positive and removed by a Licensed Indiana Asbestos Abatement Contractor. All removal if any will be performed by Industrial Insulation Solution, Inc

Sincerely,
Lake County Environmental Services, LLC
Robert Rumsey