



INVESTIGATION SAMPLING STATEMENT OF WORK

The Lincoln County Asbestos Resource Program (ARP) has determined that investigation sampling of your property is necessary to determine whether Libby Amphibole Asbestos (LA) is present at a level that would warrant Superfund abatement actions. This Statement of Work (SOW) was developed in accordance to the Montana Department of Environmental Quality (DEQ) *Operations and Maintenance Manual* and DEQ's *Operations and Maintenance Sampling Guidance*.

Date:	8/30/2023	Person Completing Form:	Stephanie Michalkiewicz
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PROPERTY INFORMATION			
Owner Name:	Nathan Weis		
Address:	GID 4434 (134 Parmenter Creek Rd), Libby MT 59923		
Email:		Phone:	(509) 945-0107 (Ann Watanabe, owner's agent)
AD Number:	AD-007047	BD Number:	BD-134000
Geounit:	4434	Type of Property:	Commercial
Notes: NOPEC Property			

INVESTIGATION SAMPLING PERSONNEL

It is the responsibility of the third-party¹ performing investigation sampling to coordinate oversight with ARP.

Person to Perform Sampling:	TBD	Homeowner or Contractor?	N/A
Estimated Sample Collection Date:	TBD		
ARP Personnel to Perform Oversight:	Stephanie Michalkiewicz		
ARP Contact Information (email/phone):	smichalkiewicz@libby.org 406-283-2446		

¹Third party can be property owner and/or contractor.

SAMPLE COLLECTION

Sample collection activities will be performed in accordance with this SOW, with oversight from ARP. The samples to be collected are identified in the table below; the associated chain of custody (COC) form with the corresponding sample identifications (IDs) is attached. The COC forms specifies the appropriate sample methods, sample IDs, and laboratory information (i.e., where to send the samples). If there are any deviations, please document on the COC form. When ready to ship, complete the sample collection date and time, sign and date to relinquish the samples, and enclose the COC in a plastic zipper-top bag and place in the shipping container.

Select the types of investigation samples that will be collected to characterize the property.

Exterior Sampling	Building Materials <input type="checkbox"/>	Soils <input checked="" type="checkbox"/>	Interior Sampling	Building Materials <input type="checkbox"/>	Soils <input type="checkbox"/>
Drawing(s) with sample locations attached:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>			
Has property owner provided ARP with a Consent to Access?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	If YES, attach the signed <i>Consent to Access</i> form. If NO, the sampling activities are not eligible for reimbursement.		
Has ARP provided information on BMPs?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	If YES, identify applicable BMPs:		
Has third-party received appropriate training from ARP on the sampling requirements, COC protocols, and DEQ's O&M Sampling Guidance?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	If YES, provide date of training: 2022		

Is a third-party insurance company involved?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	If YES, provide contact information to be eligible for reimbursement:
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ARP Notes:					
SAMPLE ID	MEDIA TYPE	SAMPLE GROUP	SAMPLE TYPE	LOCATION DESCRIPTION	NOTES:
007047-A (A)	Soil	SUA - Driveway	Composite	Lot	Collect one (1) composite of 30 subsamples
007047-B (B)	Soil	SUA - Driveway	Composite	Lot	Collect one (1) composite of 30 subsamples
007047-C (C)	Soil	SUA - Driveway	Composite	Lot	Collect one (1) composite of 30 subsamples
007047-D (D)	Soil	SUA - Driveway	Composite	Lot	Collect one (1) composite of 30 subsamples
007047-E (E)	Soil	LUA - Verge	Composite	Lot	Collect one (1) composite of 30 subsamples

REIMBURSEMENT ELIGIBLE SAMPLING COSTS

In order to be reimbursed for sampling, ARP must verify that sampling was completed in accordance with the approved SOW. It is the third-party's responsibility to coordinate sampling oversight with ARP. DEQ is paying the approved laboratory directly for analysis, so costs associated with the laboratory are not eligible for reimbursement.

Claims for actual costs should be submitted along with receipts upon completion of the work using the *204-Electronic Funds Transfer Sign Up* (attached) and *Substitute Form W-9* (attached). ARP has identified the following eligible sampling costs:

ELIGIBLE SAMPLING COSTS

MATERIALS

Item	Estimated Quantity	Approved Unit Cost
TBD	TBD	TBD

LABOR

Item	Estimated Quantity	Approved Unit Cost
TBD	TBD	TBD

SIGNATURE PAGE – INVESTIGATION SAMPLING

Please confirm that you have read and understand the following terms and conditions by checking the box:

- ☐ **Health & Safety Requirements:** LA is a hazardous substance that can increase the risk of cancer and result in serious non-cancer effects in people who are exposed by inhalation. Therefore, all individuals involved in the collection, packaging, and shipment of samples must comply with and enforce all federal, state, and local safety standards for Contractor's workers and its Subcontractor's workers on the project, protecting and indemnifying DEQ/ARP and its representatives from all claims, suits, damages or liabilities from all accidents or safety violations.
- ☐ **Not Liable for Damages:** The property owner shall indemnify and hold harmless the DEQ/ARP and the DEQ/ARP's officers and employees from all actions or claims brought because of injuries or damages to persons or property caused by any contractor hired by the property owner(s).
- ☐ **Reimbursement Disclaimer:** Payment is made for the actual quantities of work performed and accepted and/or the actual quantity of materials used and accepted under the approved SOW. Payment of work quantities that vary from the estimate quantities will be paid at the accepted unit costs. No consideration will be given to, and no payment will be made, for any claims for additional compensation outside of the approved SOW.

If a contractor is performing the investigation work, please review the terms and conditions below. If a contractor is not be used, select not applicable:

- ☐ **Not Applicable**
- ☐ **Payment to Contractor:** Upon approval and receipt of final documentation, DEQ will issue reimbursement check(s) directly to the property owner. It is the property owner's responsibility to ensure any contractors or subcontractors hired for the work are compensated in accordance with their contract, regardless of the status of DEQ reimbursement.
- ☐ **Licensing and Bonding for Contractor(s):** Property owner must ensure contractors are registered, insured, and bonded. Registration can be verified through the Montana's Department of Labor and Industry's website: <http://erd.dli.mt.gov/work-comp-regulations/montana-contractor>. Make sure your contractor has liability and workers' compensation insurance. A bond, which is an agreement with a third party, may be the only means to get compensation if your contractor fails to do the job or goes bankrupt after you have paid.

If the property owner or resident has questions or concerns, contact the ARP staff at **406-291-5335**.

By signing this form, the property owner is acknowledging and understanding the work to be performed under this SOW. Work may not commence until authorized by DEQ upon signature approval.

Prepared by:

Stephanie Michalkiewicz
Lincoln County Asbestos Resource Program

Date: _____

Reviewed and approved by:

Jason Rappe
Montana Department of Environmental Quality

Date: _____

Property Owner:


Nathan Weis

Date: 9-12-2023

Sampling information for GID 4434 (134 Parmenter Creek Rd), Libby MT (Nathan Weis)

Sampler must notify ARP 2 business days prior to sampling event.

ARP must be onsite during the sampling event

Sampling based on DI protocol

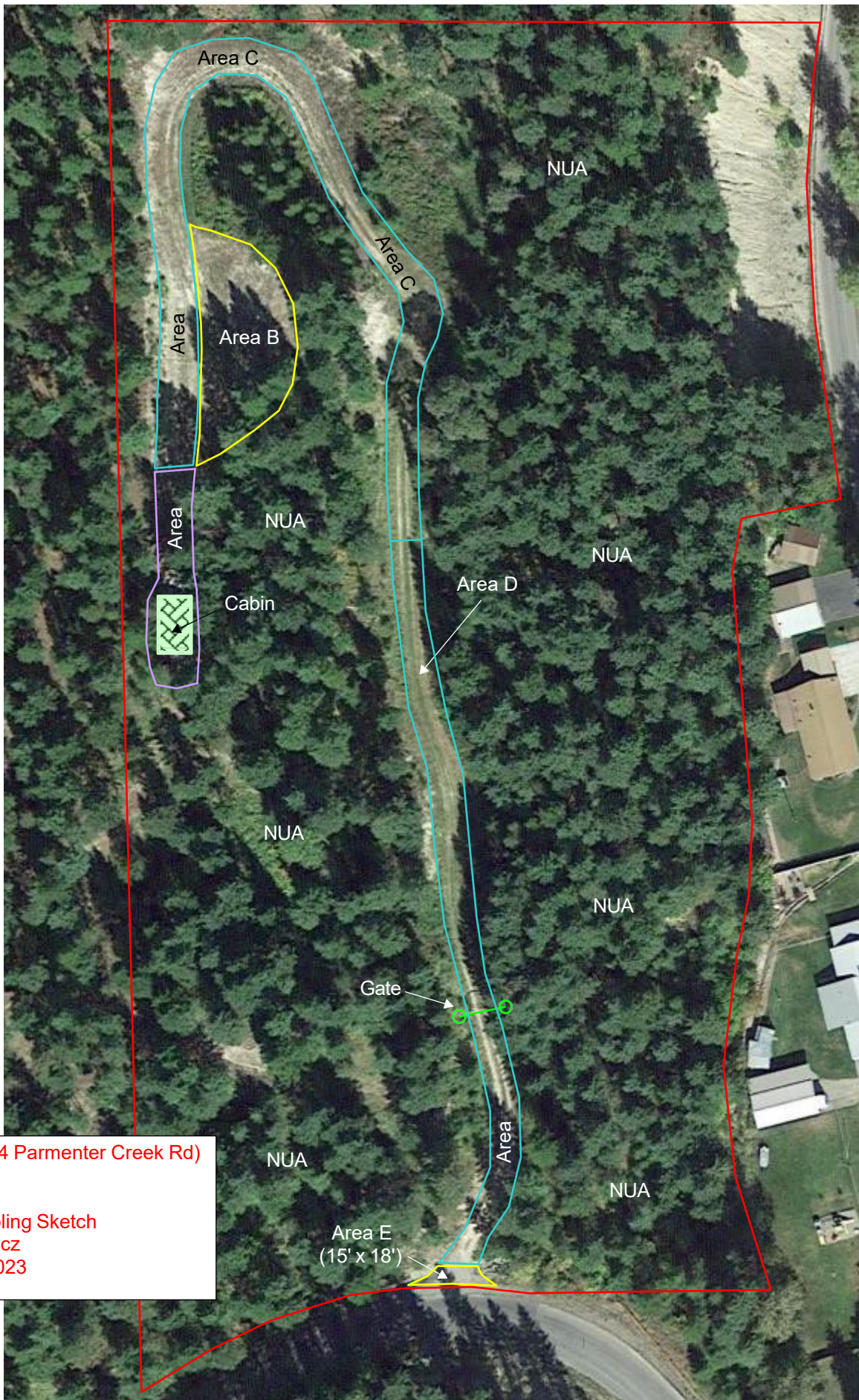
Sampling Requirements

1. Each sample area will consist of 30 aliquots
2. Each aliquot must be visually inspected for mine related materials before placing into sample bag
3. If mine related materials are observed, locations shall be marked on the sampling map and indicate high, medium, or low quantities

Best Management Practices (BMP's)

The following best management practices will be implemented while performing the sampling at the property:

1. Decontaminate sampling tools prior to first sample
2. Decontaminate tools after each area is sampled
3. Decontaminate sampling tools after the last sample is collected



GID 4434 (134 Parmenter Creek Rd)
AD-007047
Geounit 4434
ARP DI Sampling Sketch
S Michalkiewicz
September 2023

Nathan Reeves



ASBESTOS INSPECTION / CONSULTING

QUOTE

DATE 9/8/2023

Property Owner	Bill To
Customer Nathan Weis	Name Hawkeye Inspections Tim Harcourt
Address 134 ParamonterCrkRd(GID 4434)	Address 1105 Nevada Ave,Libby MT,59923
Phone 509-945-0107	Phone 602-380-7866
Payment Due N/A	Notes
Payment Terms Cash or check	

Qty.	Description	Unit Price	Line total
5	Soil Samples/ 5 Composite of 30 subsamples		250.00
1	Estimated shipping of 15lbs of soil		60.00
Subtotal			
Total			310.00

Tim Harcourt

602-380-7866 | tim.harcourt.cc@gmail.com

1105 Nevada Avenue | Libby, MT 59923 | Asbestos Building Inspector MT #6067

ZT Environmental LLC

317 California Ave
Libby, MT 59923

Invoice

Date	Invoice #
9/5/2023	ZT-205

Bill To
Nathan Weis 134 Parmenter Creek Libby, MT 59923

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
5	Field Sampling for AD-007047	125.00	625.00
		Total	\$625.00

BID SOLICITATION CHECKLIST FORM

Lincoln County Asbestos Resource Program

503 California Avenue, Libby, MT 59923

Phone: (406)291-5335 • Email: lcarp@libby.org

PROPERTY ADDRESS: <u>134 Parmenter Creek Road, Libby</u>
PROPERTY OWNER: <u>Nathan Weiss</u>
CONTACT PHONE: <u>(509) 945-0107 (Ann Watanabe)</u>
E-MAIL: <u>ann@inlandcell.com</u>

***DEQ/LCARP requires solicitation of bids from at least three (3) DEQ approved Asbestos Inspectors for inspection at the above listed property. Please list each inspector that a DEQ-ARP Scope of Work was submitted to and the method by which each was submitted and received.**

ASBESTOS INSPECTOR <u>Hawkeye Asbestos Inspection</u> <u>Tim Harcourt</u> <u>tim.harcourt.cc@gmail.com</u> <input checked="" type="checkbox"/> Bid Received <input type="checkbox"/> No Bid Received	METHOD BID SUBMITTED <input checked="" type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> In-person	DATE <u>9-1-23</u>
METHOD BID RECEIVED <input checked="" type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> In-person	DATE <u>9-8-23</u>	

ASBESTOS INSPECTOR <u>Kirby Environmental</u> <u>Bruce/Judy Kirby</u> <u>Info@Kirbyenvironmental.com</u> <input type="checkbox"/> Bid Received <input checked="" type="checkbox"/> No Bid Received	METHOD BID SUBMITTED <input checked="" type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> In-person	DATE <u>9-1-23</u>
METHOD BID RECEIVED <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> In-person	DATE <u>Ø</u>	

ASBESTOS INSPECTOR <u>ET Environmental LLC</u> <u>Zach McNew</u> <u>zach@libbyproperties.com</u> <input checked="" type="checkbox"/> Bid Received <input type="checkbox"/> No Bid Received	METHOD BID SUBMITTED <input checked="" type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> In-person	DATE <u>9-1-23</u>
METHOD BID RECEIVED <input checked="" type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> In-person	DATE <u>9-5-23</u>	

***PLEASE COMPLETE AND RETURN THIS FORM with attached bids or other bid communications. For any bid or refusal received by email, please forward the response email to lcarp@libby.org with the property address, confidential and**

Property Owner S

Date: 9-12-2023

Nathan Weiss